

Part C State Annual Performance Report (APR) for FFY2005 (July 1, 2005 to June 30, 2006) Regional Data—Child Development Watch South

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

Account for untimely receipt of services.

Measurable and Rigorous Target

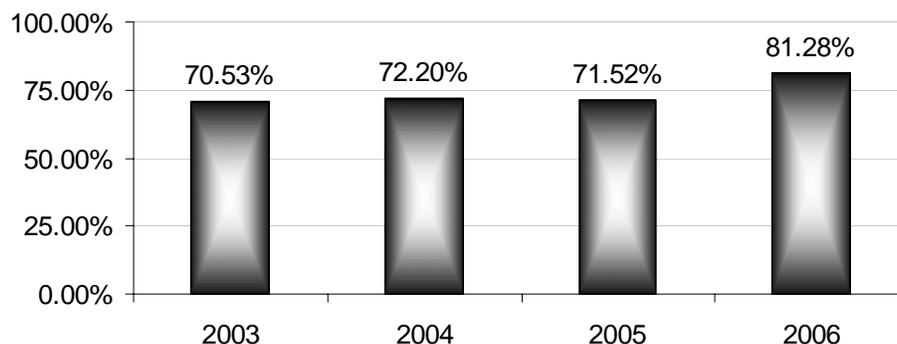
FFY2005

100% of infants and toddlers with IFSPs in the Birth to Three Early Intervention System will receive the early intervention services on their IFSPs in a timely manner according to the recommended state guideline.

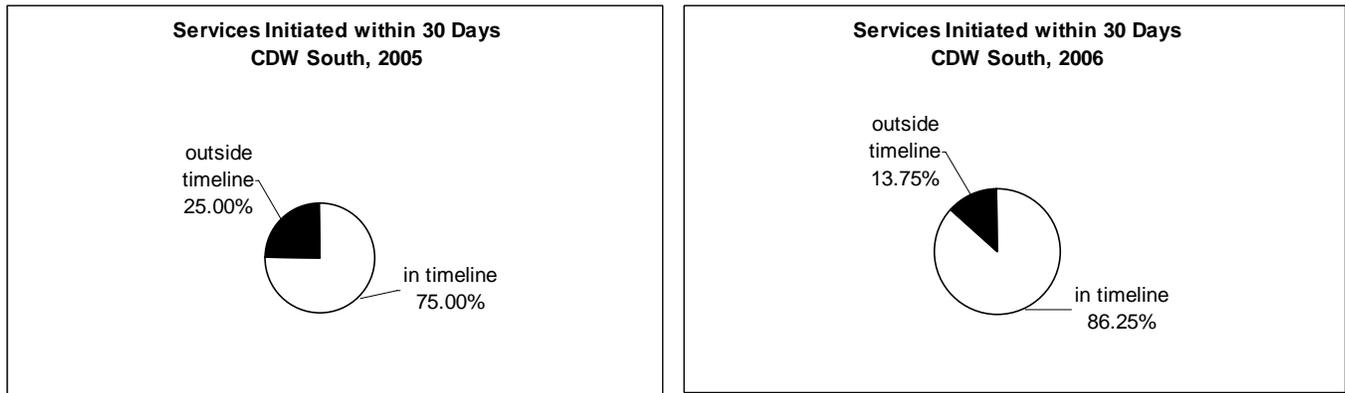
Actual Target Data for FFY2005:

Figure 1-1 Children receiving services within 30-day state guideline (STATEWIDE)

**Infants and toddlers with IFSPs who received
early intervention services within 30 days of
date referred for service**



Source: Annual Statewide Monitoring

Figure 1-2 Children receiving services within thirty-day state guideline (SOUTH)

Source: Annual Statewide Monitoring

Additional data from 2006 monitoring:

Reasons early intervention services not started within 30 days:

Service Unavailable	8
Family Scheduling	5
No Documentation	3
Insurance	1
Total Outside of 30 days	17

Family reasons taken into consideration for reporting timeline include Family Scheduling and Family Refused= 5 total

Adjusted total for CDW South: 12 cases not started within 30 days

2006 monitoring data for CDW South indicated that 86% (74 of 86) of infants and toddlers received their early intervention services included on IFSPs within the state recommended guideline of 30 days from the date referred for service to date a service starts. The date referred for service is the date that the parents consent for services.

Data from 2006 monitoring indicates that 60 of 86 (70%) infants and toddlers had all services on the IFSP started within the state guidelines. Taking family circumstances into account (7 incidences of family scheduling, 4 incidences of child illness, 4 incidences of child hospitalization, and 2 incidences where contact with family was temporarily lost), this percentage increases to 90% (77 of 86) as reported above.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

Account for untimely receipt of services.

Measurable and Rigorous Target

FFY2005 83.2% percent of infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.

Actual Target Data for FFY2005:

Figure 2-1 Annual Child Count Primary Service Location (STATEWIDE)

Service Location	2003	2004	2005
Program designed for children with developmental delay or disability	80	55	38
Program designed for typically developing children*	69	87	97
Home*	655	749	681
Hospital (Inpatient)	7	2	2
Residential Facility	3	1	0
Service Provider Location	136	111	90
Other Setting	3	9	6
Total	953	1014	914

*natural environment

Source: Annual Child Count

Figure 2-1 Annual Child Count Primary Service Location (SOUTH)

Service Location	2005
Program designed for children with developmental delay or disability	4
Program designed for typically developing children*	25
Home*	248
Hospital (Inpatient)	0
Residential Facility	0
Service Provider Location	34
Other Setting	0
Total**	311

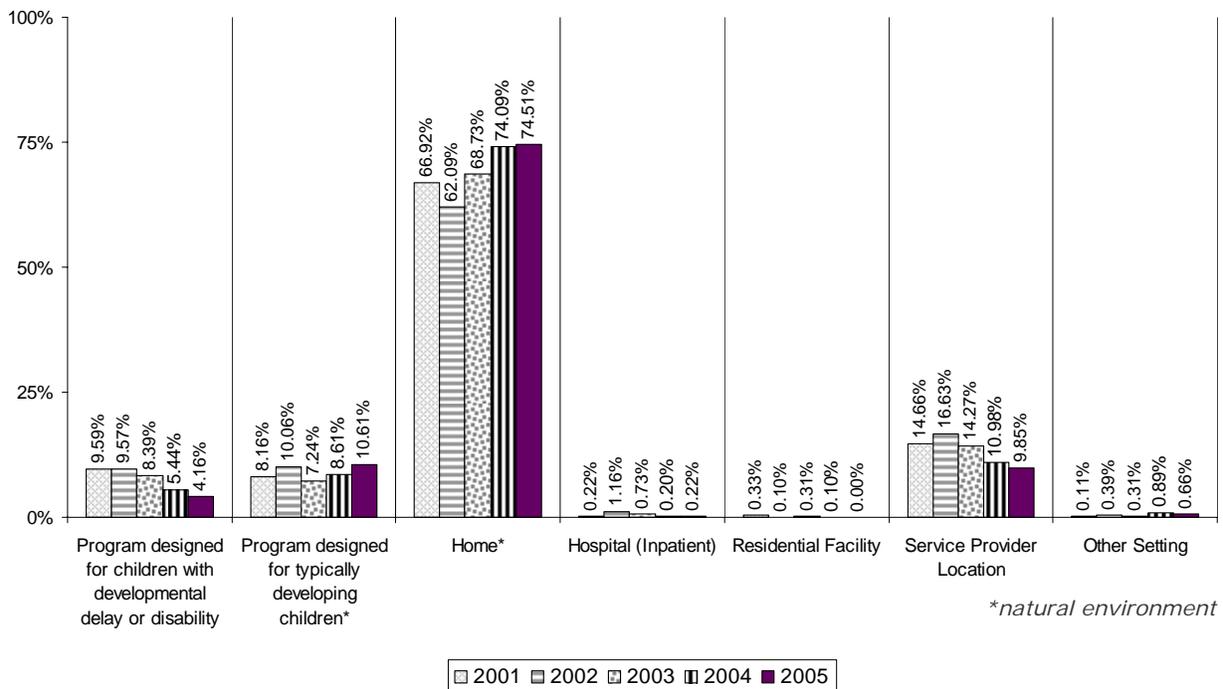
*natural environment

Source: Annual Child Count

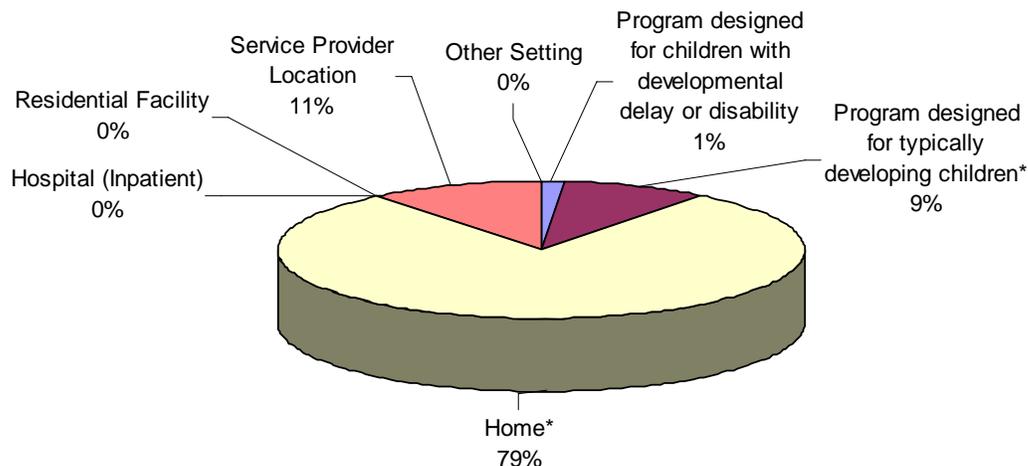
**Annual Child Count rerun 7-07

Figure 2-2a Primary Service Settings (STATEWIDE)

Comparison of Primary Service Setting



Source: Annual Child Count

Figure 2-2a Primary Service Settings (SOUTH)**Additional data from 2006 Annual Child Count:**

Statewide, Delaware exceeded the target of 83.2% set for FFY2005. Annual Child Count data prepared for December 2005 indicate that 85.12% of children receive their primary service in their home or in a program designed for typically developing peers, such as child care. This has increased from 82.7% in 2004.

In addition, 2006 State monitoring data indicated that 86.27% (176 of 204 charts monitored) of the IFSPs contained documentation that services were provided in natural environments or documentation existed for justification based on the child's needs to be met in a setting not considered a natural environment.

A high percentage of IFSP teams continue to discuss natural environments and in 2006, 90% of IFSPs monitored indicate that families are identifying natural environments. 97% of charts reviewed in 2006 include evidence of strategies that families can use to promote child's development, which represents a significant increase from previous years.

Monitoring Priority: Effective General Supervision Part C/Child Find

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

- A. Other states with similar eligibility; and**
- B. National data.**

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

Measurement:

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

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

Measurable and Rigorous Target	
FFY2005	The Birth to Three Early Intervention System will identify 1.31% of infants and toddlers birth to 1 with IFSPs compared to: <ul style="list-style-type: none"> A. Other States with similar eligibility definitions; and B. National data

Actual Target Data for FFY2005:

Figure 5-1 Number of Children Served by Child Development Watch

Reporting Year	Statewide Age 0-1	South Age 0-1
2000	194	n/a
2001	179	n/a
2002	205	n/a
2003	201	n/a
2004	148	n/a
2005 **	109	49

Source: Annual Child Count
 **Annual Child Count rerun 7-07

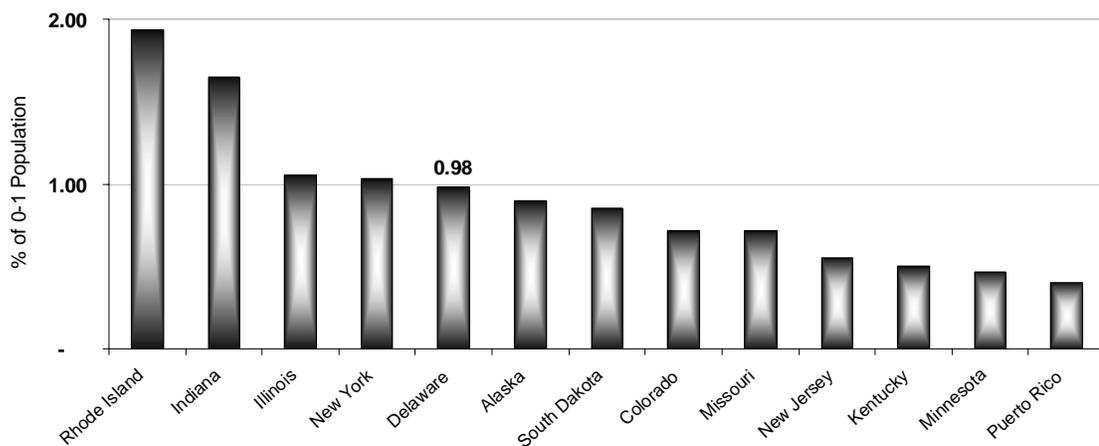
Figure 5-2 States with Moderate eligibility guidelines providing early intervention services to infants and toddlers under IDEA

State	Birth up to 12 months	1 yr.	2 yrs.	Birth-2 yrs. total	% of Pop.	Total Rank	Census <1 Pop.	% of <1 Pop.	<1 Rank
Rhode Island	246	484	880	1,610	4.09	2	12,704	1.94	1
Indiana	1,409	3,535	5,474	10,418	4.04	3	85,279	1.65	2
Illinois	1,943	5,016	9,216	16,175	3.00	4	184,365	1.05	3
New York	2,619	9,630	20,309	32,558	4.33	1	252,882	1.04	4
<i>Delaware</i>	<i>109</i>	<i>265</i>	<i>611</i>	<i>985</i>	<i>2.94</i>	<i>5</i>	<i>11,107</i>	<i>0.98</i>	<i>5</i>
Alaska	96	212	334	642	2.09	10	10,675	0.90	6
South Dakota	91	312	532	935	2.91	6	10,685	0.85	7
Colorado	492	1,118	2,144	3,754	1.85	11	68,538	0.72	8
Missouri	552	1,042	1,762	3,356	1.47	13	77,060	0.72	9
New Jersey	640	2,640	5,535	8,815	2.53	8	115,508	0.55	10
Kentucky	274	998	2,277	3,549	2.17	9	54,981	0.50	11
Minnesota	318	952	1,939	3,209	1.56	12	68,753	0.46	12
Puerto Rico	234	1,110	2,556	3,900	2.58	7	58,043	0.40	13

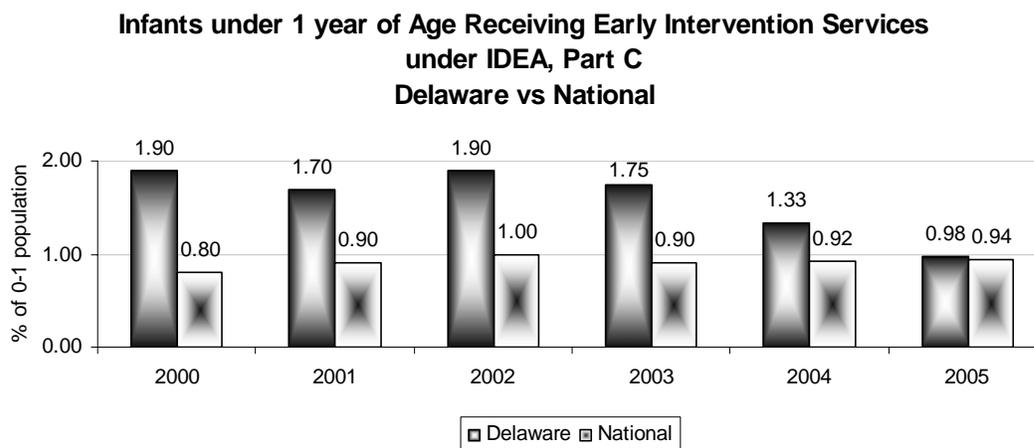
Source: U.S. Department of Education, Office of Special Education Programs, Data Analysis System (DANS), OMB# 1820-0557; Table 8-1. Infants and toddlers receiving early intervention services under IDEA, Part C, by age and state: Fall 2005

Figure 5-3 Comparison to States with Similar Eligibility

**Infants Birth to Age 1 Receiving Early Intervention Services under IDEA, Part C
States with Moderate Eligibility**



Sources: US Department of Education, Office of Special Education Programs, Data Analysis System (DANS)

Figure 5-4 Comparison to National Baseline

Sources: US Department of Education, Office of Special Education Programs, Data Analysis System (DANS)

Additional data from 2006 Annual Child Count:

As reported in February, 2007 (See Figures 5.1 and 5.3), 109 or .98% of Delaware's birth to one population was determined eligible for Part C.

- A. Among twelve other states with moderate eligibility criteria, Delaware ranks fifth. (See Figure 5.3)
- B. US Department of Education's Table 8-1. "Infants and toddlers receiving early intervention services under IDEA, Part C, by age and state: Fall 2005," as based on the Annual Child Count, indicates that Delaware had ranked 0.04 above the current national baseline (0.94%) in the percent of children, birth to age one, receiving early intervention services. (See Figure 5.2)

Although the percentage of infants determined Part C eligible has decreased, Delaware continues to maintain a high identification rate and a comprehensive child find system. 88% of all referrals (1,543) are received from hospitals, parents, and physicians. Since 2002, Delaware has shown an increase in referrals from its state child welfare agency (Division of Family Services) from 2% to 5% (52 to 95, an 82.7% increase) of the total referrals. This can be attributed to the provisions now required under the Child Abuse Prevention and Treatment ACT (CAPTA).

Additional information provided by the Delaware Population Consortium indicated that in 2005, there were 4163 children residing in Kent and Sussex Counties who were less than twelve months old. Of these children, 49 (1.2%) were identified as Part C eligible by the Birth to Three Early Intervention System.

Monitoring Priority: Effective General Supervision Part C/Child Find

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

- A. Other states with similar eligibility; and**
- B. National data.**

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

Measurement:

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

Measurable and Rigorous Target	
FFY2005	The Birth to Three Early Intervention System will identify 3.11% of infants and toddlers birth to 3 with IFSPs compared to: <ul style="list-style-type: none"> A. Other States with similar eligibility definitions; and B. National data

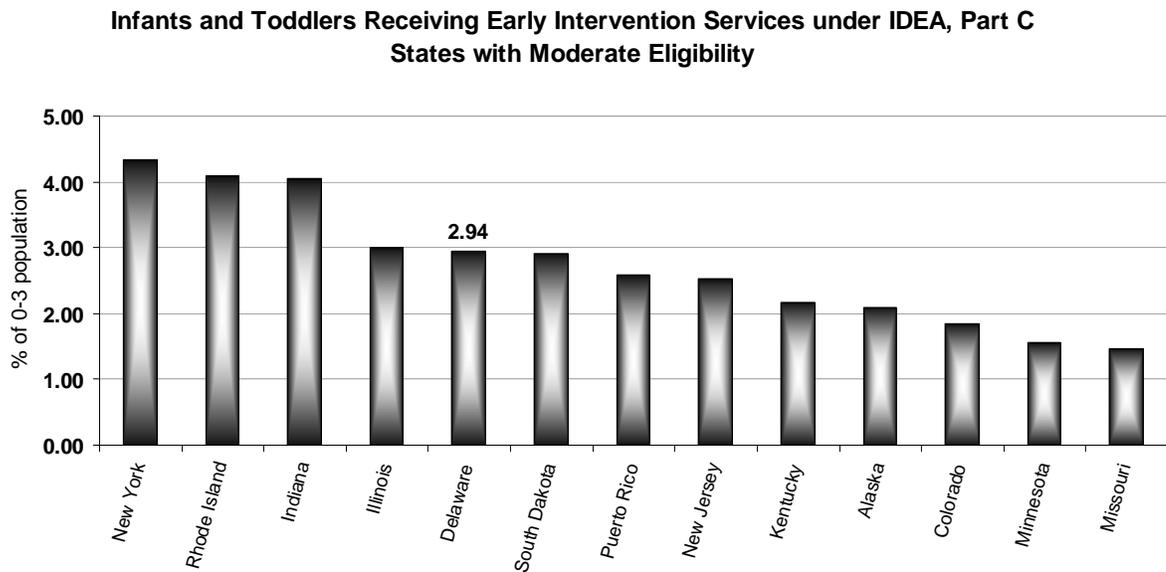
Actual Target Data for FFY2005:**Figure 6-1 Number of Children Served by Child Development Watch**

Reporting Year	Statewide Age 0-3	South Age 0-3
2000	1003	n/a
2001	907	n/a
2002	1034	n/a
2003	953	n/a
2004	1006	n/a
2005**	958	311

Source: Annual Child Count

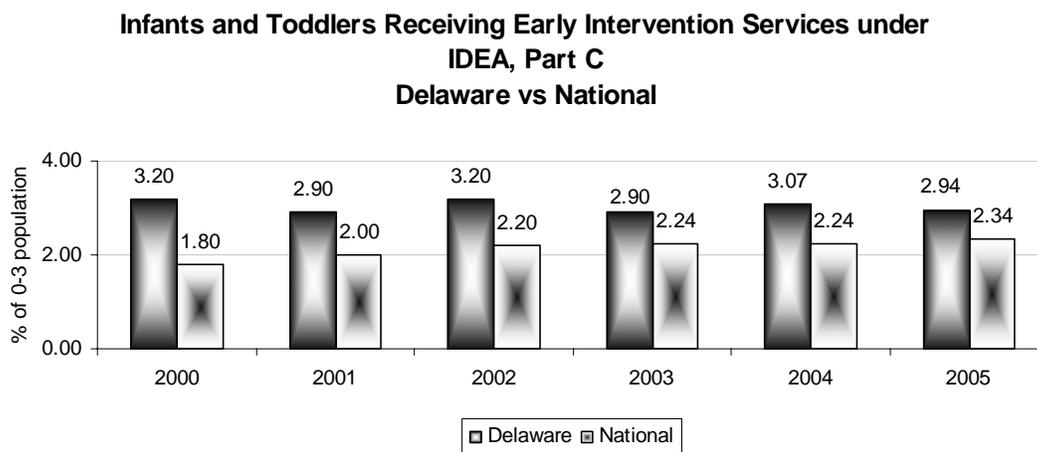
**Annual Child Count rerun 7-07

Figure 6-2 Comparison to States with Similar Eligibility



Sources: US Department of Education, Office of Special Education Programs, Data Analysis System (DANS)

Figure 6-3 Comparison to National Baseline



Sources: US Department of Education, Office of Special Education Programs, Data Analysis System (DANS)

Additional data from 2006 Annual Child Count:

As reported in February, 2007 (See Figures 6.1 and 6.3), 985 or 2.94% of Delaware's birth to one population was determined eligible for Part C.

- A. Among other twelve states with moderate eligibility criteria, Delaware ranks fifth (See Figure 6.2).

- B. US Department of Education's Table 8-1. "Infants and toddlers receiving early intervention services under IDEA, Part C, by age and state: Fall 2005," as based on the Annual Child Count, indicates that Delaware had ranked 0.6 above the current national baseline (2.34%) in the percent of children, from birth to age three, receiving early intervention services. (See Figure 6.3)

Additional information provided by the Delaware Population Consortium indicated that there were 11,401 children residing in Kent and Sussex Counties who were less than three years old. Of these children, 311 (2.7%) were identified as Part C eligible by the Birth to Three Early Intervention System.

Monitoring Priority: Effective General Supervision Part C/Child Find

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

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

Measurement:

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

Account for untimely evaluations.

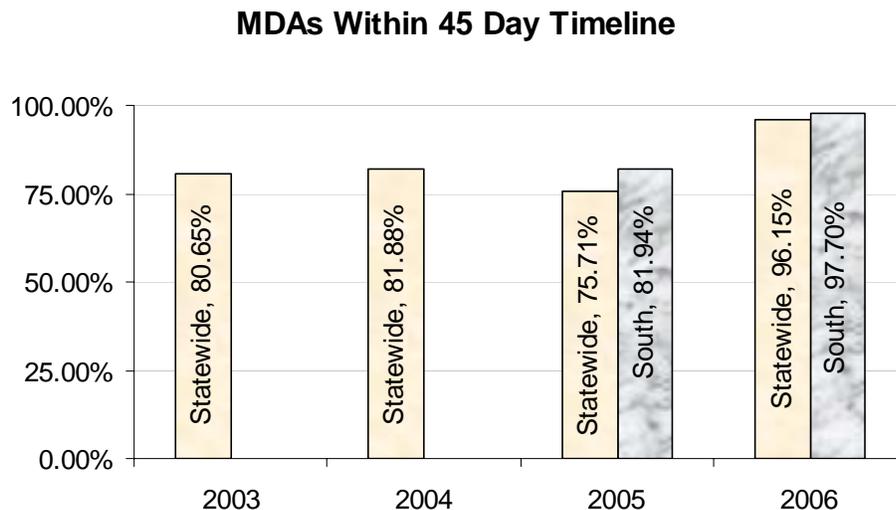
Measurable and Rigorous Target

FFY2005

100% of eligible infants and toddlers will receive an evaluation and assessment and an initial IFSP meeting will be conducted within Part C's 45-day timeline.

Actual Target Data for FFY2005:

Figure 7-1 MDA Timeline



Source: Annual Statewide Monitoring

Figure 7-2a Number of Charts Monitored for MDA Timeline (STATEWIDE)

Monitoring Year	# charts Monitored	# MDAs within 45 days
2003	124	100
2004	149	122
2005	177	134
2006	208	200

Source: Annual Statewide Monitoring

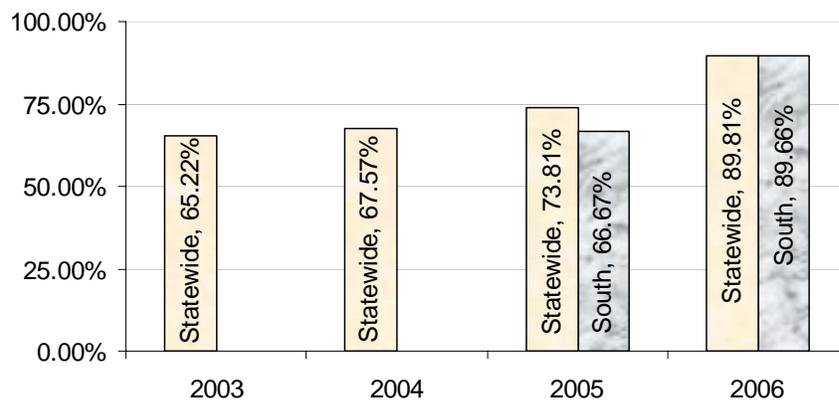
Figure 7-2b Number of Charts Monitored for MDA Timeline (SOUTH)

Monitoring Year	# charts Monitored	# MDAs within 45 days
2005	72	59
2006	87	85

Source: Annual Statewide Monitoring

Figure 7-3 IFSP Timeline

Initial IFSP Meeting Within 45 Days



Source: Annual Statewide Monitoring

Figure 7-4a Number of Charts Monitored for IFSP Timeline (STATEWIDE)

Monitoring Year	# IFSPs Monitored	# initial IFSP meetings within 45 days
2003	138	90
2004	148	100
2005	168	124
2006	206	185

Source: Annual Statewide Monitoring

Figure 7-4b Number of Charts Monitored for IFSP Timeline (SOUTH)

Monitoring Year	# IFSPs Monitored	# initial IFSP meetings within 45 days
2005	69	46
2006	87	78

Source: Annual Statewide Monitoring

Additional data from 2006 monitoring:

Data from 2006 monitoring indicates that 70 of 87 (80.46%) infants and toddlers had their MDA initiated within 45 days. Taking family circumstances into account, data for CDW South indicated that 97.70% of MDAs were initiated within a 45-day timeline.

Reasons MDA not initiated within 45 days:

Child Hospitalized	6
Family Scheduling	5
Child Illness	4
Program Scheduling	2
Total Outside of 45 days	17

Family reasons taken into consideration for reporting timeline include Child Hospitalization, Family Scheduling and Child Illness= 15 total

Adjusted total for CDW South: 2 cases not initiated within 45 days

There has been significant progress (19.2% increase) in the percentage of infants and toddlers who received their MDA within 45 days. The progress and improvement activities accounting for this progress are explained in the Annual Progress Report.

Data from 2006 monitoring indicates that 60 of 87 (68.97%) infants and toddlers had their IFSP signed within the 45-day timeline. Taking family circumstances into account, data for CDW South indicated that 89.66% of infants and toddlers received their IFSP within the 45-day timeline.

Reasons IFSP not initiated within 45 days:

No Documentation	7
Family Scheduling	7
Lost Contact with Family	2
Child Hospitalized	5
Child Illness	4
Program Scheduling	2
Total Outside of 45 days	27

Family reasons taken into consideration for reporting timeline include Family Scheduling, Lost Contact, Child Hospitalized or Illness= 18 total

Adjusted total for CDW South: 9 cases with no IFSP within 45 days

There has been progress (34.5% increase) in the percentage of infants and toddlers with IFSPs who receive their early intervention services in a timely manner. The progress and improvement activities accounting for this progress are explained in the Annual Progress Report.

Monitoring Priority: Effective General Supervision Part C/Effective Transition

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

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

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

Measurement:

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

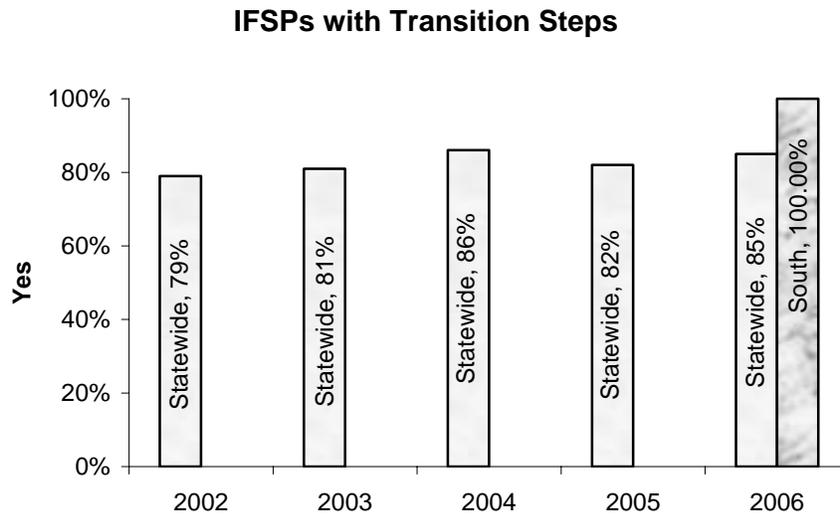
Measurable and Rigorous Target

FFY2005

- A. 100% of children exiting Part C will have an IFSP with transition steps and services.
- B. 100% of children exiting Part C who are potentially Part B eligible will have notification sent to the local school district.
- C. 100% of transition conferences will be held no more than 9 months or at least 90 days before exiting CDW for families of children potentially eligible for preschool special education services.

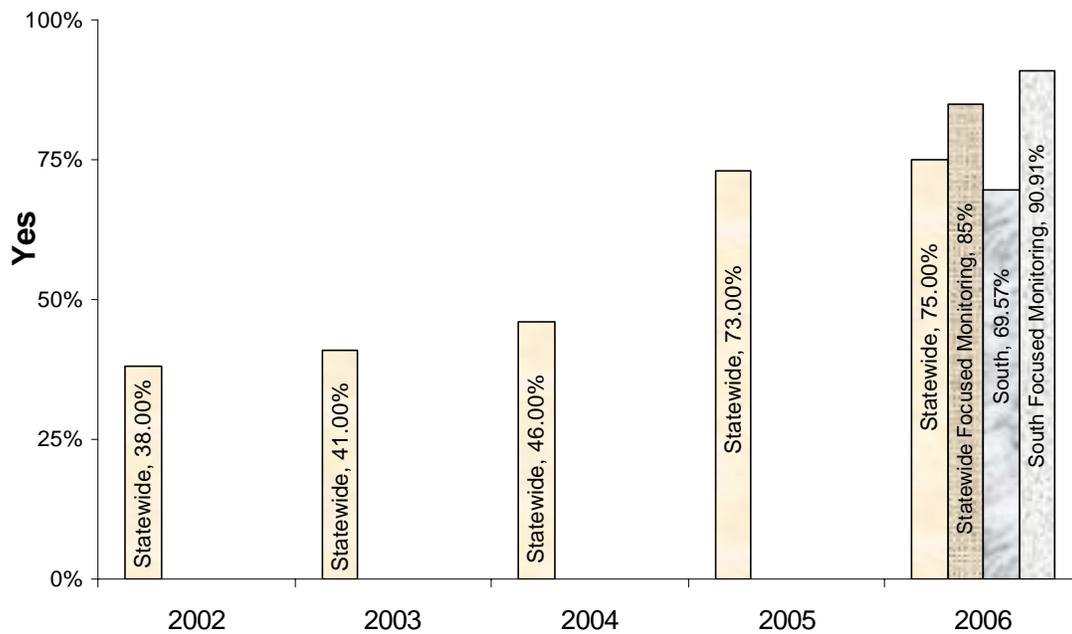
Actual Target Data for FFY2005:

Figure 8-1 Percentage of IFSPs with Transition Steps



Source: Annual Statewide Monitoring

Figure 8-2 Percentage of Transition Conferences Held



Source: Annual Statewide Monitoring/2006 Focused Transition Monitoring

Additional data from 2006 monitoring:

- A. 2006 statewide monitoring data indicated that 85% of the families had some discussion about transition planning that is documented on the IFSP. This is a steady increase from the 81.82% identified in monitoring in 2005. 100% of the charts monitored from CDW South indicated that transition planning had been discussed with families.
- B. ISIS notification reports continue to be available on the children who may be eligible for Part B by school district. These reports are part of the ISIS data base and are shared by the regional DOE/CDW liaison with local school districts at three designated times of the year. Local school districts anticipate these reports and utilize them for planning purposes. Notifications are sent on 100% of the children exiting CDW and potentially eligible for local school districts by the DOE/CDW liaisons. These reports also provide guidance for planning timely transition conferences. Local School Districts continue to function as a partner in identifying the need for transition conferences with regional service coordinators and through the DOE/CDW liaisons.
- C. An increasing number of transition conferences for children potentially eligible for Part B Preschool Services for Children with Disabilities are occurring and being convened prior to the 90 day timeline. 2006 statewide monitoring data indicated that for children potentially eligible for Part B services and appropriate for having a transition conference, 75% (33 out of 44) had a timely transition conference (no more than 9 months and at least ninety days before exiting Part C) or were convened with a delay due to family circumstances. Monitoring data indicated that the primary reasons for transition conferences not held within the timeline was that the CDW local program had scheduling challenges or lack of sufficient documentation explaining why delays occurred. 69.56% of the charts monitored during annual statewide monitoring located at CDW South were identified to have had a timely transition conference. (7 of 23 were held in the appropriate timeline, an additional 9 were delayed as a result of family circumstances)

Focused monitoring was conducted after the end of FFY2005 as Delaware's response to correspondence received from OSEP in March 2006 citing Delaware's continued noncompliance of transition timelines. OSEP indicated that results from the focused monitoring for timely transition conferences should be reported in the FFY2005 APR. The Birth to Three monitoring team and the CDW local programs determined that a larger sample was needed in order to accurately report progress. This action plan was approved by OSEP, along with other improvement activities.

Birth to Three conducted focused transition monitoring in October and November 2006. A much larger sample was selected; charts from 284 children who had turned three between May 1, 2006 and October 31, 2006. This focused monitoring expanded the monitoring from 44 charts reviewed during annual statewide monitoring to 284 charts.

Results from focused monitoring indicated that 85.21% (242 of the 284 children) had a timely transition conference. Of the 242 cases reviewed, 162 had a timely transition conference and 80 had transition conferences not held in the required timely as a result of family circumstances. Examples of family circumstances included family scheduling; late referrals to CDW (within ninety days of child's third birthday); family declined transition to Part B; unable to locate; moved out of state; child/family illness.

Focused monitoring results indicated that there was significant progress (an increase of 12% statewide from 2005 to 2006; 73% in 2005 to 85% in 2006) in the percent of timely

transition conferences. Focused monitoring also allowed us to report on data from the local CDW programs, thereby better understanding how to target improvements towards full compliance. The CDW Southern Health Services Program had 90.91% of children having a timely transition conference or conference delayed due to family reasons; CDW Northern Health Services had 79.68% of children having a timely transition conference or conference delayed due to family reasons. The major reason for transition conference not held in timeline was CDW program having scheduling challenges or lack of sufficient documentation in the chart explaining why the delay occurred. CDW Northern Health Services had vacant positions, including their Management Analyst position vacant from August 2005 until August 2006. This impacted their ability to use existing ISIS caseload reports to locally monitor service coordinators to convene timely transition conferences. In addition, a monthly report has been created in ISIS and is now being shared with CDW Service Coordinators and their supervisors in order to serve as a tickler.

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

Measurable and Rigorous Target

FFY2005

The Birth to Three Early Intervention System will identify and correct 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification.

Actual Target Data for FFY2005:

Figure 9-1 Service Delivery – Findings and Correction

	# Reviewed	# Instances of Noncompliance	# of Findings of Noncompliance	# Corrected Within One Year	% Corrected Within One Year
Services Received in Timely Manner	North 117	North 21	2	0	0%
	South 86	South 12			

Source: Annual Statewide Monitoring Data

Figure 9-2 MDA/IFSP – Findings and Correction

	# Reviewed	# Instances of Noncompliance	# of Findings of Noncompliance	# Corrected Within One Year	% Corrected Within One Year
An evaluation and assessment within 45 days	North 120	North 7	2	2	100%
	South 86	South 2			
An initial IFSP meeting within 45 days	North 119	North 11	2	2	100%
	South 86	South 9			

Source: 2006 Annual Statewide Monitoring Data

Figure 9-3 Transition Conferences – Findings and Correction

	# Reviewed	# Instances of Noncompliance	# of Findings of Noncompliance	# Corrected Within One Year	% Corrected Within One Year
Transition Conference Held Within Timeline <i>(2006 Annual Statewide Monitoring)</i>	North 20	North 7	2	1	50%
	South 23	South 7			

Source: 2006 Annual Statewide Monitoring Data

Figure 9-4 Total Number of Written Complaints, Due Process Hearings, and Mediations Received Between July 1, 2005 and June 30, 2006

Number of Formal Written Complaints Received	Number of Due Process Hearings	Number of Mediations
0	0	0

Source: Birth to Three Office

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2005:

As approved in our State Performance Plan, local data for Delaware is organized by two regions: (1) New Castle County, and (2) Kent and Sussex Counties.

Delaware had defined an "instance of noncompliance" is an individual chart found out of compliance. Any region with an instance of noncompliance leads to a finding of noncompliance. Since Delaware only has two regions, results will always be reported as 0%, 50%, or 100%

Correction is said to have occurred when technical assistance has been provided and each region has implemented policies and procedures which will lead to the correction of noncompliance within the year.

The Birth to Three Monitoring Team, through its comprehensive monitoring process, was able to identify instances of noncompliance:

Timely Delivery of Services

Both the North and South regions had individual cases (instances) of noncompliance. This leads to two findings of noncompliance. The local regions concurred with the monitoring results. Technical assistance has been provided, and policies and procedures were developed and implemented in order to address noncompliance.

Quantitative and qualitative data collected as part of the monitoring system demonstrates compliance. 100 percent correction will not likely be achieved in either region because the root cause of the noncompliance is a statewide issue regarding lack of sufficient personnel, specifically, the shortage of speech-language pathologist. Short term improvement activities will show immediate progress and are outlined in Indicator 1. In addition, long term improvement activities are also outlined within Indicator 1. Progress will be made, but full correction of this issue is unlikely within the next year due to the systemic nature of the long term improvement activities. It is expected that full correction will be achieved in FFY07 due to the comprehensive nature of the improvement activities.

Evaluation and Assessment and IFSP within 45-days

Both the North and South regions had individual cases (instances) of noncompliance. This leads to two findings of noncompliance. The local regions concurred with the monitoring results. Technical assistance has been provided, and policies and procedures were developed and implemented in order to address noncompliance.

Correction of noncompliance has been achieved in each region. As outlined in Indicator 7, improvement activities regarding increased resources in both contracts and staff have resulted in timely evaluations and initial IFSP meetings. Ongoing management reports are reviewed at the local and state levels to ensure that instances of noncompliance are immediately identified and corrected.

Transition Conferences within 9 month—90 day timeline

Both the North and South regions had individual cases (instances) of noncompliance. This leads to two findings of noncompliance. The local regions concurred with the monitoring results. Technical assistance has been provided, and policies and procedures were developed and implemented in order to address noncompliance.

Ongoing technical assistance continues to be provided at both the individual and program level. Supervisors and local management analysts are provided with monthly reports to track and monitor timely transition conferences. Numerous state and local regional improvements are described in Indicator 8, including the addition of focused early childhood transition monitoring.

Quantitative and qualitative data collected as part of the monitoring system demonstrates that correction has been achieved in the Southern region.

One of the primary reasons for noncompliance in the North is the number of children needing transition conferences and the capacity of the system to schedule those meetings in a timely manner. In order to address this, a procedure is being piloted which will require transition conferences to be convened significantly earlier. In addition the number of scheduled days available for transition conferences has been expanded. It is anticipated that these improvement activities will result in full correction in the northern region in FFY07.

The Delaware Birth to Three Early Intervention System has received neither formal written complaints nor requests for mediation or due process hearings.