



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

MAY 20 2004

Honorable Karl Kurtz
Director
Department of Health and Welfare
450 West State Street, 5th Floor
Boise, Idaho 83720-0036

Dear Director Kurtz:

The purpose of this letter is to inform you of the results of the Office of Special Education Programs' (OSEP) recent verification visit to Idaho. As indicated in my letter to you of January 20, 2004, OSEP is conducting verification visits to a number of States as part of our Continuous Improvement and Focused Monitoring System (CIFMS) for ensuring compliance and improving performance under Parts B and C of the Individuals with Disabilities Education Act (IDEA). We conducted a visit to Idaho during the week of April 19, 2004.

The purpose of our verification reviews of States is to determine how they use their general supervision, State-reported data collection, and State-wide assessment systems to assess and improve State performance and to protect child and family rights. The purposes of the verification visits are to: (1) understand how the systems work at the State level; (2) determine how the State collects and uses data to make monitoring decisions; and (3) determine the extent to which the State's systems are designed to identify and correct noncompliance.

As part of the verification visit to the Idaho Department of Health and Welfare (DHW), the State's Part C Lead Agency, OSEP staff met with Mary Jones (the State's Part C Coordinator), and members of the DHW State and regional early intervention staff who are responsible for the State's general supervision activities (including monitoring, mediation, complaint resolution, and impartial due process hearings), and the collection and analysis of State-reported data. Prior to the visit, OSEP staff reviewed a number of documents, including the State's Part C Application, Self-Assessment, and Improvement Plan, submissions of data under Section 618 of the IDEA, and Idaho's Federal Fiscal Year (FFY) 2001 Annual Performance Report (APR) dated July 21, 2003.¹

¹ Documents reviewed as part of the verification process were not reviewed for legal sufficiency, but rather to inform OSEP's understanding of the State's systems.

OSEP also conducted a conference call on April 2, 2004, with members of Idaho's Part C Steering Committee, to solicit their perspectives on the strengths and weaknesses of the State's systems for general supervision and data collection and reporting.

The information that Ms. Jones and the Part C staff provided during the OSEP visit, together with all of the information that OSEP staff reviewed in preparation for the visit, greatly enhanced our understanding of the Idaho Early Intervention System and DHW's systems for general supervision and data collection and reporting.

General Supervision

In looking at the State's general supervision system, OSEP collected information regarding a number of elements, including whether the State: (1) has identified any barriers (e.g., limitations on authority, insufficient staff or other resources, etc.) that impede the State's ability to identify and correct noncompliance; (2) has systemic, data-based, and reasonable approaches to identifying and correcting noncompliance; (3) utilizes guidance, technical assistance, follow-up, and – if necessary – sanctions, to ensure timely correction of noncompliance; (4) has dispute resolution systems that ensure the timely resolution of complaints and due process hearings; and (5) has mechanisms in place to compile and integrate data across systems (e.g., 618 State-reported data, due process hearings, complaints, mediation, large-scale assessments, previous monitoring results, etc.) to identify systemic issues and problems.

Based on documents reviewed, prior to and during the visit, and discussions with the State, OSEP believes that DHW's systems for general supervision constitute a reasonable approach to the identification and correction of noncompliance; however, OSEP cannot, without also collecting data at the local level, determine whether they are fully effective in identifying and correcting noncompliance.

OSEP learned, through review of DHW's regional monitoring reports and interviews with DHW staff, that DHW uses a regional self-assessment, on-site review, and regional action plan process to monitor, on a cyclical basis, (at least once every three years) seven regional human service centers that provide early intervention services and service coordination, private and public early intervention providers, and seven health districts that conduct child find activities.² OSEP also learned, through interviews, that the State's Part C staff carry out general supervisory responsibilities through a variety of additional mechanisms, including: (1) performing data analyses of Individualized Family Service Plans (IFSPs) (contents of which are available in the State's electronic data base); (2) reviewing regional Quarterly Activity Reports; (3) sponsoring regular meetings with regional early intervention staff, program managers and supervisors to discuss performance and provide data to the regions about program performance standards; and (4) distributing and analyzing quarterly parent surveys sent to a stratified sample of

² DHW implements Part C through seven regional Human Service Centers staffed by DHW regional Part C personnel. The regions both provide early intervention services directly and also contract with early intervention providers.

parents who have children that either a) have recently entered early intervention services, b) have received early intervention services for at least six months, or c) have a pending or recent transition that occurs at age three.

The established three-year cycle for on-site monitoring and supervision of early intervention providers provides a more in-depth view of the Part C program status. The State monitoring team consists of a State Part C staff member, an ICC or regional interagency council member, a parent and a regional Part C staff peer reviewer from a different geographic area. The process begins with a regional self-assessment (DHW has conducted regional self-assessments since 1994) that identifies and documents the strengths and needs of the region's early intervention system. The regional team drafts a preliminary action plan based on the identified strengths and needs. The State team conducts on-site visits to homes, therapy sessions and childcare centers to interview and observe contractors, staff, community partner agencies, parents, etc. In addition, the team conducts focus groups with a variety of target audiences. Topics for interviews with staff and others include current issues, challenges, a review of past hearings, complaints, mediation issues, personnel standards/procedures, technical assistance needs, regional policies, procedures, forms, and documents. The staff also reviews a random sample of 10% of IFSPs in the region and regionally completed checklists to ensure accuracy and to verify compliance.

A unique feature of the on-site visits are the focused meetings with regional stakeholders and the community that State Part C staff and regional teams host to discuss the results of the self-assessment and the regional draft action plan.

DHW informed OSEP that strategies, timelines, responsible persons, and technical assistance needed to correct noncompliance identified during the self-assessments and on-site visits are included in the regional action plans, but typically, in the past, the regions established the timelines for correction, not the State. This matter is being addressed in current and future action plans and OSEP reviewed a State monitoring report that specified sanctions for noncompliance and a regional action plan that contained reasonable timelines, not exceeding one year, for regional correction of noncompliance identified by the State. Two regional staff representatives told OSEP that they have ongoing procedures in place for continuous correction of noncompliance and improvements. For example, a regional staff member stated that the region identified a resource allocation problem through the self-assessment process and were able to correct the issue within two months. The same region also instituted a process for periodic review of early intervention records by peer reviewers to improve compliance with record documentation. Another regional staff told OSEP that if regional staff found that service coordinators were not implementing all Part C responsibilities, then the regional specialists would assume that function temporarily.

DHW staff stated that it typically monitors correction of noncompliance through regional quarterly reports that are discussed during State-sponsored quarterly regional meetings and relevant data from the State's electronic database. The State staff also conducts additional site visits as needed. The regional staff is also responsible for ensuring that the action plan is implemented and providing technical assistance if needed. One regional

staff told OSEP that its region uses a regional supervisory accountability system to ensure correction of noncompliance and program improvements, including a full-time equivalent early intervention specialist, located in the regional office, who has the authority to ensure quality assurance and correction of issues. Not all early intervention specialists in the seven regional offices currently have this authority nor are all specialists assigned as full-time equivalents to Part C. Rather, the authority to ensure accountability is shared among several managers. The State staff reported that other regional supervisors are considering whether or not to adopt this type of supervisory structure.

DHW has established sanctions that may be imposed if a region fails to take the requisite corrective actions that include the authority to: withhold funds and, when needed, allocate funds to target noncompliance; take personnel actions including demotions and dismissal; suspend referrals to providers until noncompliance is corrected; and make verbal and written contact with supervisors regarding enforcement. OSEP learned from staff interviews that sanctions have been utilized by DHW such as the withholding of funds and personnel dismissals and demotions. The staff further stated that although DHW has the authority to impose sanctions, DHW is more likely to employ other strategies to ensure correction of noncompliance such as: quarterly distribution of regional data identifying noncompliance issues; quarterly management meetings wherein staff highlight issues and strategize solutions; and the public reporting of the strengths and weaknesses identified during the regional self-assessment process.

DHW remarked that it ties its training and technical assistance to issues identified as a result of the regional self-assessments, on-site visits, and regional action plans. For example, after identifying systemic noncompliance with 45-day timelines from referral to initial IFSP meeting, DHW conducted a joint training with regional staff and providers regarding the regulations related to referrals for early intervention services. DHW reported that they provided technical assistance on entering 45-day timeline data into the database in regions where significant noncompliance was identified. OSEP will respond in a separate letter to the State's FFY 2002 APR submission on this issue. Statewide training on early childhood transition in partnership with the Idaho Department of Education has also been conducted in response to findings of regional noncompliance or need for improvement. DHW also told OSEP that State and regional staff who perform other functions share the training and technical assistance functions. As needed, the State staff identifies and utilizes technical assistance providers and topical experts from outside the State. The current Federal Part C budget set-aside for training and technical assistance is approximately \$14,000.

DHW staff stated that they have an ongoing commitment to improving the general supervisory system and have applied for a grant to evaluate the system through a third party. As DHW examines its general supervisory system, OSEP suggests that DHW consider whether all of the regional offices have the staff resources and authority needed to ensure compliance with Part C and whether the State office has sufficient staff resources to provide needed ongoing training and technical assistance.

OSEP reviewed DHW's system for resolution of State complaints, due process hearings and mediation. To date there has been one mediation request, filed and withdrawn in 2001, and one due process hearing request, filed in 2000 and resolved prior to a hearing.³ Regional staff provide technical assistance to parents and early intervention providers to encourage resolution of any problems at the regional level. This information is reported to the State quarterly, or more often, if necessary. If parents have additional questions or concerns, regional staff encourage parents to contact DHW. The State Part C Coordinator is available to respond directly to parents' issues and maintains a log of issues brought to the State's attention and timelines for their resolution. This information is shared with the State's Interagency Coordinating Council.

During the verification visit, DHW and OSEP also discussed how DHW informs parents of the dispute resolution procedures under Part C of IDEA. The State staff told OSEP that the family service coordinator is the primary contact for informing parents of the dispute resolution procedures, and that DHW and regional specialists monitor children's records to ensure that the service coordinator provides information regarding dispute resolution procedures. This data is gathered weekly or monthly as part of file reviews conducted by regional specialists.

OSEP reviewed DHW's prior written notice documents, required pursuant to 34 CFR §303.403, to determine whether they include all of the required information. The Part C regulations at 34 CFR §303.403(b) require that: "The notice must be in sufficient detail to inform the parents about-... (3) All procedural safeguards that are available under §§303.401-303.460 of this part; and (4) The State complaint procedures under §§303.510-303.512, including a description of how to file a complaint and the timelines under those procedures." OSEP found that DHW's prior written notice form does not include all of the requisite information regarding State complaint procedures, required pursuant to 34 CFR §303.403(b).

The State must submit, within 90 days, to OSEP either (1) the Part C revised prior written notice that meets the content requirements of 34 CFR §303.403 and a written assurance that the State has informed providers of the revised notice and when the notice must be provided to parents or (2) a written assurance that the State has revised its notice to meet the content requirements and has informed providers of the revised notice and when the notice must be provided to parents.

Data Collection under Section 618 of the IDEA

In looking at the State's system for data collection and reporting, OSEP collected information regarding a number of elements, including whether the State: (1) provides clear guidance and ongoing training to local programs/public agencies regarding requirements and procedures for reporting data under section 618 of the IDEA; (2) implements procedures to determine whether the individuals who enter and report data at the local and/or regional level do so accurately and in a manner that is consistent with the State's procedures, OSEP guidance, and section 618; (3) implements procedures

³ The due process hearing request was related to an agency outside of the Part C system and was dismissed.

for identifying anomalies in data that are reported, and correcting any inaccuracies; and (4) has identified any barriers, (e.g., limitations on authority, sufficient staff or other resources, etc.) that impede the state's ability to accurately, reliably and validly collect and report data under section 618.

OSEP believes that DHW's system for collecting and reporting data from the regional early intervention programs is a reasonable approach to ensuring the accuracy of the data that DHW reports to OSEP under section 618.

In interviews with OSEP, DHW staff stated that DHW collects timely 618 data from the regional providers in order to meet OSEP's submission timelines and ensure reliability of the data submissions. Only one person in each of the seven regions has authority to enter and modify data entries while other appropriate staff have "read-only" access, ensuring a crosscheck for data entry errors. Data entry personnel are required to transmit new monthly 618 data by a certain date and time each month. The regional databases are networked and data are transmitted automatically to a central State server each day, thereby allowing the State data manager to review current, real-time data. The State data manager downloads data into reports weekly, monthly and quarterly and conducts reliability checks at that time. Because the system has the capacity to generate ad-hoc and canned reports, the data manager manipulates the database to crosscheck for data entry errors.

The State ensures validity of data by using a variety of additional mechanisms, such as: (1) transmitting instruction memorandums to data entry personnel, as needed; (2) providing ongoing, individualized technical assistance via telephone calls and e-mail; (3) clarifying data entry instructions and definitions during quarterly meetings with early intervention and management staff; (4) monitoring by checking a random sample of IFSPs and 618 data against database entries during on-site visits; and (5) disseminating regional data (for the State) at quarterly regional supervisory staff meetings, pointing out discrepancies [if any] among regional data.

DHW staff reported to OSEP that not only does the State office staff use the database as an ongoing supervisory tool, but that regional managers use the database to track Part C requirements such as referrals, evaluations, implementation of IFSPs, and service coordination activities. The regional staff told OSEP that these data are discussed during weekly early intervention staff meetings so that adjustments can be made immediately in staffing or resource allocation to address a particular issue. DHW staff told OSEP that they believe the State has an effective system for reporting accurate 618 data to meet the Federal requirements.

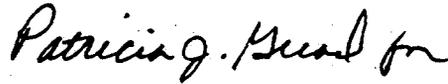
Conclusion

As noted in the general supervision section of this letter, DHW must submit, within 90 days, to OSEP either (1) the revised Part C prior written notice that meets the content requirements of 34 CFR §303.403 or (2) a written assurance that the State has revised its

notice to meet the content requirements and informed providers of the revised notice and when the notice must be provided to parents.

We appreciate the cooperation and assistance provided by your staff during our visit. We look forward to collaborating with Idaho as you continue to work to improve results for children with disabilities and their families.

Sincerely,

A handwritten signature in cursive script, appearing to read "Stephanie Smith Lee".

Stephanie Smith Lee
Director
Office of Special Education Programs

cc: Mary Jones,
Part C Coordinator