

# Archived Information

Arizona Department of Economic Security  
Compliance Agreement  
Attachment A

**AREA 1: General Supervision**

**OUTCOME:** DES will utilize effective monitoring and general supervision procedures to ensure the identification and correction of noncompliance with Part C.

**Measurable Goals:**

- Goal 1: DES will monitor all State or contracted programs that provide Part C services in Arizona, for compliance with all Part C requirements.
- Goal 2: DES will ensure that deficiencies identified through monitoring are corrected in a timely manner.

With prior written approval from OSEP, adjustment to the Tasks and Activities to Reach Results column listed in this table may be made when necessary to support achievement of compliance outcomes within the required timelines. The Tasks and Activities to Reach Results will be evaluated every six months to determine their effectiveness and any need for change. Any requests for change or amendments will be submitted to OSEP in writing.

**Objective GS 1: Revise the Interagency Agreement(s) with the AzEIP participating State agencies to address general supervision requirements.**

<b>Tasks and Activities to Reach Results</b>	<b>Verification</b>	<b>Target Completion Date</b>	<b>Date Completed</b>	<b>Lead and Primary Partners</b>
GS.1A. Identify the issues that need to be included in the Interagency Agreement(s) with each AzEIP participating state agency (DES, ASDB, ADHS, ADE, and AHCCCS).	Summary of progress in quarterly report to OSEP.	3 months <sup>1</sup>		AzEIP Executive Director, State Interagency Team, Legal Counsel for each agency
GS.1B. Convene the State Interagency Team and its legal counsel to draft Interagency Agreement(s).	Draft of the Interagency Agreement(s) to OSEP	5 months		AzEIP Executive Director, State Interagency Team, Legal Counsel for each agency
GS.1C. Publish the Interagency Agreement(s) for public comment.	Interagency Agreement(s) published for public comment	9 months		AzEIP Executive Director
GS.1D. State Interagency Team members will have legal counsel review the revised Interagency Agreement(s) that reflects changes resulting from public comment.	Summary of changes made in quarterly report to OSEP.	12 months		AzEIP Executive Director, State Interagency Team, Legal Counsel for each agency
GS.1E. Obtain signatures of parties on Interagency Agreement(s).	Summary of progress in quarterly report to OSEP.	15 months		AzEIP Executive Director, State Interagency Team
GS.1F. File the Interagency Agreement(s) with Secretary of State.	Summary of progress in quarterly report to OSEP.	16 months		DES
GS.1G. Disseminate and implement Interagency Agreement(s).	Final Interagency Agreement(s) submitted to OSEP and summary of implementation progress in quarterly	16 months and ongoing		DES/AzEIP

<sup>1</sup> The target completion date for any reports or documentation is the final day of the month following the date on which the Compliance Agreement is signed by both parties. Thus, if the Compliance Agreement is signed on August 1, 2004, a "3 months" completion date requires reporting on November 30, 2004. Quarterly reports are due on the last day of every third month following the date the Compliance Agreement is signed by both parties. The FFY 2003 through FFY 2005 Part C Annual Performance Reports (APRs) submitted during the period of the Compliance Agreement may serve as the quarterly reports under the Compliance Agreement as long as the content requirements for both the APR and the Compliance Agreement are addressed in the APR submission.

reports to OSEP

**Objective GS 2:** Align policies and procedures across agencies to include general supervision and ensure compliance with Part C (on monitoring, data collection, contract review, and technical assistance).

<b>Tasks and Activities to Reach Results</b>	<b>Verification</b>	<b>Target Completion Date</b>	<b>Date Completed</b>	<b>Lead and Primary Partners</b>
GS.2A. Draft the policies and procedures review checklist (on monitoring, data collection, contract review, and technical assistance).	Summary of progress in quarterly report to OSEP.	3 months		AZEIP Professional Development Coordinator
GS.2B. Review DDD, ASDB and ADHS policies and procedures for compliance with IDEA, Part C and provide information regarding inconsistency with IDEA, Part C and AZEIP policies (regarding Part C requirements including monitoring, data collection, contract review, and technical assistance).	Summary of progress in quarterly report to OSEP.	10 months		Continuous Quality Improvement Coordinators, and DDD, ASDB, ADHS Partners
GS.2C. If needed, agencies will draft revised policies and procedures to resolve discrepancies (regarding Part C requirements including monitoring, data collection, contract review, and technical assistance) and ensure agency staff and contractors understand revisions.	If DES/AZEIP determines that an agency policy or procedure is out of compliance with IDEA, Part C, DES/AZEIP will submit revised policy to OSEP for approval.	18 months		Continuous Quality Improvement Coordinators, and DDD, ASDB, ADHS Partners
GS.2D. Finalize policies and procedures from GS.2C. above.	Summary of progress in quarterly report to OSEP and submit finalized policies and procedures to OSEP if required as part of Part C Application.	24 months		Continuous Quality Improvement Coordinators and DDD, ASDB, ADHS Partners
GS.2E. Implement finalized policies and procedures.	Summary of progress on implementation of new policies and procedures to OSEP in quarterly report.	24 – 36 months		Continuous Quality Improvement Coordinators and DDD, ASDB, ADHS Partners

**Objective GS 3: Implement the monitoring system, which includes analysis of data and ensures corrective action.**

Tasks and Activities to Reach Results	Verification	Target Completion Date	Date Completed	Lead and Primary Partners
<p>GS.3A. Review and, if needed, revise the Continuous Monitoring and Quality Improvement tools and procedures to ensure compliance with service coordination requirements and the individualization of early intervention services. The Continuous Monitoring and Quality Improvement system will track:</p> <ul style="list-style-type: none"> <li>(1) The IFSPs on which services are not linked to functional outcomes that are based on the families' priorities, resources and concerns and the child's current levels of development; and</li> <li>(2) The number of IFSPs on which a single service coordinator is not identified.</li> </ul>	<p>Summary of progress in quarterly report to OSEP, which will include data on service coordination and identification of early intervention services needed on the IFSP.</p>	<p><b>5 months for service coordination and IFSP identification of services data. Ongoing reporting in the Part C annual APR (FFYs 2003, 2004 and 2005) and annually thereafter on 9/30/05, 9/30/06 and 9/30/07.</b></p>		<p>Continuous Quality Improvement Coordinators, Technical Assistance Specialist</p>
<p>GS.3B. Statewide orientation and training on the AzEIP Monitoring System, with emphasis on the Program Self-Assessment (See Attachment C) provided to Program Supervisors contracted or employed by DES/AzEIP, DES/DDD, ASDB, and ADHS.</p>	<p>Summary of progress in quarterly report to OSEP, including the number of participants.</p>	<p><b>6 months</b></p>		<p>Continuous Quality Improvement Coordinators, Local Program Coordinators, and Program Supervisors</p>
<p>GS.3C. Revise the family surveys and family interview questions to incorporate newly identified compliance elements and Annual Performance Report indicators.</p>	<p>Revised Family Surveys submitted to OSEP.</p>	<p><b>6 months</b></p>		<p>Continuous Quality Improvement Coordinators, Technical Assistance Specialist, Local Program Coordinators, and the</p>

				Evaluation and Monitoring Committee of the ICC
GS.3D. Implement the Program Self Assessment <sup>2</sup> with Service Coordination providers statewide (see annual cycle in Attachment C).	Summary of progress in quarterly report to OSEP.	6 months		Continuous Quality Improvement Coordinators, Local Program Coordinators, and Service Coordination Supervisors
GS.3E. Implement the "Desk Audit" process: Analyze available data from all sources, including comparison over time, and utilize analysis to identify issues of compliance and noncompliance.	Summary of analysis of State and county data.	12 months and annually thereafter		Continuous Quality Improvement Coordinators, Technical Assistance Specialist
GS.3F. Implement the site review cycle (see 5-year cycle in Attachment C)	Sample of "reports of findings," summary of all findings made and summary of progress in quarterly report to OSEP.	10 months and in each APR thereafter		Continuous Quality Improvement Coordinators, State Interagency Monitoring Team
GS. 3G. Utilize information from the Program Self-Assessment, the Desk-Audit and the Site Review (if conducted that year) to identify areas of noncompliance and require the establishment of a corrective action plan.	Summary of analysis of State and county data.	12 months and annually thereafter		Continuous Quality Improvement Coordinators, Monitoring/Technical Assistance Specialists
GS.3H. Review and approve corrective action plans (CAPs) for counties and ensure correction.	Copies of first two CAPs approved by AZEIP to OSEP and summaries of CAP findings, corrective actions taken and correction data to OSEP	15 months and every quarterly report thereafter.		Continuous Quality Improvement Coordinators, Technical Assistance Specialist

<sup>2</sup> Arizona's statewide monitoring system comprises the following components: (1) Program Self Assessment that utilizes multiple data sources and evaluates program performance and practices related to Part C requirements; (2) Desk Audit conducted by AZEIP which includes a review of IFSPs and Arizona's child tracking system data; (3) family surveys and family interviews; (4) Site Reviews which include file audits of personnel, child and financial information; and (5) community level and agency level reviews. See Attachment C for the five-year monitoring cycle schedule.

	thereafter.			
GS.3I. Utilize available data to confirm that corrective action measures have resulted in compliance with identified issues.	Summary of analysis of State and county data.	22 months and every 6 months thereafter		Continuous Quality Improvement Coordinators, Technical Assistance Specialist, State Interagency Monitoring Team

**Objective GS 4:** Formalize a technical assistance system that ensures that programs have access to technical assistance that supports their implementation of corrective action and attainment of compliance.

Tasks and Activities to Reach Results	Verification	Target Completion Date	Date Completed	Lead and Primary Partners
GS.4A. Establish technical assistance priorities.	Summary of priorities in quarterly report to OSEP	4 months		Continuous Quality Improvement Coordinators, AzEIP Professional Development Coordinator, State Interagency Team
GS.4B. DES/AzEIP establishes procedures for accessing technical assistance.	Summary of progress in quarterly report to OSEP	4 months		AzEIP Professional Development Coordinator
GS.4C. With input from the State Interagency Team, identify individuals with expertise in priority areas to form the technical assistance cadre.	Summary of progress in quarterly report to OSEP	6 months		AzEIP Professional Development Coordinator, State Interagency Team,
GS.4D. DES/AzEIP disseminates procedures for accessing technical assistance.	Summary of progress in quarterly report to OSEP	6 months		AzEIP Professional Development Coordinator
GS.4E. DES/AzEIP monitors use of technical assistance resources to ensure accessibility, timeliness, relevance and effectiveness of the technical assistance system.	Summary of assessment in quarterly report to OSEP	12 months and annually thereafter		AzEIP Professional Development Coordinator

**Objective GS.5:** Revise the ACTS system to expand data collection and reporting functions; incorporating timely data access and management reporting at the local and State AzEIP offices for monitoring purposes.

Tasks and Activities to Reach Results	Verification	Target Date	Date Completed	Lead and Primary Partners
<p>GS.5A. Identify the required components of each data report, how often data will be collected, and how data will be entered and validated.</p>	<p>Summary of progress in quarterly report to OSEP</p>	<p>3 months</p>		<p>Management Information Specialist, DES System and Programming, Continuous Quality Improvement Coordinators and Technical Assistance Specialist</p>
<p>GS.5B. Identify data elements for Part C compliance elements including the:</p> <p>(1) Number of infants and toddlers for whom evaluations and assessments were not completed within 45 days of the initial referral;</p> <p>(2) Number of infants and toddlers for whom the initial IFSP meeting was not held within 45 days from the date of referral;</p> <p>(3) Extent of the delay (i.e., the number of days past the 45 day timeline) for infants and toddlers identified under (1) and (2) above;</p> <p>(4) Reasons for delay in meeting the 45-day timeline requirement for (1) and (2) above, including lack of evaluation personnel in either a specific discipline or county, family unavailability, service coordinator or evaluator unavailability or other reasons;</p> <p>(5) Number of infants and toddlers with disabilities and their families who are not receiving all the Part C services listed on the infant or toddler's IFSP;</p> <p>(6) Type(s) of early intervention service(s) (including services to families as well as to infants and toddlers with disabilities) that have waiting lists and, for each early intervention service, the number of infants and toddlers with disabilities on the</p>	<p>Summary of progress in quarterly report to OSEP</p>	<p>5 months</p>		<p>Management Information Specialist, DES System and Programming, Continuous Quality Improvement Coordinators and Technical Assistance Specialist</p>

<p>waiting list for that particular intervention service at the beginning of the reporting period; and</p> <p>(7) For each early intervention service for which there is a waiting list, the number of days that each eligible infant or toddler or the family is on the waiting list.</p>				
<p>GS.5C. Code and test ACTS data system to ensure that data elements listed in GS.5B are included and are capable of being input.</p>	<p>Summary of progress in quarterly report to OSEP</p>	<p>5 months</p>		<p>Management Information Specialist, DES System and Programming, Continuous Quality Improvement Coordinators and Technical Assistance Specialist</p>
<p>GS.5D. Establish an implementation plan for the collection of the data.</p>	<p>Summary of progress in quarterly report to OSEP</p>	<p>6 months</p>		<p>Management Information Specialist, DES System and Programming, Continuous Quality Improvement Coordinators and Technical Assistance Specialist</p>
<p>GS.5E. Implement the revised data system to ensure collection of revised data elements from GS.5B.</p>	<p>Summary of progress in quarterly report to OSEP</p>	<p>7 months and each quarterly report thereafter</p>		<p>Management Information Specialist, Continuous Quality Improvement Coordinators and Technical Assistance Specialist</p>
<p>GS.5F. Evaluate Results</p> <ul style="list-style-type: none"> <li>• Check reports for accuracy</li> <li>• Check if data is properly entered and validated</li> <li>• Develop plan to correct, if needed</li> <li>• Technical Assistance, if needed</li> <li>• Fix production problems and retest and retrain, if needed.</li> </ul>	<p>Summary and analysis of initial data collected on GS.5B Part C compliance data elements.</p>	<p>13 months</p>		<p>Management Information Specialist, DES System and Programming, Continuous Quality Improvement Coordinators and Technical Assistance Specialist</p>

**Objective GS.6 Incorporate data elements and reports into the State Agencies' Data Systems.**

<b>Tasks and Activities to Reach Results</b>	<b>Verification</b>	<b>Target Completion Date</b>	<b>Date Completed</b>	<b>Lead and Primary Partners</b>
GS.6.1.A. Work with DDD to revise the DDD data system to ensure inclusion of required data elements from GS.5B. above; reports and transfer of data to and from AzEIP.	Summary of progress in quarterly report to OSEP.	10 months		Management Information Specialist and Technical Assistance Specialist and DDD
GS.6.1.B. Implement and monitor the revised DDD system.	Summary of progress in quarterly report to OSEP.	12 months		Management Information Specialist and Technical Assistance Specialist and DDD
GS.6.1.C. Provide technical assistance, as needed, to resolve production problems, re-test and retrain.	Summary of technical assistance in quarterly report to OSEP.	12 months and ongoing, as needed		Management Information Specialist and Technical Assistance Specialist and DDD
GS.6.2.A. Work with ADHS to revise data system to ensure inclusion of required data elements from GS.5B. above; reports and transfer of data to and from AzEIP.	Summary of progress in quarterly report to OSEP.	3 months		Management Information Specialist and Technical Assistance Specialist and ADHS
GS.6.2.B. Implement and monitor the revised ADHS system.	Summary of progress in quarterly report to OSEP.	5 months		Management Information Specialist and Technical Assistance Specialist and ADHS
GS.6.2.C. Provide technical assistance, as needed, to resolve production problems, re-test and retrain.	Summary of technical assistance in quarterly report to OSEP.	7 months and ongoing, as needed		Management Information Specialist and Technical Assistance Specialist and ADHS
GS.6.3.A. Work with ASDB data system to ensure inclusion of required data elements from GS.5B. above; reports and transfer of data to and from AzEIP.	Summary of progress in quarterly report to OSEP.	3 months		Management Information Specialist and Technical Assistance Specialist and ASDB

GS.6.3.B. Implement and monitor the revised ASDB system.	Summary of progress in quarterly report to OSEP.	5 months		Management Information Specialist and Technical Assistance Specialist and ASDB
GS.6.3.C. Provide technical assistance, as needed, to resolve production problems, re-test and retrain.	Summary of technical assistance in quarterly report to OSEP.	7 months and ongoing, as needed		Management Information Specialist and Technical Assistance Specialist and ASDB

**Arizona Department of Economic Security  
Compliance Agreement  
Attachment B**

**AREAS 2, 3 and 4: Early Intervention Services in the Natural Environment (EIS-NE):  
Timely Identification, Individualization and Provision of all Early Intervention and Service Coordination Services**

**OUTCOME:** The evaluation and assessment and initial IFSP meeting will be held within 45 days of the referral. IFSPs will be individualized based on the child and family's unique needs. All appropriate early intervention services will be identified on the IFSP and provided in a timely manner along with service coordination for all eligible infants and toddlers with disabilities, including infants and toddlers on reservations.

**Measurable Goals:**

- Goal 1: Initial IFSP meetings (and evaluations and assessments) for all infants and toddlers referred to Part C shall be conducted within 45 days of the referral.
- Goal 2: All IFSPs shall contain the early intervention services needed by the child and family to meet the functional outcomes, which are based on the unique developmental needs of the child and the resources, priorities and concerns of the family. All eligible infants and toddlers with disabilities and their families shall receive the early intervention services identified on their IFSP in a timely manner.
- Goal 3: Each family has a single designated service coordinator who shall: 1) coordinate all services across agency lines; 2) serve as the single point of contact for the family to help it obtain the services and assistance they need; 3) facilitate timely delivery of available services; 4) seek appropriate services necessary to benefit the development of each child served for the duration of the child's eligibility, and; (5) ensure that all families receive appropriate prior written notice and understand their procedural rights and safeguards.

With prior written approval from OSEP, adjustment to the Tasks and Activities to Reach Results column listed in this table may be made when necessary to support achievement of compliance outcomes within the required timelines. The Tasks and Activities to Reach Results will be evaluated every six months to determine their effectiveness and any need for change. Any requests for change or amendments will be submitted to OSEP in writing.

**Objective EISNE 1: Evaluate the nature and cause of the system capacity issues.**

<b>Tasks and Activities to Reach Results</b>	<b>Verification</b>	<b>Target Completion Date</b>	<b>Date Completed</b>	<b>Lead and Primary Partners</b>
EISNE 1A. Investigate personnel shortages to identify the extent and regional variations, which may impact service delivery.	Summary of progress in quarterly report to OSEP.	12 months and ongoing		AzEIP Professional Development Coordinator, AzEIP Staff Development and Training Project, Technical Assistance Specialist, Management and Information Specialist
EISNE 1A.1 With the assistance of the Arizona State Licensing Boards for Speech Language Pathology, Physical Therapy, and Occupational Therapy, determine the total number of professionals licensed in the State.	Summary of data in quarterly report to OSEP.	6 months		AzEIP Professional Development Coordinator, Technical Assistance Specialist, and AzEIP Staff Development and Training Project
EISNE 1A.2 Compare regional personnel analyses to the regional and agency/program reporting of wait lists.	Summary of data (including regional personnel analyses) in quarterly report to OSEP.	15 months and in each quarterly report thereafter		Continuous Quality Improvement Coordinators, Technical Assistance Specialist, AzEIP Professional Development Coordinator
EISNE 1B. Conduct analysis of existing personnel database and program personnel reporting to identify the discipline-specific turnover rates.	Summary of data in quarterly report to OSEP	6 months		AzEIP Professional Development Coordinator, AzEIP Staff Development and Training Project
EISNE 1B.1. Conduct a regional comparison of service provider rates of payment and analysis of how sources of payment affect provider availability	Summary of data in quarterly report to OSEP	6 months		AzEIP Professional Development Coordinator, AzEIP Participating Agency

(across the AzEIP participating agencies' contracts, AHCCCS, private insurance, public schools and rehabilitation centers in the State).				Representatives
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**Objective EISNE 2: Identify and implement personnel recruitment and retention strategies.**

EISNE 2A. Establish and maintain regional directories of providers that will be available to agencies and programs that are building or expanding the service-providing network.	Summary of progress in quarterly report to OSEP	6 months and annually thereafter		Local Program Coordinators, Technical Assistance Specialist, Professional Development Coordinator
EISNE 2B. Through newsletters and conference presentations, partner with State Professional Associations to reach greater numbers of qualified personnel who are interested in providing early intervention services.	Summary of activities in quarterly report to OSEP.	3 months and annually thereafter		AzEIP Professional Development Coordinator
EISNE 2C. Work with the Institutes of Higher Education (IHE) to encourage students to prepare for the field of early intervention, recruit new graduates and incorporate the AzEIP Standards of Practice requirements into preservice curricula.	Summary of progress in quarterly report to OSEP	12 months and annually thereafter		AzEIP Professional Development Coordinator, AzEIP Staff Development and Training Project

**Objective EISNE 3: Develop an interagency, team-based service delivery model that ensures compliance with timely identification of infants and toddlers with disabilities and provision of services to infants and toddlers with disabilities and their families while maximizing personnel resources.**

<b>Tasks and Activities to Reach Results</b>	<b>Verification</b>	<b>Target Completion Date</b>	<b>Date Completed</b>	<b>Lead and Primary Partners</b>
EISNE 3A. Draft an interagency, team-based service delivery model (for service providing agencies) that ensures compliance and maximizes personnel resources (and include in the model, if needed, alternative rate structures that create incentives for team-based provision of early intervention services in natural environments).	Summary of progress in quarterly report to OSEP.	12 months		AzEIP Executive Director, State Interagency Team, DES/AzEIP Staff
EISNE 3B. Facilitate broad public review and comment on the proposed service delivery model.	Summary of progress in quarterly report to OSEP.  Submit proposed service delivery model to OSEP.	15 months		AzEIP Executive Director, State Interagency Team, DES/AzEIP Staff
EISNE 3C. Implement an interagency plan to support the proposed model of service delivery, including the establishment of new contracts and/or the revision of policies and procedures.	Summary of progress in quarterly report to OSEP.	24 months		AzEIP Executive Director, State Interagency Team, DES/AzEIP Staff

**Objective EISNE 4: Ensure that all service coordination functions are implemented statewide and across agencies.**

<b>Tasks and Activities to Reach Results</b>	<b>Verification</b>	<b>Target Completion Date</b>	<b>Date Completed</b>	<b>Lead and Primary Partners</b>
EISNE 4A. Utilize data from the monitoring system to evaluate the implementation of service coordination functions.	Summary of data in Annual Performance Reports and six months thereafter.	Annual Performance Reports and a 6 month midpoint summary between Annual Performance Reports		Technical Assistance Specialist, Continuous Quality Improvement Coordinators
EISNE 4B. If noncompliance is identified, develop a corrective action plan.	Summary of progress in quarterly report to OSEP	12 months		Technical Assistance Specialist, Continuous Quality Improvement Coordinators, State Interagency Team
EISNE 4C. Monitor implementation of	Summary of progress in	18 months and ongoing		Continuous Quality

corrective action plans	quarterly report to OSEP			Improvement Coordinators, Technical Assistance Specialist, AzEIP Professional Development Coordinator
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**Objective EISNE 5:** Align policies and procedures across agencies to include general supervision and ensure compliance with Part C (to ensure compliance with 45-day timeline, identification and timely provision of early intervention services and service coordination functions).

Tasks and Activities to Reach Results	Verification	Target Completion Date	Date Completed	Lead and Primary Partners
EISNE 5A. Draft a checklist for consistently reviewing policies and procedures for Part C compliance (regarding 45-day timeline, service provision and service coordination).	Summary of progress in quarterly report to OSEP.	3 months		AzEIP Professional Development Coordinator
EISNE 5B. Review DDD, ASDB and ADHS policies and procedures for compliance with IDEA, Part C (regarding 45-day timeline, service provision and service coordination) and provide information regarding any inconsistency with IDEA, Part C and AzEIP policies.	Summary of progress in quarterly report to OSEP.	10 months		Continuous Quality Improvement Coordinators and DDD, ASDB and ADHS partners
EISNE 5C. If needed, agencies will draft revised policies and procedures to resolve discrepancies (regarding 45-day timeline, service provision and service coordination) and ensure staff and contractors understand revisions.	If DES/AzEIP determines that an agency policy or procedure is out of compliance with IDEA, Part C, DES/AzEIP will submit revised policy or procedure to OSEP.	18 months		Continuous Quality Improvement Coordinators, and DDD, ASDB and ADHS partners
EISNE 5D. Finalize revised policies and procedures from EISNE 5C. above.	Summary of progress in quarterly report to OSEP.	24 months		Continuous Quality Improvement Coordinators, and DDD,

				ASDB and ADHS partners
EISNE 5E. Implement finalized policies and procedures.	Summary of progress (and implementation of revised finalized policies and procedures) to OSEP in quarterly report.	24 – 36 months		Continuous Quality Improvement Coordinators and DDD, ASDB, and ADHS Partners

**Objective EISNE 6:** Implement the monitoring system, which includes analysis of data and ensures corrective action (to ensure compliance with 45-day timeline, identification and timely provision of early intervention services and service coordination functions).

See Task and Activities to Reach Results, Verification, Target Completion Date and Lead and Primary Partners under GS. 3 above.

**Objective EISNE 7:** Revise the ACTS system to expand data collection and reporting functions; incorporating real-time data access and management reporting at the local and DES/AzeIP locations (to ensure compliance with 45-day timeline, identification and timely provision of early intervention services and service coordination functions).

See Task and Activities to Reach Results, Verification, Target Completion Date and Lead and Primary Partners under GS. 5 above.

**Objective EISNE 8:** Incorporate data elements and reports into the State Agencies Data Systems (to ensure compliance with 45-day timeline, identification and timely provision of early intervention services and service coordination functions).

See Task and Activities to Reach Results, Verification, Target Completion Date and Lead and Primary Partners under GS. 6 above.

**ARIZONA PART C COMPLIANCE AGREEMENT**

**ATTACHMENT C**

**Program Self-Assessment and Monitoring Cycle**

- Cycle 1: Maricopa County
- Cycle 2: Yuma, La Paz, Mohave, and Yavapai Counties
- Cycle 3: Coconino, Navajo, Apache Counties and Navajo Nation
- Cycle 4: Cochise, Graham, Greenlee, Pinal and Gila Counties
- Cycle 5: Pima and Santa Cruz Counties

<p><b>ACRONYMS</b>                  PSA = Program Self Assessment                  T/A = Technical Assistance                  YR= Year                  CAP = Corrective Action Plan</p>
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**ANNUAL PROGRAM SELF-ASSESSMENT CYCLE**

Year	January-March	April-June	July-September	October-December
<b>Year 1 2004</b>		●Cycle 1 PSA due	●Cycle 2 & 3 PSA due	●Cycle 4 & 5 PSA due

**5 Year Site Review Cycle**

Year	January-March	April-June	July-September	October-December
<b>Year 1 2004</b>		●Notify programs and schedule site reviews for Cycle 1	●Cycle 1 Site reviews in Aug/Sept ●Prepare reports of findings for Aug visits	●Oct-prepare report of findings for Sep visits ●CAP due for Cycle 1 ●Notify programs and schedule Cycle 2 site review
<b>Year 2 2005</b>	●State Team approves CAP for Cycle 1 – January and notify programs	●Conduct Cycle 2 site reviews ●Prepare reports of findings Cycle 2	●CAP due for Cycle 2 ●Cycle 1 programs demonstrate compliance – September	●State Team approves Cycle 2 CAP and notify programs

		●YR 1 submit 6 month CAP update-June		
<b>Year 3 2006</b>	<ul style="list-style-type: none"> <li>●Cycle 2 submit CAP 6 month update</li> <li>●Notify programs and schedule site reviews for Cycle 3</li> </ul>	<ul style="list-style-type: none"> <li>●Cycle 2 demonstrates full compliance</li> <li>●Conduct site reviews for Cycle 3</li> <li>●Prepare Cycle 3 reports</li> </ul>	<ul style="list-style-type: none"> <li>●Cycle 3 programs submit CAP</li> <li>●State Team approves Cycle 3 CAP and notifies programs</li> </ul>	<ul style="list-style-type: none"> <li>●Notify programs and schedule site reviews for Cycle 4</li> </ul>
<b>Year 4 2007</b>	<ul style="list-style-type: none"> <li>●Cycle 3 submit 6 month CAP updates</li> <li>●Cycle 4 site monitoring reviews</li> <li>● Prepare reports of findings for Cycle 4 reviews</li> </ul>	<ul style="list-style-type: none"> <li>●Cycle 3 demonstrate full compliance</li> <li>●Cycle 4 CAP due</li> <li>●State Team approves Cycle 4 CAP and notify programs</li> </ul>	<ul style="list-style-type: none"> <li>●Cycle 4 programs submit 6 month CAP updates</li> </ul>	<ul style="list-style-type: none"> <li>●Notify programs and schedule Cycle 5 site reviews</li> </ul>
<b>Year 5 2008</b>	<ul style="list-style-type: none"> <li>●Cycle 4 demonstrate full compliance</li> <li>●Cycle 5 site reviews</li> <li>●Prepare Cycle 5 reports</li> </ul>	<ul style="list-style-type: none"> <li>●Cycle 5 CAP due</li> <li>●State Team approves Cycle 5 CAP and notifies programs</li> <li>●Notify and schedule Cycle 1 site reviews</li> </ul>	<ul style="list-style-type: none"> <li>●Cycle 5 submit six month CAP update</li> <li>●Cycle 1 site visit</li> <li>●Prepare reports Cycle 1</li> </ul>	<ul style="list-style-type: none"> <li>●Cycle 5 demonstrates full compliance</li> <li>●Cycle 1 CAP due</li> </ul>