State Performance Plan / Annual Performance Report:
Part C

for
STATE FORMULA GRANT PROGRAMS
under the
Individuals with Disabilities Education Act

For reporting on
FFY18

PART C DUE February 3, 2020

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202
Introduction

Instructions
Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary
As required in the IDEA Federal Regulations, 34 CFR Parts 300 and 303, each Part C Lead Agency is charged by the Office of Special Education Programs (OSEP) to submit a State Performance Plan (SPP) to provide an analysis of its effectiveness in implementing the requirements of the Individuals with Disabilities Education Act (IDEA). Part C programs are required annually to report on the SPP in the state's Annual Performance Report (APR). Each state and territory must report on 11 SPP/APR indicators including baseline data and rigorous targets. Indicator targets are established by the Office of Special Education Programs of the U.S. Dept. of Education. Compliance indicators targets are set at 100%, while states set their own targets for performance indicators.

Performance reporting for the APR is gathered from multiple data sources including the Comprehensive Data System (CDS), program evaluation audits performed by the Quality Assurance/Monitoring staff, desk audits using program developed protocols, information from program service concerns reports, technical assistance visits and Part C Family Surveys. Information and data reported in the current SPP/APR covers the Federal Fiscal Year (FFY) 2018 (July 1, 2018- through June 30, 2019). Part C SPP/APR Indicators 1-10 are required to be submitted on or before February 3, 2020.

The State Systemic Improvement Plan (SSIP) is a five-year plan developed to improve the quality of early intervention services provided to infants and toddlers and their families through the state’s Part C system. SSIP’s were reported in three phases: Phase I- Analysis, Phase II- Planning, and Phase III- Implementation and Evaluation. The SSIP (Indicator 11) is submitted on or before April 2, 2020.

Arkansas’ SPP/APR were developed with input from stakeholders, including the Arkansas State Interagency Coordinating Council (AICC).

Arkansas Department of Human Services (ADHS) is the Lead Agency for the planning and implementation of the Part C grant. The Part C program is housed in the Division on Developmental Disability Services, and is responsible for grant management, oversight and accountability. First Connections is the official program name for the Arkansas Part C Program.

The Part C Program has five distinctive collaborative units that are responsible for the development and implementation of the First Connections Program: 1) Comprehensive System of Professional Development Management, 2) Quality Assurance Monitoring Licensure and Certification Management (QA), 3) Data Management, 4) Fiscal Management and 5) Program Management.

Agency staff within each unit reviews, develops, analyzes and coordinates all aspects of the First Connections Program.

General Supervision System

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

The state's General Supervision System is aligned with the federal regulations to ensure that Arkansas First Connections providers meet federal and state requirements. AR General Supervision System provides accountability through multiple components including a Comprehensive Data System (CDS), dispute resolution, integrated monitoring activities, and identification and correction of noncompliance. The Quality Assurance/Monitoring Unit (QA) provides oversight and enforcement by utilizing policies and procedures developed by the Arkansas Department of Human Services, Division of Developmental Disability Services.

QA Unit staff monitor to ensure that quality and compliance guidelines are adhered to by local early intervention providers. Individual child records are reviewed by the QA staff to ensure compliance with federal and state timelines and other agency related requirements. QA staff conduct child record reviews and provider files and early intervention providers with systemic issues receive onsite technical assistance.

Additionally, the QA Unit also perform numerous monitoring actions for each Part C provider to ensure the practices required under IDEA are met. First Connections staff conducts the following general supervision activities:

- Collection and Analysis of program data (including fiscal reports)
- Verification of data for the SPP/APR compliance and results indicator
- Public Reporting of SPP/APR data
- Issuing findings of noncompliance and confirming correction of noncompliance
- Determination for local programs in meeting the requirements of IDEA
- Provide targeted technical assistance
- Provide training and professional development related to requirements

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

Provider support is a unified effort that guides staff and EI providers in building their capacity to serve Arkansas families. Technical Assistance (TA) to support EI providers is provided through various systems within the State’s Part C program. During the fiscal year, each unit (CSPD, QA/Monitoring, Data, Program Management and Fiscal) provides technical assistance related to their specific content area as needed to support EI providers who serve Arkansas children and families. Part C’s technical assistance is geared toward the precise needs of the local providers. Assistance is determined in many ways: EI provider request, QA monitor identified need, EI provider survey; fiscal unit identified need; data unit identified need; service coordinator...
identified areas of concern, issues completing job-related tasks noted in training, and frequently asked questions across units within First Connections.

Arkansas’ Comprehensive System of Personnel Development (CSPD) provides professional development, technical assistance, and guidance to support early intervention service providers and service coordinators in providing supports that improve results for infants and toddlers with disabilities and their families. Formal and informal needs assessments are conducted to define personnel development needs. Examples of informal assessment of training and personnel development needs include data review, QA Unit monitoring reports, provider requests, IFSP quality ratings using a standardized rating tool and frequently asked questions. Methods of formally assessing areas of need in personnel development include provider surveys and focus groups, and TA request topics.

EI Professionals gain access to a training calendar within the program’s Comprehensive Data System (CDS). The system provides details of upcoming PD or TA opportunities and registration links. The training calendar is updated quarterly and lists all scheduled PD and TA opportunities. First Connections provides a variety of training and technical assistance activities:

- “Lunch and Learn” live Webinars at noon on narrow topics of need and/or interest
- Recorded Webinars linked to the program’s Web site
- Self-study guides
- Work samples based on case studies
- Site TA at an EI provider program with their Part C provider staff when provider requests intensive TA on topics identified by the provider
- One on one assistance via Zoom or Skype
- Policy information and guidance via email, telephone, or Skype
- Lead Agency issues written policy briefs or clarifications on identified issues.

Technical assistance offerings are planned across units within First Connections to address program needs in areas of compliance and quality. The CSPD team develops new courses and/or materials or updates existing professional development courses as needed to address:

a. State or federal policy requirement changes
b. Report of identified topical need from one or more units
c. Needed improvement based on OSEP DMR and/or Determination
d. Provider(s) requests for more in-depth information and frequent questions related to policy or procedure
e. SSIP strategy implementation/focus areas require a change or more in-depth coverage of a procedure, topic, etc.
f. New information is obtained on principles/best practices from a national TA partner, a Part C-related webinar or conference, and/or from CSPD Unit research

First Connections’ (FC) staff are provided ongoing technical assistance, training, and support through quarterly staff meetings and face to face training on specific topics. Staff needs are identified collaboratively by program unit managers: the state service coordinators, QA Unit, Fiscal Unit, and Data Unit based on record review, parent and/or provider reported concerns or complaints, recurring errors, and staff TA requests/questions.

Staff/Peer Coaches provide support and consultation. These Staff/Peer Coaches receive ongoing training to serve as peer mentors and use a strengths-based approach. This arrangement provides growth opportunities for the coach, support for colleagues, and has shown to be an effective mechanism for professional development.

Professional Development System:

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

First Connections Comprehensive System of Personnel Development (CSPD) involves many organized elements that include: policy development, creating PD and TA around provider requests and/or program identified needs, coordinating staff development/in-service, providing PD and TA in a variety of formats, developing training to prepare staff and select EI practitioners to serve as peer mentors/coaches, and developing tools for providers and the program (e.g., a Delivered Services Notes Checklist for therapy providers). Part C professional development strives to promote the use of recommended and evidence-based practices to ensure positive outcomes for children and families. Personnel development is provided in a variety of ways to meet the needs of the EI Professionals and the First Connections’ (FC) program. Pre and post assessments and submitted work samples are used to evaluate the effectiveness of training.

The Professional Development Unit Manager ensures that First Connections (FC) PD and TA is high-quality and evidence-based training. CSPD staff and TA providers from other FC units reference the philosophy and guiding principles of Early Intervention, IDEA guidelines, First Connections policy & procedures, and DEC Recommended Practices in all training materials, QA sessions/discussions, and written responses.

Arkansas’ CSPD Unit staff is supported by program administration in maintaining their own professional development in order to stay abreast of current trends in the field of early learning/early intervention; staff is provided current literature on routines-based intervention, principles and practices of natural environment, family engagement, and coaching/consultative approaches in early intervention. Part C staff has received training in principles of adult learning as well as principles of peer to peer coaching.

Professional development workshops and webinars are comprised of a combination of lecture (with visual representations in the form of screen shots, diagrams, graphs, videos), reflective activities, self-assessments, discussion, and “putting it into practice” (application activities) to support adult learning. Attendees of the workshops and webinars are provided “take-away” copies of slides, handouts, and additional resources and references to extend learning and supplement presentations. Feedback on the content and quality of training/TA/workshops is obtained from participants by requiring them to complete an anonymous course evaluation form. The course evaluation form requires the participant to rate the usefulness of the information, the quality of the materials/presentation, and skills of the trainer. The form also provides space for the practitioner to write in suggestions for improvement and/or to identify other needed topics for future PD.

The different units within First Connections meet on a regular basis, discuss issues, examine program data to identify strengths and needs and to determine training and technical assistance needs of service coordinators and direct service providers. First Connections’ units work together to provide training in a variety of ways that include:
• QA may require training on a topic identified in a monitoring review and require the provider with non-compliance to schedule training on that area within a set period. The CSPD unit then works with the provider to develop content and training to increase knowledge and understanding related achieving compliance and making progress (in-person or via webinars). Some PD requires the provider program to submit work samples to the CSPD unit for review and feedback to ensure that the skill trained has been applied by the provider team. All provider programs participating in training are offered the opportunity to have ongoing follow up with the CSPD unit at quarterly intervals to support their implementation of new skills.

• QA may require more intensive targeted training as part of a Corrective Action Plan (CAP) when a provider or provider program is out of compliance. The provider or provider organization is given a time limit by which to complete the activities with the CSPD unit.

• QA monitor may recommend training on a topic of identified need based on frequently asked questions and/or provider requests for support and/or information or based on areas that are not out of compliance but show minor discrepancies or low quality. The monitor may route an individual provider or a provider program to complete a recorded online webinar, attend a regularly scheduled PD workshop, or provide self-study guides developed by the CSPD Unit on a specific topic.

• QA monitor may recommend training on a topic of identified need (based on provider questions and/or minor inconsistencies in files reviewed) and refer the provider administrator to contact the CSPD Unit for individualized on-site or web-based support.

One way that personnel development is delivered is through live web-based training on narrow topics identified by provider focus groups and the FC QA and Data Units. The live Web trainings cover topics like "using the results of family assessment to create functional goals with families," "working with families to create a family goal on the IFSP," "targeting and retargeting outcomes,"“timing transition.” Other personnel development is provided through recorded Web training that professionals can access at their own time, place, and pace. Recorded Web training courses include a post-assessment to ensure that participants gain and retain key concepts in order to receive their certificate of completion (after meeting or exceeding the 70% cut off score on the post-assessment). Face to face workshops are reserved for training skills EI professionals need on the job such as completing COS ratings with the family as a team, conducting screenings and reviewing the results with families, completing the First Connections Child and Family Assessment via family interview, and using the result of the family assessment at the IFSP meeting to help the family create meaningful, functional IFSP outcomes. “Hands on” skills training in face to face workshops incorporates small group activities where members assume the various roles present in an IFSP team to complete the task using case studies and role play.

First Connections receives high quality Technical Assistance and valuable resources from our national partners: Early Childhood Technical Assistance Center (ECTA Center), IDEA Early Childhood Data System (DaSy), IDEA Data Center (IDC), and National Center for Systemic Improvement (NCSI). Throughout the reporting period, Lead Agency staff have benefited from conference calls, webinars, and other professional development opportunities made available through OSEP and OSEP national technical assistance programs. Unit managers and the Part C Coordinator attend national conferences and other Part C-related meetings and bring back information to share with staff to ensure ongoing professional development for First Connections’ staff.

Stakeholder Involvement: The mechanism for soliciting broad stakeholder input on targets in the SPP/APR, and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 11, the State’s Systemic Improvement Plan (SSIP).

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas’ State Interagency Coordinating Council (AICC) continues to service as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various mean, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an on-going basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

During the program period year, First Connections collaborated with numerous partners to improve the delivery of supports and services. Partners include: Arkansas Department of Health, Arkansas Department of Education, Arkansas’ Children’s Hospital, Title V, Quality Assurance Sub Committee, Arkansas Medicaid, Safe Babies Court Team, Arkansas Association for Infant Mental Health, Arkansas Fetal Alcohol Spectrum Disorder, Head Start Association, Human Services Personnel Office, Arkansas School for the Deaf, Arkansas Early Intervention Providers, Zero to Three, the Division of Child Care and Early Childhood Education, Division of Children and Family Services, Arkansas Disability Coalition, the Division of Developmental Disabilities Services, and Women, Infants, and Children (WIC) Program.

Apply stakeholder involvement from introduction to all Part C results indicators (y/n)

YES

Reporting to the Public:

How and where the State reported to the public on the FFY 2017 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2017 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2017 APR in 2019, is available. Arkansas’ SPP/APR can be found on the First Connections website at www.dhs.arkansas.gov/dds/firstconnectionsweb/#fc-home. Per federal requirements, the Lead Agency reported to the public on the performance of each AEIS provider no later than 120 days following the submission of the 2017 APR. AEIS provider report cards posted on the state’s website displays the performance of each local early intervention program and status in meeting the state’s rigorous targets. Additionally, the QA/ Monitoring staff completed annual determinations for all Arkansas Early Intervention Service providers.

Intro - Prior FFY Required Actions

None
Intro - OSEP Response

States were instructed to submit Phase III, Year Four, of the State Systemic Improvement Plan (SSIP), indicator C-11, by April 1, 2020. The State provided the required information. The State provided a FFY 2019 target for Indicator C-11/SSIP, and OSEP accepts that target.

Intro - Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State's capacity to improve its SiMR data.

OSEP notes that one or more of the attachments included in the State’s FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.
Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

Compliance indicator: Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

Data Source
Data to be taken from monitoring or State data system and must be based on actual, not an average, number of days. Include the State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

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

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

Instructions
If data are from State monitoring, describe the method used to select early intervention service (EIS) programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

The State’s timeliness measure for this indicator must be either: (1) a time period that runs from when the parent consents to IFSP services; or (2) the IFSP initiation date (established by the IFSP Team, including the parent).

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs’ (OSEP’s) response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>94.90%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td>2013</td>
<td>2014</td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Data</td>
<td>88.52%</td>
<td>93.00%</td>
</tr>
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</table>

Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner</th>
<th>Total number of infants and toddlers with IFSPs</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>451</td>
<td>534</td>
<td>92.36%</td>
<td>100%</td>
<td>92.32%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Number of documented delays attributable to exceptional family circumstances

This number will be added to the “Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner” field above to calculate the numerator for this indicator.
Include your State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

As written in the First Connections Policy and Procedure Manual, Arkansas defines timely as 30 days from the date that the provider signed consent for services on the IFSP. First Connections policy requires that Part C services be implemented as soon as possible (but not later than 30 days) from parental consent. The requirement also includes the initial IFSP as well as services added later.

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

State database

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

February 01, 2018 - April 30, 2019 to represent selection from the fiscal year 2018.

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

Arkansas First Connections Comprehensive Data System (CDS) collects and displays data that accurately reflects the status of the infant and toddler records at any given period. In addition, the Data Unit staff have direct access to individual electronic record of each provider that allows agency staff to provide clarification and guidance and to address provider concerns connected to the families that they support and serve. The First Connections data system allows for a direct flow of information from each user in the states system. Caseload data, including individual files for children, within the CDS includes the start data of the IFSP and the first date of service of the child, as indicated on the Individualized Family Service Plan.

Indicator 1 data was collected from the Comprehensive Data System (CDS). Data Unit staff used the inquiry process to authenticate the data gathered in the CDS. Local service providers and state service coordinators submit program data for proper analysis and verification. Early Intervention providers and state service coordinators use the data system to generate an electronic file for each infant and toddler that is served by the First Connections Program.

IFSP's with dates starting February 1, 2019 - April 30, 2019 were collected by the First Connections Data Unit. AEIS providers and state service coordinators were sent personalized information for verification and submission to the Part C program. Arkansas Data Manager selected this time period to ensure the highest quality of program data. The selection of the period closest to the end of the year allows state service coordinators and AEIS providers the additional time to improve their ability to manage the intricacy of the CDS. Additionally, this period allowed the Data Manager sufficient time to validate the data collected. Lead Agency staff analyzed the information collected by for this time period compared to data for the full year (FFY2018) and determined that it is representative of a full year. The reported data includes all areas of the state, all provider types and all categories of eligible infants and toddlers.

If needed, provide additional information about this indicator here.

Lead Agency staff determined that AEIS providers are having difficulty in obtaining prescriptions from physicians for services in a timely manner. Ongoing technical assistance is provided to the medical community regarding the importance of early intervention services. First Connections conducts monthly presentations to Pediatric Residents at Dennis Developmental Center to provide a one hour informative lecture and Q/A session entitled “Overview of Early Intervention, Eligibility, and How to Refer.” The program also coordinates two monthly EI Observations (on location) for the Pediatric Residents through a partnership with EI Providers to provide residents with an “in the field” opportunity to observe early intervention sessions.

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Arkansas Quality Assurance/Monitoring staff monitor the correction of a noncompliance for Part C providers. In accordance with program requirements, First Connections staff will issue the AEIS provider a written finding of noncompliance, upon the identification of noncompliance. The AEIS provider will receive a written notification that includes the regulatory citation and require correction of noncompliance in 90 days or no later than 1 year of the date of notification.

As it relates to the compliance in the timely provision of services, the First Connections monitoring guidelines directs the monitoring staff to examine a percentage of early intervention provider files. This review is conducted to ensure that all infants and toddlers receive services listed on the IFSP within 30 days of the parental consent.

In order to verify that Arkansas Part C providers are correctly implementing the regulatory requirements, First Connections staff examine a percentage of updated files from AEIS providers with previously identified noncompliance to determine if providers are initiating services of subsequent infants and toddlers in the required timeframe. First Connections staff conducted this procedure in accordance with guidance provided in OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As required in the guidance, Arkansas Part C monitoring staff determined that each AEIS provider for whom data formerly showed noncompliance has corrected the noncompliance and is correctly implementing the regulatory requirement for infants and toddlers with IFSPs to receive their services as indicated on the IFSP.

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

With respect to ensuring correction, each individual record for whom services were not started within 30 days of parents’ consent, is examined by the monitoring staff to ensure that children were receiving services as directed on their Individual Family Service Plan. Record review by Lead Agency staff specified that children who had not previously received timely services were indeed receiving the services on the IFSP, although late.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

In the instance that noncompliance is not corrected, Arkansas Part C staff has the option of assigning multiple levels of enforcement actions. Per the program guidance, Lead Agency staff will review case related information from the assigned provider and determine if they meet the requirements for correcting noncompliance as outlined in the procedures. If correction has not occurred, the AEIS provider is required to complete specific corrective or improvement activities within a specified timeframe. Activities may include the following: targeted technical assistance, corrective action plan, directed training plan, additional actions maybe taken based on the level of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2017
1 - Prior FFY Required Actions

None

1 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2018-June 30, 2019). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2018 SPP/APR, that the remaining two uncorrected findings of noncompliance identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2018 and each EIS program or provider with remaining noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

1 - Required Actions
Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings. (20 U.S.C. 1416(a)(3)(A) and 1442)

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

Sampling from the State’s 618 data is not allowed.

Describe the results of the calculations and compare the results to the target.

The data reported in this indicator should be consistent with the State’s 618 data reported in Table 2. If not, explain.

2 - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>62.95%</th>
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</thead>
</table>

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<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target&gt;=</td>
<td>70.00%</td>
<td>73.00%</td>
<td>76.00%</td>
<td>79.00%</td>
<td>82.00%</td>
</tr>
<tr>
<td>Data</td>
<td>74.38%</td>
<td>74.48%</td>
<td>76.28%</td>
<td>83.91%</td>
<td>90.16%</td>
</tr>
</tbody>
</table>

Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target&gt;=</td>
<td>85.00%</td>
<td>85.00%</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas’ State Interagency Coordinating Council (AICC) continues to service as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various means, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an on-going basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

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Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</td>
<td>912</td>
</tr>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Total number of infants and toddlers with IFSPs</td>
<td>964</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data
<table>
<thead>
<tr>
<th>Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</th>
<th>Total number of Infants and toddlers with IFSPs</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>912</td>
<td>964</td>
<td>90.16%</td>
<td>85.00%</td>
<td>94.61%</td>
<td>Met Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions
None

2 - OSEP Response
The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

2 - Required Actions
Indicator 3: Early Childhood Outcomes
Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source
State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:
Percent = [(# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d)) divided by (# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (d))] times 100.

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

Measurement for Summary Statement 2:
Percent = [(# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e)) divided by (# of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

Sampling of infants and toddlers with IFSPs is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions page 2 for additional instructions on sampling.)

In the measurement, include in the numerator and denominator only infants and toddlers with IFSPs who received early intervention services for at least six months before exiting the Part C program.

Report: (1) the number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting data under Section 618 of the IDEA; and (2) the number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements.

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining “comparable to same-aged peers.” If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Process (COS), then the criteria for defining “comparable to same-aged peers” has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

If the State’s Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i), the State must report data in two ways. First, it must report on all eligible children but exclude its at-risk infants and toddlers (i.e., include just those infants and toddlers experiencing developmental delay (or “developmentally delayed children”) or having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay (or “children with diagnosed conditions”)). Second, the State must separately report outcome data on either: (1) just its at-risk infants and toddlers; or (2) aggregated performance data on all of the infants and toddlers it serves under Part C (including developmentally delayed children, children with diagnosed conditions, and at-risk infants and toddlers).
### 3 - Indicator Data

**Does your State’s Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i)? (yes/no)**

**NO**

**Targets: Description of Stakeholder Input**

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas’ State Interagency Coordinating Council (AICC) continues to service as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various mean, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an on-going basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

During the program period year, First Connections collaborated with numerous partners to improve the delivery of supports and services. Partners include: Arkansas Department of Health, Arkansas Department of Education, Arkansas’ Children’s Hospital, Title V, Quality Assurance Sub Committee, Arkansas Medicaid, Safe Babies Court Team, Arkansas Association for Infant Mental Health, Arkansas Fetal Alcohol Spectrum Disorder, Head Start Association, Human Services Personnel Office, Arkansas School for the Deaf, Arkansas Early Intervention Providers, Zero to Three, the Division of Child Care and Early Childhood Education, Division of Children and Family Services, Arkansas Disability Coalition, the Division of Developmental Disabilities Services, and Women, Infants, and Children (WIC) Program.

### Historical Data

<table>
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<tr>
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<th>2016</th>
<th>2017</th>
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<td>2008</td>
<td>Target&gt;=</td>
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<td>62.00%</td>
<td>63.00%</td>
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<tr>
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<td>A2</td>
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<tr>
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<tr>
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<td>79.01%</td>
<td>65.83%</td>
<td>87.95%</td>
</tr>
<tr>
<td>C2</td>
<td>2008</td>
<td>Target&gt;=</td>
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<td>30.00%</td>
<td>32.00%</td>
<td>33.00%</td>
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<td>C2</td>
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<td>41.46%</td>
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### Targets

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<tr>
<td>Target A1&gt;=</td>
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<td>65.50%</td>
</tr>
<tr>
<td>Target A2&gt;=</td>
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<td>32.25%</td>
</tr>
<tr>
<td>Target B1&gt;=</td>
<td>63.00%</td>
<td>63.25%</td>
</tr>
<tr>
<td>Target B2&gt;=</td>
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<td>34.25%</td>
</tr>
<tr>
<td>Target C1&gt;=</td>
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</tr>
<tr>
<td>Target C2&gt;=</td>
<td>34.00%</td>
<td>34.25%</td>
</tr>
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</table>

**FFY 2018 SPP/APR Data**

**Number of infants and toddlers with IFSPs assessed**

755

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

<table>
<thead>
<tr>
<th></th>
<th>Number of children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>18</td>
<td>2.38%</td>
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<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>144</td>
<td>19.07%</td>
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### Part C

<table>
<thead>
<tr>
<th>Number of children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>238</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>268</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>87</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program</td>
<td>506</td>
<td>668</td>
<td>79.70%</td>
<td>65.00%</td>
<td>75.75%</td>
<td>Met Target</td>
</tr>
<tr>
<td>A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program</td>
<td>355</td>
<td>755</td>
<td>51.47%</td>
<td>32.00%</td>
<td>47.02%</td>
<td>Met Target</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>26</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>174</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>258</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>221</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>55</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Numerator</th>
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<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program</td>
<td>479</td>
<td>679</td>
<td>73.56%</td>
<td>63.00%</td>
<td>70.54%</td>
<td>Met Target</td>
</tr>
<tr>
<td>B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program</td>
<td>276</td>
<td>734</td>
<td>42.76%</td>
<td>34.00%</td>
<td>37.60%</td>
<td>Met Target</td>
</tr>
</tbody>
</table>

### Outcome C: Use of appropriate behaviors to meet their needs

<table>
<thead>
<tr>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>26</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>174</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>258</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>229</td>
</tr>
<tr>
<td>Number of Children</td>
<td>Percentage of Total</td>
</tr>
<tr>
<td>--------------------</td>
<td>--------------------</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>68</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program</td>
<td>487</td>
<td>687</td>
<td>75.56%</td>
<td>63.25%</td>
<td>70.89%</td>
<td>Met Target</td>
</tr>
<tr>
<td>C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program</td>
<td>297</td>
<td>755</td>
<td>47.72%</td>
<td>34.00%</td>
<td>39.34%</td>
<td>Met Target</td>
</tr>
</tbody>
</table>

The number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s part C exiting 618 data</td>
<td>1,108</td>
</tr>
<tr>
<td>The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.</td>
<td>303</td>
</tr>
</tbody>
</table>

**Was sampling used?**

**Yes / No**

**Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)**

**YES**

**List the instruments and procedures used to gather data for this indicator.**

The instruments used were the exiting data along with the child outcomes summary data. The Data Manager compared the two sets of data making sure that the program had a summary form for every child that exited and who met the criteria of receiving services for at least six months.

**Provide additional information about this indicator (optional)**

**3 - Prior FFY Required Actions**

None

**3 - OSEP Response**

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

**3 - Required Actions**
Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source
State selected data source. State must describe the data source in the SPP/APR.

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.

Instructions

Sampling of families participating in Part C is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions page 2 for additional instructions on sampling.)

Provide the actual numbers used in the calculation.

Describe the results of the calculations and compare the results to the target.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of families to whom the surveys were distributed.

Include the State’s analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program. States should consider categories such as race and ethnicity, age of the infant or toddler, and geographic location in the State.

If the analysis shows that the demographics of the families responding are not representative of the demographics of infants, toddlers, and families enrolled in the Part C program, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to families (e.g., by mail, by e-mail, on-line, by telephone, in-person), if a survey was used, and how responses were collected.

States are encouraged to work in collaboration with their OSEP-funded parent centers in collecting data.

4 - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th></th>
<th>Baseline</th>
<th>FFY</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
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<td>A</td>
<td>2006</td>
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<td>88.00%</td>
</tr>
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<td>A</td>
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<td>Data</td>
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<td>78.96%</td>
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<td>86.00%</td>
</tr>
<tr>
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<td>Data</td>
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<td>84.00%</td>
<td>86.00%</td>
<td>88.00%</td>
</tr>
<tr>
<td>C</td>
<td>71.00%</td>
<td>Data</td>
<td>80.00%</td>
<td>87.84%</td>
<td>85.55%</td>
<td>89.16%</td>
<td>86.95%</td>
</tr>
</tbody>
</table>

Targets

<table>
<thead>
<tr>
<th></th>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target A&gt;=</td>
<td>90.00%</td>
<td>90.25%</td>
<td></td>
</tr>
<tr>
<td>Target B&gt;=</td>
<td>90.00%</td>
<td>90.25%</td>
<td></td>
</tr>
<tr>
<td>Target C&gt;=</td>
<td>90.00%</td>
<td>90.25%</td>
<td></td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas’ State Interagency Coordinating Council (AICC) continues to service as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various mean, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an on-going basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

During the program period year, First Connections collaborated with numerous partners to improve the delivery of supports and services. Partners
Part C Data Unit staff analyzed the Family Outcome Survey information regarding the percentage of families’ participation in Part C.

Provide reasons for part C slippage

In an effort to ensure that State Service Coordinators and AEIS providers meet the needs of Arkansas Part C families, the Lead Agency has emphasized the family’s role in early intervention and will continue to support providers understanding of the importance of families. The state office experienced some temporary vacancies through retirement of key staff. These required the office to shift some responsibilities until we were able to become fully staffed again.

Analysis conducted by the Lead Agency Data Unit staff reported that the Part C Program has done a good job in assisting them with knowing their rights, however some families may require additional support in order to relate meaningful improvement. The Lead Agency will work with Arkansas Early Intervention Providers (AEIS) and State Service Coordinators to ensure that they are providing parents with proper information regarding their child and family rights.

Provide reasons for part B slippage, if applicable

First Connections Data Manager reviewed survey information received from Arkansas families related to the percentage of families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs. The comparisons of data between FFY 2017 and 2018 indicated a minor decline in the overall percent of parents that reported that early intervention services have helped them know their rights. Survey data compared between FFY 2017 and 2018 showed a decrease in the percentage of parents that reported that early intervention services have helped them know their rights.

Over the past several years the Lead Agency has opened enrollment and approved admitted a number of new providers. The state has emphasized training related to the family’s role in early intervention and will continue to support providers understanding of the importance of families. The state office experienced some temporary vacancies through retirement of key staff. These required the office to shift some responsibilities until we were able to become fully staffed again.

Analysis conducted by the Lead Agency Data Unit staff reported that the Part C Program has done a good job in assisting them with knowing their rights, however some families may require additional support in order to relate meaningful improvement. The Lead Agency will work with Arkansas Early Intervention Providers (AEIS) and State Service Coordinators to ensure that they are providing parents with proper information regarding their child and family rights.

Provide reasons for part C slippage, if applicable

Part C Data Unit staff analyzed the Family Outcome Survey information regarding the percentage of families’ participation in the early intervention program who reported that early intervention services have helped the family help their children develop and learn. Over the past several years the Lead Agency has opened enrollment and approved admitted a number of new providers. The state has emphasized training related to the family’s role in

### FFY 2018 SPP/APR Data

| The number of families to whom surveys were distributed | 1,918 |
| Number of respondent families participating in Part C | 447 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 346 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 440 |
| B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs | 380 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children’s needs | 443 |
| C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn | 380 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 447 |

<table>
<thead>
<tr>
<th>A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>82.98%</td>
<td>90.00%</td>
<td>78.64%</td>
<td>Did Not Meet Target</td>
<td>Slippage</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs (B1 divided by B2)</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>87.86%</td>
<td>90.00%</td>
<td>85.78%</td>
<td>Did Not Meet Target</td>
<td>Slippage</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>86.95%</td>
<td>90.00%</td>
<td>85.01%</td>
<td>Did Not Meet Target</td>
<td>Slippage</td>
<td></td>
</tr>
</tbody>
</table>

Provide reasons for part A slippage, if applicable

The Lead Agency summarized the survey responses from families participating in Part C who report that early intervention services helped the family know their rights. Survey data compared between FFY 2017 and 2018 showed a decrease in the percentage of parents that reported that early intervention services have helped them know their rights under Part C of IDEA.

Over the past several years the Lead Agency has opened enrollment and approved admitted a number of new providers. The state has emphasized training related to the family’s role in early intervention and will continue to support providers understanding of the importance of families. The state office experienced some temporary vacancies through retirement of key staff. These required the office to shift some responsibilities until we were able to become fully staffed again.

Analysis conducted by the Lead Agency Data Unit staff reported that the Part C Program has done a good job in assisting them with knowing their rights, however some families may require additional support in order to relate meaningful improvement. The Lead Agency will work with Arkansas Early Intervention Providers (AEIS) and State Service Coordinators to ensure that they are providing parents with proper information regarding their child and family rights.

Provide reasons for part B slippage, if applicable

First Connections Data Manager reviewed survey information received from Arkansas families related to the percentage of families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs. The comparisons of data between FFY 2017 and 2018 indicated a minor decline in the overall percent of parents that reported that early intervention services have helped them know their rights. Survey data compared between FFY 2017 and 2018 showed a decrease in the percentage of parents that reported that early intervention services have helped them know their rights.

Over the past several years the Lead Agency has opened enrollment and approved admitted a number of new providers. The state has emphasized training related to the family’s role in early intervention and will continue to support providers understanding of the importance of families. The state office experienced some temporary vacancies through retirement of key staff. These required the office to shift some responsibilities until we were able to become fully staffed again.

Analysis conducted by the Lead Agency Data Unit staff reported that the Part C Program has done a good job in assisting them with knowing their rights, however some families may require additional support in order to relate meaningful improvement. The Lead Agency will work with Arkansas Early Intervention Providers (AEIS) and State Service Coordinators to ensure that they are providing parents with proper information regarding their child and family rights.

Provide reasons for part C slippage, if applicable

Part C Data Unit staff analyzed the Family Outcome Survey information regarding the percentage of families’ participation in the early intervention program who reported that early intervention services have helped the family help their children develop and learn. Over the past several years the Lead Agency has opened enrollment and approved admitted a number of new providers. The state has emphasized training related to the family’s role in

Part C
early intervention and will continue to support providers understanding of the importance of families. The state office experienced some temporary vacancies through retirement of key staff. These required the office to shift some responsibilities until we were able to become fully staffed again.

Data summary indicated that Part C parents have received a lot of tools and resources, but still may require additional support and guidance. Ongoing training and technical assistance are provided by the First Connections Administrative team. The professional development provided by program staff affords AEIS providers and state service coordinators the guidance needed to support families in helping their child develop and learn. Additionally, tools and documents developed as part of the states SSIP work, can be used with families to assist with program improvement.

<table>
<thead>
<tr>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was sampling used?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was a collection tool used?</td>
</tr>
<tr>
<td>If yes, is it a new or revised collection tool?</td>
</tr>
</tbody>
</table>

The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.

During the reporting period Part C families were giving an opportunity to provide valuable information by participating in the family survey process. Arkansas’ First Connections program distributed over 1918 surveys to families of infants and toddlers with active IFSPs during the FFY 2018 reporting period. For FFY 2018 Arkansas Part C had a 23.20 % survey response rate, which is an improvement from the previous year response rate of 22.00 %. The Data Unit staff provided hard copy surveys to all AEIS providers and state service coordinator’s. Additionally, Part C parents were given an opportunity to respond to the survey request through the First Connections website and via telephone. Per the Family Survey guidelines, demographic information was collected from all respondents and is listed as following: child’s AEIS provider, county of residence, and race and ethnicity. Survey responses was received by the Lead Agency from 447 families from around the state which shows representation of all areas of the state by race and ethnicity categories. Also, Arkansas Part C staff reviewed the programs surveyed and determined that they were representative of the population of families in the First Connections program.

Provide additional information about this indicator (optional)

4 - Prior FFY Required Actions
None

4 - OSEP Response
The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

4 - Required Actions
**Indicator 5: Child Find (Birth to One)**

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts Metadata and Process System (EMAPS)) and Census (for the denominator).

**Measurement**

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

**Instructions**

Sampling from the State's 618 data is not allowed.

Describe the results of the calculations and compare the results to the target and to national data. The data reported in this indicator should be consistent with the State's reported 618 data reported in Table 1. If not, explain why.

### 5 - Indicator Data

**Historical Data**

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>0.39%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFY 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFY 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFY 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFY 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFY 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFY 2019</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Target >=

| Target >= | 0.45% | 0.45% |
| Data      | 0.44% | 0.36% |
|           | 1.56% | 1.10% |

#### Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target &gt;=</td>
<td>0.50%</td>
<td>0.51%</td>
</tr>
</tbody>
</table>

**Targets: Description of Stakeholder Input**

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas' State Interagency Coordinating Council (AICC) continues to service as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various means, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an ongoing basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

During the program period year, First Connections collaborated with numerous partners to improve the delivery of supports and services. Partners include: Arkansas Department of Health, Arkansas Department of Education, Arkansas' Children's Hospital, Title V, Quality Assurance Sub Committee, Arkansas Medicaid, Safe Babies Court Team, Arkansas Association for Infant Mental Health, Arkansas Fetal Alcohol Spectrum Disorder, Head Start Association, Human Services Personnel Office, Arkansas School for the Deaf, Arkansas Early Intervention Providers, Zero to Three, the Division of Child Care and Early Childhood Education, Division of Children and Family Services, Arkansas Disability Coalition, the Division of Developmental Disabilities Services, and Women, Infants, and Children (WIC) Program.

**Prepopulated Data**

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers birth to 1 with IFSPs</td>
<td>230</td>
</tr>
<tr>
<td>Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin</td>
<td>06/20/2019</td>
<td>Population of infants and toddlers birth to 1</td>
<td>36,901</td>
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</tbody>
</table>

**FFY 2018 SPP/APR Data**

<table>
<thead>
<tr>
<th>Number of infants and toddlers birth to 1 with IFSPs</th>
<th>Population of infants and toddlers birth to 1</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>230</td>
<td>36,901</td>
<td>0.65%</td>
<td>0.50%</td>
<td>0.62%</td>
<td>Met Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Compare your results to the national data

Arkansas First Connections served 0.65 percent of the population of children (0-1) compared to the national average of 1.25. Further analysis of the state's child count data compared to data across several states with similar demographics: AL, GA, MS, TN, KY, SC. Except for Tennessee, the other states serve less than one percent birth to one. Child find in Arkansas remains a challenge and thus leads to additional opportunities for the program to collaborate with partners to strengthen program participation. Additional work remains to be done to be done to improve data with regards to this area.
Throughout the reporting period, First Connections staff participated in the ongoing review of activities outlined in the Child Find Plan. This evaluation process allows the program to implement objectives, reset goals and establish new priorities. Additionally, to assist the state in improving data related to child find, the state Interagency Coordinating Council has indicated the development of a Child Find Committee that will include a range of additional stakeholders from across all spectrums of the state.

Provide additional information about this indicator (optional)

To increase the number of referrals of infants and toddlers suspected of having a disability, First Connections will be collaborating with WIC, a partner agency. We intend to build on a WIC initiative that is set to roll out statewide in January and February of 2020. WIC offices across the state will begin providing developmental checks using the CDC “Learn the Signs, Act Early” (LTSAE) materials and developmental checklists with the parents/caregivers of all children 0-5. To support WIC in their initiative, First Connections participated in the WIC program’s “train the trainer” to regional managers on how to make a referral for early intervention when an LTSAE checklist indicates a possible developmental concern. The joint training also provided WIC regional managers with the knowledge and skills to explain the early intervention referral to parents. First Connections created a simple, one-page flier describing the referral for early intervention for WIC clinics to give the parent upon referral. First Connections updated our referral portal and data system to include WIC as a referral source (instead of just “Health Department”) so that these referrals can be tracked quarterly, and the data can be shared with WIC.

Arkansas Child Find Plan

Proposed Strategy: “Learn the Signs”/Act Early Poster with Part C contact information in the lobby of each county DHS office and each county WIC office.


Proposed Strategy: Part C Child Find Committee

Status: In Process - AICC is in the process of forming a committee.

Proposed Strategy: Part C Outreach Personnel

Status: In Process - Part-time outreach staff member attends monthly stakeholder meeting with the Safe Babies Court Team and attends other regional events to represent Part C program and share information. Screening events at WIC offices strategy altered to align with the WIC program’s use of developmental checklists at all children’s visits.

Proposed Strategy: Collaboration with DCCECE and/or the Preschool Suspension/Expulsion Task Force to establish a policy/procedure for referral to Part C for children facing suspension/disciplinary action.

Status: In Process - DCCECE, Part B/619, Part C and other related agencies have formed a “PIT Crew” to meet Jan 10, 2020 to focus on inclusion for children 0-5 in early education to reduce non-integrated learning, suspension, and expulsion.

Proposed Strategy: Collaboration with ACH to outreach to physicians and improve referral sources understand of Part C and how to refer.

Status: Implemented (process ongoing) - ACH survey staff in 2017 and 2018 and compared the results to identify needs. Data from 2nd ACH survey compared to data from 1st ACH survey and saw a .5% improvement in a couple of areas and dips in other areas around pediatric professionals’ understanding of and referral to Part C. Outreach provided to discharge planners, the speech and audiology departments of ACH, and the physical therapy Department of ACH. A second Peds Place broadcast training is set for spring 2020.

Proposed Strategy: First Connections provides information to MIECHV Home Visitors on referring to Part C. MIEHCV provides information to Part C on their program and how to work together more effectively.

Status: Implemented (process ongoing) - 2017 – created a home visiting referral form and added MIECHV program to referral source in CDS to track referrals in order to share referral data with MIECHV. In 2019, served as a member of the home visiting subcommittee of the Fritzheimer grant initiative for Arkansas. In 2019, provided outreach to Nurse Family Partnership program regarding referring to Part C and trained nurses on how to refer/when.

Proposed Strategy: Serve as stakeholder on Safe Babies Court team meetings.

Status: Fully implemented – Part C Outreach Personnel attends monthly meeting as stakeholder

Proposed Strategy: Partner with EHS to provide joint training.

Status: Implemented (process ongoing) - trainings conducted at EHS programs 2017-2019 and TA/planning provided by phone regarding making referrals to Part C. 12/2017 - Handout developed for EHS on referring to Part C and a second handout developed for EHS to give to parents on “now that I’ve been referred”

New/Additional Strategies: Partnership with WIC to increase referrals to Part C as part of WIC state-wide initiative.

Status: Implemented (process ongoing) – WIC/FC joint training in December of 2019. Trained regional WIC coordinators who will be implementing the WIC initiative in Jan – Feb of 2020 on how to refer to Part C and provided a handout for WIC offices to give to families who are referred for early intervention.

New/Additional Strategies: Partnership with Infant Hearing Program (IHP) and their related agencies (Hands and Voices, CAYSI, Guide by Your Side) to increase referrals to Part C.
Status: Implemented - Attend monthly meetings as stakeholder, participated in IHP planning meetings, presented information overview of Part C and who/why/when to refer.

New/Additional Strategies: Partnership with HIPPY to build on their statewide 2-year old initiative.

Status: Partially implemented – planning meetings took place in the fall of 2019. Joint trainings will take place in 2020.

New/Additional Strategies: Reinvigorate LICCs (regional / local interagency coordinating councils)

Status: Partially implemented – training provided to Part C staff who will be facilitating/coordinating LICCs on how to form an LICC or re-invigorate existing LICC provided fall 2019. Additional training and support will be provided to LICCs in 2020.

New/Additional Strategies: Joint training between First Connections and Title V Children with Chronic Health Conditions program (CHC).

Status: Partially implemented – joint FC and CHC brochure developed for both programs to use. Training provided to DDS referral/intake unit on making referrals to Part C and to CHC. CHC and FC staff trainings to take place in 2020.

5 - Prior FFY Required Actions
None

5 - OSEP Response
The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

5 - Required Actions
Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 3 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts Metadata and Process System (EDMAPS) and Census (for the denominator).

Measurement

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

Instructions

Sampling from the State’s 618 data is not allowed.

Describe the results of the calculations and compare the results to the target and to national data. The data reported in this indicator should be consistent with the State’s reported 618 data reported in Table 1. If not, explain why.

6 - Indicator Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>2.25%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2013</td>
<td>1.20%</td>
<td>1.30%</td>
</tr>
<tr>
<td>Target &gt;=</td>
<td>1.40%</td>
<td>1.50%</td>
</tr>
<tr>
<td>Data 2014</td>
<td>1.00%</td>
<td>1.74%</td>
</tr>
<tr>
<td>2015</td>
<td>1.51%</td>
<td>0.82%</td>
</tr>
<tr>
<td>2016</td>
<td>2017</td>
<td></td>
</tr>
</tbody>
</table>

Targets

| FFY 2018 | 1.90% |
| FFY 2019 | 1.91% |

Targets: Description of Stakeholder Input

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas’ State Interagency Coordinating Council (AICC) continues to serve as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various means, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an on-going basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvement strategies.

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Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers birth to 3 with IFSPs</td>
<td>964</td>
</tr>
<tr>
<td>Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin</td>
<td>06/20/2019</td>
<td>Population of infants and toddlers birth to 3</td>
<td>113,032</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>Number of infants and toddlers birth to 3 with IFSPs</th>
<th>Population of infants and toddlers birth to 3</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>964</td>
<td>113,032</td>
<td>0.82%</td>
<td>1.90%</td>
<td>0.85%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Compare your results to the national data

Arkansas Part C continues to strive to identify children to support through the First Connections Program. As indicated in previous reports, the Lead Agency will continue to implement strategies to increase awareness. During the previous reporting period, First Connections staff developed a Child Find Plan (CFP). The CFP was designed to guide the state in the steps to increase the number of infant and toddlers served by Part C. Arkansas Part C served less than one percent of the population of children (0-3) compared to the national average of 3.48. Further evaluation of national data related to the comparison of Arkansas with states that have similar demographics: MS, GA AL, TN, KY, SC. With the exception of Tennessee, the other states serve less than one percent birth to one; however, the range of children served birth to three is from 1.95 (MS) to 3.17(KY). The Lead Agency is aware...
that there remains a great amount of effort that must be done regarding child find. In an effort to assist the state in improving data related to child find, the state Interagency Coordinating Council has indicated the development of a Child Find Committee that will include a range of additional stakeholder from across all spectrums of the state. The Committee will make use the newly designed OSEP self-assessments and tools for improving Child Find available at the ECTA Center website.

Provide additional information about this indicator (optional)

To increase the number of referrals of infants and toddlers suspected of having a disability, First Connections will be collaborating with WIC, a partner agency. We intend to build on a WIC initiative that is set to roll out statewide in January and February of 2020. WIC offices across the state will begin providing developmental checks using the CDC “Learn the Signs, Act Early” (LTSAE) materials and developmental checklists with the parents/caregivers of all children 0-5. To support WIC in their initiative, First Connections participated in the WIC program’s “train the trainer” to regional managers on how to make a referral for early intervention when an LTSAE checklist indicates a possible developmental concern. The joint training also provided WIC regional managers with the knowledge and skills to explain the early intervention referral to parents. First Connections created a simple, one-page flier describing the referral for early intervention for WIC clinics to give the parent upon referral. First Connections updated our referral portal and data system to include WIC as a referral source (instead of just “Health Department”) so that these referrals can be tracked quarterly, and the data can be shared with WIC.

Arkansas Child Find Plan

Proposed Strategy: “Learn the Signs”/Act Early Poster with Part C contact information in the lobby of each county DHS office and each county WIC office.


Proposed Strategy: Part C Child Find Committee

Status: In Process- AICC is in the process of a forming committee.

Proposed Strategy: Part C Outreach Personnel

Status: In Process- Part-time outreach staff member attends monthly stakeholder meeting with the Safe Babies Court Team and attends other regional events to represent Part C program and share information. Screening events at WIC offices strategy altered to align with the WIC program’s use of developmental checklists at all children’s visits.

Proposed Strategy: Collaboration with DCCECE and/or the Preschool Suspension/Expulsion Task Force to establish a policy/procedure for referral to Part C for children facing suspension/disciplinary action.

Status: In Process- DCCECE, Part B/619, Part C and other related agencies have formed a “PIT Crew” to meet Jan 10, 2020 to focus on inclusion for children 0-5 in early education to reduce non-integrated learning, suspension, and expulsion.

Proposed Strategy: Collaboration with ACH to outreach to physicians and improve referral sources understand of Part C and how to refer.

Status: Implemented (process ongoing) - ACH survey staff in 2017 and 2018 and compared the results to identify needs. Data from 2nd ACH survey compared to data from 1st ACH survey and saw a .5% improvement in a couple of areas and dips in other areas around pediatric professionals’ understanding of and referral to Part C. Outreach provided to discharge planners, the speech and audiology departments of ACH, and the physical therapy Department of ACH. A second Peds Place broadcast training is set for spring 2020.

Proposed Strategy: First Connections provides information to MIECHV Home Visitors on referring to Part C. MIEHCV provides information to Part C on their program and how to work together more effectively.

Status: Implemented (process ongoing) - 2017 – created a home visiting referral form and added MIECHV program to referral source in CDS to track referrals in order to share referral data with MIECHV. In 2019, served as a member of the home visiting subcommittee of the Pritzker grant initiative for Arkansas. In 2019, provided outreach to Nurse Family Partnership program regarding referring to Part C and trained nurses on how to refer/when.

Proposed Strategy: Serve as stakeholder on Safe Babies Court team meetings.

Status: Fully implemented – Part C Outreach Personnel attends monthly meeting as stakeholder

Proposed Strategy: Partner with EHS to provide joint training.

Status: Implemented (process ongoing) - trainings conducted at EHS programs 2017-2019 and TA/planning provided by phone regarding making referrals to Part C. 12/2017 - Handout developed for EHS on referring to Part C and a second handout developed for EHS to give to parents on “how that I’ve been referred”

New/Additional Strategies: Partnership with WIC to increase referrals to Part C as part of WIC state-wide initiative.

Status: Implemented (process ongoing) – WIC/FC joint training in December of 2019. Trained regional WIC coordinators who will be implementing the WIC initiative in Jan – Feb of 2020 on how to refer to Part C and provided a handout for WIC offices to give to families who are referred for early intervention.

New/Additional Strategies: Partnership with Infant Hearing Program (IHP) and their related agencies (Hands and Voices, CAYSI, Guide by Your Side) to increase referrals to Part C.
Status: Implemented - Attend monthly meetings as stakeholder, participated in IHP planning meetings, presented information overview of Part C and who/why/when to refer.

New/Additional Strategies: Partnership with HIPPY to build on their statewide 2-year old initiative.

Status: Partially implemented – planning meetings took place in the fall of 2019. Joint trainings will take place in 2020.

New/Additional Strategies: Reinvigorate LICCs (regional / local interagency coordinating councils)

Status: Partially implemented – training provided to Part C staff who will be facilitating/coordinating LICCs on how to form an LICC or re-invigorate existing LICC provided fall 2019. Additional training and support will be provided to LICCs in 2020.

New/Additional Strategies: Joint training between First Connections and Title V Children with Chronic Health Conditions program (CHC).

Status: Partially implemented – joint FC and CHC brochure developed for both programs to use. Training provided to DDS referral/intake unit on making referrals to Part C and to CHC. CHC and FC staff trainings to take place in 2020.

6 - Prior FFY Required Actions
None

6 - OSEP Response
The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

6 - Required Actions
**Indicator 7: 45-Day Timeline**

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Compliance indicator:** Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must address the timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

**Measurement**

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

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

**Instructions**

If data are from State monitoring, describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide actual numbers used in the calculation.

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

### 7 - Indicator Data

#### Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>75.80%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FFY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Data</td>
<td>88.11%</td>
<td>87.97%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Targets</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
</tr>
<tr>
<td>Target</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>FFY 2018 SPP/APR Data</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>206</td>
</tr>
</tbody>
</table>

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline" field above to calculate the numerator for this indicator.

88

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

State database

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

January 1-March 30, 2019 to represent selection from the FFY 2018.
Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Arkansas Part C requires AEIS providers, along with the state staff, use the statewide data system to report data on children receiving services. As part of the Lead Agencies data gathering phase, the Data Manager retrieved case related information on the percentage of infants and toddlers receiving evaluations, assessments and IFSP meetings within the 45-day period from the Comprehensive Data System.

The CDS includes the date of the signed IFSP and the first date of service as outlined on the child’s IFSP. Data Unit staff are given access to the AEIS providers electronic file to work together to assist in finding a means to address concerns surrounding the infants and toddlers that are assigned to their caseload. Individual case related data is collected from state service coordinators, License Community Programs and Independent Service Providers. The Data Manager pulled the following information from IFSP’s for children served in the Part C program with dates starting January 1- March 30, 2019. This information was sent to each AEIS provider for verification and submission back to the Lead Agency. With close consideration and care, the First Connections Program selected this time period in order to capture the same children as reported in Indicator 1.

The Data Manager leads and directs agency staff to analyze the data to determine if the children who received their services in a timely manner also had an evaluation and assessment and IFSP developed in 45 days. Additional time and evaluation was given for validation and verification, in order to ensure the validity of the data. Further analysis was completed by the Data Manager of all information regarding data that was reported for this time period to data for the full year (FFY 2018) and determined that it is reflective of a full year of data.

Provide additional information about this indicator (optional)

An analysis of the data concluded that there appears to be a delay in the receipt of prescriptions for evaluations for Part C services. Providers and staff document the request for prescriptions, however it may take several attempts to obtain approval. The delay in obtaining the required information has caused the programs data for this indicator to not meet requirements. As previously indicated, First Connections conducts monthly presentations to Pediatric Residents at Dennis Developmental Center to provide a one hour informative lecture and Q/A session entitled “Overview of Early Intervention, Eligibility, and How to Refer.” The program also coordinates two monthly EI Observations (on location) for the Pediatric Residents through a partnership with EI Providers to provide residents with an “in the field” opportunity to observe early intervention sessions. The Professional Development Unit will continue to assess the needs of staff and the medical community to provide the most appropriate support.

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>2</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Per the guidance, AEIS providers are issues a written finding upon the identification of noncompliance. The official notification requires correction within 90 days. Subsequent analysis of new program data by the Arkansas Quality Assurance staff, verifies that all infants and toddlers received evaluations, assessments and IFSP meetings in the required time frame.

First Connections monitoring staff reviewed a percentage of updated files from each local provider to determine if subsequent infants and toddlers had an evaluation and an IFSP within the 45-day timeframe. The Lead Agency requires Quality Assurance staff to perform this process as written in the program’s procedure manual.

In accordance with the guidance, First Connections staff completed this process as directed in the OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). Lead Agency QA staff determined that each EIS provider, for whom data formerly showed non-compliance has corrected the noncompliance and is correctly implementing the regulatory requirement for infants and toddlers who receive evaluations, assessments and IFSP meetings within the required frame. This process is performed for each provider for which non-compliance is identified.

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

Per the guidance, individual child file of each Part C infant and toddlers who did not have an evaluation, assessment and IFSP meeting within the required time frame (45 days), was completed by the Lead Agency monitoring staff. The analysis of AEIS provider records verified that children of the provider in question, who had not received evaluations, assessments and timely IFSP meetings indeed had subsequently completed evaluation and the IFSP meeting was conducted, although late.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

With respect to verification of correction of non-compliance. An array of options are available for the QA Unit staff to assign to AEIS providers to address enforcement. Program guidance directs First Connection staff to assess case related information from their assigned provider to determine if they met the requirements outlined in the agency procedures. If requirements are not met, the AEIS provider will receive a letter notifying them to complete specific activities within a required time period. Required action outlined in the request may include the following: targeted technical assistance, corrective action plan, directed training plan, additional actions maybe taken based on the level of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7 - Prior FFY Required Actions

None
7 - OSEP Response
The State reported that it used data from a State database to report on this indicator, but did not report whether it used data for the full reporting period (July 1, 2018-June 30, 2019).

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2018 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2017 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2018 and each EIS program or provider with remaining noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

7 - Required Actions
Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of the data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8D: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
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</tr>
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<tr>
<td>FFY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Data</td>
<td>85.14%</td>
<td>92.02%</td>
</tr>
</tbody>
</table>
Correction of Findings of Non-compliance.

Late, unless that child is no longer within the jurisdiction of the program. Correction within one year of all non-compliance, receive timely transition planning and were not in compliance with requirements to verify correction of non-compliance for each provider that is cited for non-compliance. Records are reviewed for verification of correction of non-compliance. Arkansas' monitoring manual indicates that providers are to be given 90 days to correct the identified non-compliance. AEIS providers are notified of non-compliance and informed that they have to ensure that data submitted is representative of a full year for the state of Arkansas.

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

State database

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

July 01, 2018-June 30, 2019 to represent selection from the FFY 2018 full reporting period.

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

Arkansas FFY 2018 program data for Indicator 8 was retrieved from the states Comprehensive Data System (CDS). In order to ensure the validity of the data, First Connections Data Manager used the inquiry process. The inquiry process includes a detailed list of data from each provider that includes infants and toddlers served. Each provider must review and make all needed corrections for submission back to the Data Manager. Arkansas’ providers are allowed time to review their program data for verification. Indicator 8 data was collected from all provider types within the Part C system. The collection of data represents all geographical areas and is reflective of a full fiscal year of data for the First Connections program. Arkansas designed the data system to produce an electronic record for each infant and toddler within the program, that accurately reflects the status of the infant and toddlers file at any given period of time within the year. Each child’s file within the data system includes steps and services listed on the child's IFSP.

Provide additional information about this indicator (optional)

With regards to the data review for indicator 8a. Arkansas determined that newly hired staff had difficulty understanding transition activities and neglected to add steps to IFSP’s. The program created a “transition checklist” as a tool for all service coordinators outlining the activities, steps, person responsible for carrying out, and the timeliness. Moving forward, the program will provide additional training and support around using the checklist and transition processes/practices.

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
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</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Monitoring staff for the Lead Agency issued official finding notification letters to AEIS providers alerting them of their non-compliance. Notification of provider scores as it relates to transition steps were also included in the letter. As part of the requirements, Early Intervention Provider notification letters cited the federal regulations and informed them that they have to ensure that all children receive timely transition planning and that they must correct all noncompliance. Arkansas’ monitoring manual indicates that providers are to be given 90 days to correct the identified non-compliance. AEIS providers are also informed that correction must be made no later than one year from the date of notification.

Additionally, Part C staff then review updated data for transition steps to ensure that the provider is correctly implementing the regulatory requirements in order to ensure that there is no ongoing noncompliance.

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

Verification of correction of non-compliance was confirmed by the Lead Agency staff. As directed in the First Connections monitoring guidelines, program staff verify correction of noncompliance for each provider that is cited for non-compliance. Records are reviewed for Part C toddlers who did not receive timely transition planning and were not in compliance with requirements to verify that the children received transition services (steps) although late, unless that child is no longer within the jurisdiction of the program. Correction within one year of all noncompliance, was verified by Lead Agency staff.

Correction of Findings of Noncompliance Identified Prior to FFY 2017
8A - Prior FFY Required Actions

None

8A - OSEP Response

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

8A - Required Actions
Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

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

Data Source
Data to be taken from monitoring or State data system.

Measurement

A. Percent = [\# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday] divided by the [\# of toddlers with disabilities exiting Part C] times 100.

B. Percent = [\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services] divided by the [\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B] times 100.

C. Percent = [\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B] divided by the [\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of the data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8B - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>79.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td>2013</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>2014</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>2015</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>2016</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>2017</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Target</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data</td>
<td>87.61%</td>
</tr>
<tr>
<td></td>
<td>95.82%</td>
</tr>
<tr>
<td></td>
<td>98.64%</td>
</tr>
<tr>
<td></td>
<td>99.28%</td>
</tr>
<tr>
<td></td>
<td>100.00%</td>
</tr>
</tbody>
</table>
Correction of Findings of Noncompliance Identified Prior to FFY 2017

### FFY 2018 SPP/APR Data

Data include notification to both the SEA and LEA

#### YES

<table>
<thead>
<tr>
<th>Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday, or for toddlers potentially eligible for Part B preschool services</th>
<th>Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>255</td>
<td>256</td>
<td>100.00%</td>
<td>100%</td>
<td>99.61%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Number of parents who opted out

This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.

0

Describe the method used to collect these data

The state used the Comprehensive Data System to collect data for Indicator 8. Part C selected the time period from July 1, 2018 to June 30, 2019 to reflect reporting for the full fiscal year.

Do you have a written opt-out policy? (yes/no)

NO

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

State database

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

July 01, 2018-June 30, 2019 to represent selection from the FFY 2018 full reporting period.

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

Lead Agency staff collected data for indicator 8 from the Comprehensive Data System (CDS). Verification of the data submitted was conducted through the inquiry process. The CDS is used by AEIS providers and state staff to report data on the infants and toddlers that they provide services and supports to within their local programs and agency. Part C collects data from all Early Intervention provider types under the First Connections program. CDS generates an electronic record for each First Connections infant and toddler. All activities in relation to transition are included as part of the required actions in the database. This information is included for all children in the Part C system. Guidance and clarification can be provided to all uses with the CDS, to assist with continuous improvement.

Provide additional information about this indicator (optional)

The assessment of Part C data related to this indicator demonstrated that new service providers and staff need to improve their efforts surrounding notification of impending transition. In an effort to meet the ever increasing needs in the rural areas of the state, Arkansas opened provider enrollment and hired new staff. The analysis indicated that new staff appear to not have a clear understanding of the regulations, thus causing a delay in the proper notifications. Part C Professional Development staff work closely with new providers and staff to reinforce the requirements outlined in policy. In order to ensure that parents received accurate information about ECSE services under Part B for preschool aged children, the Part C program requested that the Department of Education draft/create a simple flier/handout that would overview ECSE services for children ages 3-5.

### Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

### FFY 2017 Findings of Noncompliance Verified as Corrected

**Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements**

Arkansas Part C issued written notifications to local early intervention providers informing them of their status regarding non-compliance. Scores associated to SEA/LEA notifications were clearly outlined in the provider notification letters. With regards to the notification process, the AEIS provider letters stated the federal regulations and instructed them that they must ensure that all children in their program receive timely transition planning and that they must correct all noncompliance. The Lead Agency procedures regarding monitoring allows AEIS providers 90 days to correct identified noncompliance, however, correction must be made no later than one year from the date of notification.

As required, First Connections staff then reviews updated data for SEA/LEA notification to ensure that the provider is correctly implementing the regulatory requirements by making sure there is no ongoing noncompliance.

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

Lead Agency monitoring procedures require agency staff to verify that each LEA corrected each individual case of noncompliance. Analysis of provider records confirms for toddlers who did not receive timely transition planning and were not in compliance with requirements received transition services (SEA/LEA notification) although late, unless that child is no longer within the jurisdiction. With respect to each AEIS provider, Part C staff certified that all noncompliance was corrected within one year of notification.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**
<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**8B - Prior FFY Required Actions**

None

**8B - OSEP Response**

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

**8B - Required Actions**
Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

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

Data Source
Data to be taken from monitoring or State data system.

Measurement
A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions
Indicators 8A, 8B, and 8C: Targets must be 100%

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of the data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8C - Indicator Data

<table>
<thead>
<tr>
<th>Historical Data</th>
<th>Baseline 2005</th>
<th>Target 100%</th>
<th>2013 86.28%</th>
<th>2014 83.59%</th>
<th>2015 88.24%</th>
<th>2016 93.63%</th>
<th>2017 90.33%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td>2013</td>
<td>2014</td>
<td>2015</td>
<td>2016</td>
<td>2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Data</td>
<td>86.28%</td>
<td>83.59%</td>
<td>88.24%</td>
<td>93.63%</td>
<td>90.33%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Number of toddlers for whom the parent did not provide approval for the transition conference

This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.

0

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.

69

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

State database

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

July 01, 2018–June 30, 2019 to represent selection from the FFY 2018 full reporting period.

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

The Part C Data Manager retrieved Indicator 8 data from the states data system. As previously indicated, data staff used the inquiry process to verify the information collected in the Comprehensive Data System. Each year the lead agency gathers Annual Performance Report data from each provider type identified under Part C. State Service Coordinators and Arkansas Early Intervention providers enter individual child data on the infants and toddlers that they serve directly in the programs database. Arkansas Part C developed the Comprehensive Data System to gather and display data that reflects the status of the infant and toddler’s early intervention record. The system includes, as part of the individual child file, the date of the child’s transition conference as required in the First Connections Policy and Procedure manual. AEIS provider data was taken from IFSP’s with dates starting July 1, 2018–June 30, 2019, and sent to AEIS providers and state staff for review and submission back to the Data Unit. The First Connections Data Manager verified that the data reported for this time period (FFY2018) is reflective of all the infants and toddlers for the full reporting period.

Provide additional information about this indicator (optional)

A key factor impacting the states performance was identified as a service coordinators delay in scheduling timely conferences. Assessment of the information provided indicated that a staff person with ongoing health issues caused the delay in the implementation of timely transition services. The Part C Administrative staff will conduct additional review of program data with significant slippage to develop a plan of action to support improvement of practices. Also, the State will utilize training and technical assistance to assist with ensuring timely transition by prompting staff that the data system includes components such as alerts to assist with service coordination activities. Arkansas Part C will continue to monitor and ensure adequate training is conducted and that best practices for transition are being followed.

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

As required in the Arkansas monitoring manual, Lead Agency staff sends notification letters to early intervention service providers informing them of their non-compliance. Providers receive a notification letter outlining their status regarding timely transition conferences. Each AEIS provider letters cited the federal regulations and informed them that they have to ensure that all children receive timely transition planning and that they must correct all noncompliance. Arkansas’ standards allows the providers 90 days to correct identified noncompliance, however, correction must be made no later than one year from the date of notification.

Additionally, the states monitoring staff reviews updated data for transition conferences to ensure that the provider is correctly implementing the regulatory requirements for subsequent children by making sure there is no ongoing noncompliance and that transition conference are held within the required time period.

Describe how the State verified that each individual case of noncompliance was corrected
Verification of each individual case of noncompliance was conducted by Lead Agency staff. This analysis is conducted by an examination of files for toddlers who did not have timely transition conferences. First Connections staff verified that each child for whom a conference was not provided received transition conferences, although the conference was late, unless that child is no longer within the jurisdiction of the program. AEIS providers receive a notification letter confirming that all noncompliance was corrected within one year.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**8C - Prior FFY Required Actions**

None

**8C - OSEP Response**

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

**8C - Required Actions**
Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source
Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the EDFacts Metadata and Process System (EMAPS)).

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

Instructions
Sampling from the State’s 618 data is not allowed.

This indicator is not applicable to a State that has adopted Part C due process procedures under section 639 of the IDEA.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s 618 data, explain.

States are not required to report data at the EIS program level.

9 - Indicator Data

Not Applicable

NO

Select yes if this indicator is not applicable.

Select yes to use target ranges.

Target Range not used

Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.

NO

Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints</td>
<td>11/11/2019</td>
<td>3.1 Number of resolution sessions</td>
<td>0</td>
</tr>
<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints</td>
<td>11/11/2019</td>
<td>3.1(a) Number resolution sessions resolved through settlement agreements</td>
<td>0</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas’ State Interagency Coordinating Council (AICC) continues to service as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various means, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an on-going basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

During the program period year, First Connections collaborated with numerous partners to improve the delivery of supports and services. Partners include: Arkansas Department of Health, Arkansas Department of Education, Arkansas’ Children’s Hospital, Title V, Quality Assurance Sub Committee, Arkansas Medicaid, Safe Babies Court Team, Arkansas Association for Infant Mental Health, Arkansas Fetal Alcohol Spectrum Disorder, Head Start Association, Human Services Personnel Office, Arkansas School for the Deaf, Arkansas Early Intervention Providers, Zero to Three, the Division of Child Care and Early Childhood Education, Division of Children and Family Services, Arkansas Disability Coalition, the Division of Developmental Disabilities Services, and Women, Infants, and Children (WIC) Program.

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>FFY 2013</th>
<th>FFY 2014</th>
<th>FFY 2015</th>
<th>FFY 2016</th>
<th>FFY 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target  &gt;=</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Data</td>
<td>0.00%</td>
<td>0.00%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
</table>

35 Part C
FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>3.1(a) Number resolutions sessions resolved through settlement agreements</th>
<th>3.1 Number of resolutions sessions</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td></td>
<td>0.00%</td>
<td></td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Provide additional information about this indicator (optional)

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2018. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

9 - Required Actions
Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements. (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source
Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the EDFAacts Metadata and Process System (EMAPS)).

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

Instructions
Sampling from the State’s 618 data is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR. States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s 618 data, explain.

States are not required to report data at the EIS program level.

10 - Indicator Data

Select yes to use target ranges

Target Range is used

Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.

NO

Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
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<tbody>
<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests</td>
<td>11/11/2019</td>
<td>2.1 Mediations held</td>
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<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests</td>
<td>11/11/2019</td>
<td>2.1.a.i Mediations agreements related to due process complaints</td>
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<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests</td>
<td>11/11/2019</td>
<td>2.1.b.i Mediations agreements not related to due process complaints</td>
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</table>

Targets: Description of Stakeholder Input

As required, Arkansas developed the State Performance Plan/Annual Performance Report with broad stakeholder engagement. The Arkansas’ State Interagency Coordinating Council (AICC) continues to service as the primary stakeholder group to provide on-going guidance and support to the Lead Agency. Throughout the fiscal year, program improvement input was provided by council members on a variety of topics. Updates are provided to AICC members through various mean, such as newsletters, webinars, emails and meetings. Additionally, program staff presents data summaries to council members on an on-going basis, in order to keep members updated regarding program progress. Guidance and support was provided by the AICC on the following program items: SPP/APR, SSIP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

During the program period year, First Connections collaborated with numerous partners to improve the delivery of supports and services. Partners include: Arkansas Department of Health, Arkansas Department of Education, Arkansas’ Children’s Hospital, Title V, Quality Assurance Sub Committee, Arkansas Medicaid, Safe Babies Court Team, Arkansas Association for Infant Mental Health, Arkansas Fetal Alcohol Spectrum Disorder, Head Start Association, Human Services Personnel Office, Arkansas School for the Deaf, Arkansas Early Intervention Providers, Zero to Three, the Division of Child Care and Early Childhood Education, Division of Children and Family Services, Arkansas Disability Coalition, the Division of Developmental Disabilities Services, and Women, Infants, and Children (WIC) Program.

Historical Data

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Data

Targets

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<tr>
<th>FFY</th>
<th>2018 (low)</th>
<th>2018 (high)</th>
<th>2019 (low)</th>
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<td>Target</td>
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### 2.1.a.i Mediation agreements related to due process complaints

<table>
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<tr>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target (low)</th>
<th>FFY 2018 Target (high)</th>
<th>Status</th>
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<td>N/A</td>
<td>N/A</td>
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</tbody>
</table>

Provide additional information about this indicator (optional)

#### 10 - Prior FFY Required Actions

None

#### 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2018. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

#### 10 - Required Actions
Certification

Instructions
Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

Certify
I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role
Designated Lead Agency Director

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.

Name:
Tracy Turner

Title:
Part C Coordinator

Email:
tracy.turner@dhs.arkansas.gov

Phone:
501-682-8703

Submitted on:
04/27/20  5:41:59 PM