NEBRASKA
DEPARTMENT OF EDUCATION

Early Development Network
Babies Can't Wait

Part C: Public Reporting & PRT Determinations

Improving Results for Infants and Toddlers with Disabilities and their Families

This technical guide outlines the processes used by the Nebraska Part C Co-Lead Agencies, Nebraska Departments of Education and Health & Human Services, to generate the Part C performance report 2014-15 and complete the annual PRT determinations 2016.

April 2016

Overview

In accordance with Section 616 of IDEA all states shall report annually to the public on the performance of each local educational agency located in the State on the targets in the State's Performance Plan (SPP).

The SPP is a six (6) year plan which consists of measurable and rigorous targets for each of the indicators established by the Secretary. The state submits an Annual Performance Report (APR) to account for performance against the targets for each indicator. For more information about Nebraska's Part C SPP or APR, visit http://edn.ne.gov/spp/annual-performance-report.html.

Nebraska has grouped the SPP Indicators into meaningful categories (Impact Areas) that provide a broader view of improving results and accountability for infants and toddlers with disabilities and their families within a continuous improvement framework.

In addition to these requirements, states must annually complete determinations of local Early Intervention Programs (Planning Region Teams – PRTs).

The following pages outline Nebraska's processes used to compile the **2014-15** Part C Performance Report and complete the **2016** annual PRT determinations. In summary, processes for public reporting and PRT determinations are:

Nebraska's Public Reporting: The Part C Performance Report is publicly reported, by Planning Region Teams, on the Early Development Network website, http://edn.ne.gov/spp/index.html.

In order to ensure complete and accurate data, all PRTs are given the opportunity to review their own PRT-level information prior to the release of the PRT Performance Report to the public.

Nebraska's PRT Determinations: The Part C Performance Report is also used to complete the annual PRT determinations. Indicators on the Report are considered when completing the determinations. In addition, timely and accurate submission of data and audit findings are considered. The determinations are distributed to each PRT 120 days following the submission of the APR.

It is the policy of the Nebraska Department of Education not to discriminate on the basis of gender, disability, race, color, religion, marital status, age, national origin or genetic information in its education programs, administration, policies, employment or other agency programs.

Table of Contents

Overview 2
Indicator C1 4
Indicator C2 5
Indicator C3A-C3C 6
Indicator C4 8
Indicator C5 9
Indicator C6 10
Indicator C7 11
Indicator C8 12
Timely and Accurate Data 13
Appendix A 14
PRT Determination Summary Sheet 14
Appendix B 16
Appendix C 21
Appendix D 23
Part C PRT Determinations 23
"Rules of the Road" 23

Individualized Family Service Plans Completed In a Timely Manner

Indicator C1

Compliance Indicator – Impact Area I

Data Source: IFSP File Reviews
Data Year: 2014-15
Data Due: Data collected from IFSP File Reviews completed between July 1, 2014 and June 30, 2015

Measurement/Calculation**:** 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 delay.)

PRTs participate in this data collection during the established monitoring year (e.g. same year as NDE compliance file review). Therefore, PRTs participate in this data collection once every three years. If the PRT does not demonstrate 100% compliance, the Co-Leads verify correction using the two-prong process outlined in OSEP memo 09-02 (Appendix B).

PRT Determinations Considerations: The PRT earns one (1.0) point if the target is met. For a COMPLIANCE indicator that does not meet the target, the PRT may score one point if correction of noncompliance within the indicator occurred in one year.

Status of PRT Performance	Points Distributed
Performance meets state target	1.0
Performance does not meet target but correction of noncompliance within the indicator occurred in one year	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Infants and Toddlers with IFSPs who Primarily Receive Early Intervention Services in the Home or Community Based Settings

Indicator C2

Performance Indicator – Impact Area I

Data Source: NSSRS October 1, 2014 Child Count – Report of Settings
Data Year: 2014-15
Data Due: October 1, 2014

Measurement/Calculation: 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.

PRT Determinations Considerations: The PRT earns one (1.0) point if the target is met, improved upon, or performance remains the same (unless performance was 0% each year).

Status of PRT Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year, unless performance was 0%	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Results Matter for Children Ages Birth to 3

Indicator C3A-C3C

Performance Indicator – Impact Area I

Data Source: Teaching Strategies (TS) GOLD Online
Data Year: 2014-15
Data Due: June 30, 2015

Measurement/Calculation:
Percent of infants and toddlers, birth to 3, with IFSPs who demonstrate improved:

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

Public Reporting Considerations: Data is masked for public reporting if less than 10 (*).

For child data to be included in this indicator:
1) Child must have exited during that year;
2) Have complete entry and exit data within TS GOLD; and
3) Have been in the program for at least six months.

If the PRT reported no children for the given year (▼), the indicator is counted on the PRT determination summary in Line (D) as "How many indicators cannot be included." This removes the indicator from the total number of points possible.

⊘ : This designation applies only to Summary Statement 1 for Outcomes A, B and C, if all children demonstrated skills similar to same aged peers at entry. If so, there was no opportunity for children to demonstrate greater than expected gains between the entry and exit checkpoint for Summary Statement 1.

Since Nebraska is now using TS GOLD as the single assessment system, new targets have been established. Nebraska had two full years of statewide TS GOLD implementation by 2014-15. This provided more valid and adequate data on which to set new targets and measure child outcomes in PRTs.

PRT Determinations Considerations: The PRT earns one (1.0) point for each of the six targets met, for a total of 6 possible points.

Status of PRT Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year, unless performance was 0%	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Family Outcomes

Indicator C4

Performance Indicator - Impact Area II

Data Source: Part C Family Survey
Data Year: 2014-15
Data Due: April 2015

Measurement/Calculation: 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.

All parents are surveyed every year. Families are provided with the option of having the survey read to them in English or Spanish through Nebraska Parent Training Information Center (PTI).

PRT Determinations Considerations: The PRT earns one (1.0) point for each of the three targets met, improved upon, or performance remains the same, for a total of 3 possible points.

Status of PRT Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Infants, Birth to Age 1, With IFSPs

Indicator C5

Performance Indicator – Impact Area I

Data Source: Data from Vital Statistics – City, County, State Levels and NSSRS
Data Year: 2014-15
Data Due: October 1, 2014

Measurement/Calculation: Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to national data. Data on birth rates is from the City/County Vital Statistics Office.

PRT Determination Considerations: The PRT earns one (1.0) point if the target is met, improved upon, or performance remains the same (unless performance was 0% each year).

Status of PRT Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year, unless performance was 0% each year.	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Infants and Toddlers, Birth to Age 3, with IFSPs

Indicator C6

Performance Indicator – Impact Area I

Data Source: Data from Vital Statistics – City, County, State Levels and NSSRS
Data Year: 2014-15
Data Due: October 1, 2014

Measurement/Calculation: Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data. Data on birth rates is from the City/County Vital Statistics Office.

PRT Determination Considerations: The PRT earns one (1.0) point if the target is met, improved upon, or performance remains the same (unless performance was 0% each year).

Status of PRT Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year, unless performance was 0% each year.	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Evaluation and Initial IFSP within 45 days

Indicator C7

Compliance Indicator – Impact Area I

Data Source: IFSP File Reviews
Data Year: 2014-15
Data Due: IFSP File Reviews completed between July 1, 2014 and June 30, 2015

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

PRTs must account for untimely evaluations, assessments, and initial IFSP meetings including the reasons for delays. PRTs participate in this data collection during the established monitoring year. Therefore, PRTs participate in this data collection once every three years. If the PRT does not demonstrate 100% compliance, the Co-Leads verify correction using the two-prong process outlined in OSEP memo 09-02 (Appendix B).

Public Reporting Considerations: This is a compliance indicator; the target is set at 100%.

PRT Determination Considerations: The PRT earns one (1.0) point if the target is met. For a COMPLIANCE indicator that does not meet the target, the PRT may score one point if correction of noncompliance within the indicator occurred in one year.

Status of PRT Performance	Points Distributed
Performance meets state target	1.0
Performance does not meet target but correction of noncompliance within the indicator occurred in one year	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Transition from Part C to Part B Services

Indicator C8
Compliance Indicator – Impact Area III

Data Source: IFSP File Reviews
Data Year: 2014-15
Data Due: IFSP File Reviews completed between July 1, 2014 and June 30, 2015

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

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

PRTs participate in this data collection during the established monitoring year. Therefore, PRTs participate in this data collection once every three years. If the PRT does not demonstrate 100% compliance, the Co-Leads verify correction using the two-prong process outlined in OSEP memo 09-02 (Appendix B).

Public Reporting Considerations: This is a compliance indicator; the target is set at 100%.

PRT Determination Considerations: The PRT earns one (1.0) point for each of the three targets met, for a total of 3 possible points. For a COMPLIANCE indicator that does not meet the target, the PRT may score one point if correction of noncompliance within the indicator occurred in one year.

Status of PRT Performance	Points Distributed
Performance meets state target	1.0
Performance does not meet target but correction of noncompliance within the indicator occurred in one year	1.0

See Appendix A for a blank copy of the PRT determination worksheet.

Timely and Accurate Data

As a reminder, Timely and Accurate data submission is considered in the PRT's annual determination. This information is not publicly released in the PRT's performance report; however, late and inaccurate submissions may impact the PRT's performance against the indicator targets. For example, inaccurate NSSRS data may impact any of the indicators which use this collection as the data source for calculating performance (e.g., settings). The data collections currently included in the annual PRT determinations are:

Collection	Timely Submission	Accurate Submission
PRT Statement of Assurances in the GMS PRT Systems Support Grant	X	
Annual PRT Meeting Minutes/Report (minutes due August 1st)	X	

For a list of special education data collection deadlines, see Appendix C. Also, for more details regarding the point distribution in the PRT determination, please see Appendix D "Rules of the Road".

Appendix A

PRT Determination Summary Sheet

PRT Determination Summary – Part C

2016

PRT Name: _____ NDE Reviewer: _____

Line	Instruction	Value
A	Total Points Available	19
B	Targets Met/Points Earned on the Performance Report	
C	Points Earned by Improvement From Previous Year	
D	Indicators Excluded	
E	Points Earned for data reporting	
F	Total Points Earned	
	Percentage(Line F/Line A – Line D)	

The levels of determination include:

- Meets Requirements (100% to 70%)
- Needs Assistance (69% to 50%)
- Needs Intervention (49% to 31%)
- Needs Substantial Intervention (30% and below)

Appendix B

OSEP 09-02 Memo

UNITED STATES DEPARTMENT OF EDUCATION

OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

OCT 17 2008

Contact Person	
Name:	Ruth Ryder
Telephone:	(202) 245-7513

OSEP 09-02

TO : Chief State School Officers
Lead Agency Directors

FROM : William W. Knudsen
Acting Director
Office of Special Education Programs

SUBJECT : Reporting on Correction of Noncompliance in the Annual Performance Report Required under Sections 616 and 642 of the Individuals with Disabilities Education Act.

Introduction

Pursuant to sections 616(d) and 642 of the Individuals with Disabilities Education Act (IDEA), the Department reviews each State's Annual Performance Report (APR) and, based on data provided in the State's APR, information obtained through monitoring visits, including verification visits, and any other public information, determines if the State: Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention. In making determinations in 2007 and 2008, the Office of Special Education Programs (OSEP) considered, among other factors, whether a State demonstrated substantial compliance on all compliance indicators either through reporting a very high level of performance (generally 95% or better) or correction of noncompliance.[1]

The purpose of this memorandum is twofold. First, the memorandum reiterates the steps a State must take in order to report that the previously identified noncompliance has been corrected. Second, the memorandum describes how we will factor evidence of correction into our analysis of whether the State has demonstrated substantial compliance for purposes of determinations under sections 616 and 642 of the IDEA (beginning with the Department's 2010 determinations based on a review of the FFY 2008 APRs). This memorandum also addresses concerns

[1] For Indicators B-15 and C-9, which measure timely correction of noncompliance, the only way for States to demonstrate substantial compliance is by demonstrating timely correction.

identified in our review of States' FFY 2005 and FFY 2006 APRs about identification and correction of noncompliance and low performance in compliance areas.

Issue 1 –Demonstrating Correction

As noted in OSEP's prior monitoring reports and verification visit letters, in order to demonstrate that previously identified noncompliance has been corrected, a State must:

(1) Account for all instances of noncompliance, including noncompliance identified: (a) through the State's on-site monitoring system or other monitoring procedures such as self-assessment; (b) through the review of data collected by the State, including compliance data collected through a State data system; and (c) by the Department;

(2) Identify where (in what local educational agencies (LEAs) or early intervention services (EIS) programs) noncompliance occurred, the percentage level of noncompliance in each of those sites, and the root cause(s) of the noncompliance;[2]

(3) If needed, change, or require each LEA or EIS program to change, policies, procedures and/or practices that contributed to or resulted in noncompliance; and

(4) Determine, in each LEA or EIS program with identified noncompliance, that the LEA or EIS program is correctly implementing the specific regulatory requirement(s). This must be based on the State's review of updated data such as data from subsequent on-site monitoring or data collected through a State data system.

If an LEA or EIS program did not correct identified noncompliance in a timely manner (within one year from identification), the State must report on whether the noncompliance was subsequently corrected. Further, if an LEA or EIS program is not yet correctly implementing the statutory/regulatory requirement(s), the State must explain what the State has done to identify the cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance including, as appropriate, enforcement actions taken against any LEA or EIS program that continues to show noncompliance.

Regardless of the specific level of noncompliance, if a State finds noncompliance in an LEA or EIS program, the State must notify the LEA or EIS program in writing of the noncompliance, and of the requirement that the noncompliance be corrected as soon as possible, but in no case more than one year from identification (i.e., the date on which the State provided written notification to the LEA or EIS program of the noncompliance). In determining the steps that the LEA or EIS program must take to correct the noncompliance and to document such correction, the State may consider a variety of factors, including whether the noncompliance: (1) was extensive or found in only a small percentage of files; (2) resulted in the denial of a basic right under the IDEA (e.g., an extended delay in an initial evaluation with a corresponding delay in the child's receipt of a free appropriate public education or early intervention services, or a failure to provide services in accordance with the individualized education program or individualized family service plan); and (3) represents an isolated incident in the LEA or EIS program, or reflects a long-standing failure to meet the IDEA requirements. Thus, while a State may

[2] Please note that while we are not requesting that States provide, in the APR, lists of specific LEAs or EIS programs found out of compliance, we may review documentation of correction that the State required of the LEA or EIS program when we conduct a verification visit or other monitoring activity in a State.

determine the specific nature of the required corrective action, the State must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

For any noncompliance concerning a child-specific requirement that is not subject to a specific timeline requirement (State Performance Plan (SPP)/APR Indicators B-9, B-10, B-13, C-8A and C-8B), in addition to the steps above, the State also must ensure that the LEA or EIS program has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA or EIS program. Similarly, for any noncompliance concerning a child-specific timeline requirement (SPP/APR Indicators B-11, B-12, C-1, C-7, and C-8C), in addition to the steps enumerated above, the State must ensure that the LEA or EIS program has completed the required action (e.g., the evaluation or initiation of services), though late, unless the child is no longer within the jurisdiction of the LEA or EIS program. In ensuring that each individual case of noncompliance has been corrected, the State does not need to review each child's record in the LEAs or EIS programs where the noncompliance occurred, but rather may review a reasonable sample of the previously noncompliant files to verify that the noncompliance was corrected.

Issue 2 – Factoring Correction into Evaluation of Substantial Compliance

For purposes of the Department's IDEA section 616 determinations issued since June 2007, we considered a State to be in substantial compliance relative to a compliance indicator if the State's data indicate a very high level of compliance (generally 95% or above), or if the State nonetheless demonstrated correction of identified noncompliance related to that indicator. In the interest of fairness to all States, we will evaluate whether a State demonstrated correction of identified noncompliance related to an indicator when we make our 2009 determinations based on the FFY 2007 APRs, and will use the same approach we used in 2007 and 2008. However, some States are reporting very low levels of compliance year after year, while also reporting that they have corrected previously identified noncompliance. This concerns us because it indicates that systemic correction of noncompliance did not occur. Thus, in the interest of improving LEA and EIS program performance and ultimately improving results for infants, toddlers, children and youth with disabilities, beginning with our 2010 determinations:

(1) We will no longer consider a State to be in substantial compliance relative to a compliance indicator based on evidence of correction of the previous year's noncompliance if the State's current year data for that indicator reflect a very low level of compliance (generally 75% or below); and

(2) We will credit a State with correction relative to a child-specific compliance indicator only if the State confirms that it has addressed each instance of noncompliance identified in the data for an indicator that was reported in the previous year's APR, as well as any noncompliance identified by the Department more than one year previously. The State must specifically report for each compliance indicator whether it has corrected all of the noncompliance identified in its data for that indicator in the prior year's APR as well as that identified by the Department more than one year previously.

For example --

- Reporting correction of noncompliance identified in on-site monitoring findings alone will not be sufficient to demonstrate correction if the data reported in a State's prior year's APR showing noncompliance were collected through the State's data system, and the monitoring findings do not include all of the instances of noncompliance identified through the prior year's data.
- In order to report correction of noncompliance identified in data based on a statewide sample, the State would need to track the noncompliance identified in the sample data reported in its prior year's APR back to the specific LEAs or EIS programs with noncompliance and report correction for those LEAs or EIS programs.

In other words, a State's demonstration of correction needs to be as broad in scope as the noncompliance identified in the prior year's data.

We hope that you find the information in this memorandum helpful in collecting and reporting data for your future SPP/APR submissions. OSEP is committed to supporting your efforts to improve results for infants, toddlers, children and youth with disabilities and looks forward to working with your State over the next year. If you have any questions, would like to discuss this further, or would like to request technical assistance, please do not hesitate to call your OSEP State Contact.

cc: Part B State Directors

Part C Coordinators

Appendix C

NDE Special Education Data Calendar

Special Education Reporting Due Dates

August 1, 2016	Due date for 2016-2017 grant applications.
August 1, 2016	Due date for submission of Annual Meeting Report for 2015-2016
August 31, 2016	End of the 2015-2016 Grant Year
September 1, 2016	2016-2017 Grant Year begins
November 15, 2016	Due date for submission of the final request for funds through GMS (FY 15-16)

Appendix D

Part C PRT Determinations

“Rules of the Road”

Rules of the Road
PRT Determinations – Part C

PRT Performance Report

The following steps are completed automatically via the website.

1. The **Part C Performance Reports** are used to complete the PRT determinations.
2. For a **RESULTS** Indicator (2, 3, 4, 5, 6) if the PRT's performance meets or exceeds the state target for an indicator, one point is awarded.
3. A PRT may earn one point for a target **if**:
   - The performance demonstrated improvement from the previous year; or
   - The performance was maintained from the previous year, unless performance was 0% each year **.**

Additional Considerations:

For a **COMPLIANCE** indicator (1, 7, and 8) that does not meet the target, the PRT may score one point **if**:

- correction of noncompliance within the indicator occurred in one year.

The Performance Report accounts for 17 points!

Special Education Timely/Accurate Data Reporting

1. **Timely:** Data must be received by NDE **on or before the due date**. Two points are awarded for all timely data reporting.
2. **Accurate:** No points are awarded for Data accuracy at this time.

Data Collections account for a maximum of **2** points!

In Summary: The total number of points possible for the PRT Determinations 2016:
17 possible points from the Performance Report
2 possible points for timely and accurate data
19 possible points

The PRT Determination Worksheet Summary 2016, on the ILCD website, will automatically calculate the overall PRT percentage. The PRT's level of determination will also be provided. The level of determination is based on the PRT's overall percentage.

The levels of determination include:

- Meets Requirements (100% to 70%)
- Needs Assistance (69% to 50%)
- Needs Intervention (49% to 31%)
- Needs Substantial Intervention (30% and below)