



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

JAN 16 2004

Honorable Vincent P. Meconi, Secretary  
Delaware Department of Health and Social Services  
1901 N Dupont Highway  
Main Building  
New Castle, DE 19720

Dear Secretary Meconi:

The purpose of this letter is to respond to the Delaware Department of Health and Social Service's (DHSS's) June 19, 2003 submission of its Federal Fiscal Year (FFY) 2001 Annual Performance Report (APR) for the Individuals with Disabilities Education Act (IDEA) Part C funds used during the grant period July 1, 2001 through September 30, 2002. The APR reflects actual accomplishments made by the State during the reporting period (as compared to established objectives). In addition, DHSS used the Part C APR due on July 1, 2003 to report on the State's progress in meeting the goals identified in the State's Part C Improvement Plan that is part of the Continuous Improvement and Focused Monitoring System (CIFMS). The APR for Part C of IDEA is designed to provide uniform reporting from States and result in high-quality information across States.

The APR is a significant data source utilized in the CIFMS implemented by the Office of Special Education Programs (OSEP), within the U.S. Department of Education. The APR falls within the third component of OSEP's four-part accountability strategy (i.e., supporting States in assessing their performance and compliance, and in planning, implementing, and evaluating improvement strategies) and consolidates the self-assessing and improvement planning functions of the CIFMS into one document. OSEP Memorandum 03-6 (regarding the submission of Part C APRs) directed States to address five cluster areas in their Part C APRs: General Supervision; Comprehensive Public Awareness and Child Find System; Family Centered Services; Early Intervention Services in Natural Environments; and Early Childhood Transition.

Because it is OSEP's intent to consolidate improvement planning and performance reporting activities, OSEP is commenting on both DHSS's Improvement Plan (IP) and Annual Performance Report (APR) in this letter. As noted in OSEP's October 10, 2002 letter to DHSS concerning DHSS' IP, the State identified ten areas of priority for improvement across all five cluster areas. None of the priority areas involved identified systemic noncompliance. In the letter, OSEP requested a summary of data collected and reports issued under the early childhood transition and general supervision priority areas identified by DHSS. The general supervision priority areas are: (1) early intervention services for children with disabilities are ensured because the State's systems for monitoring, and other mechanisms for ensuring compliance, and parent and child protections, are coordinated, and decision-making is based on the collection, analysis and utilization of data from all available sources; and (2) systemic

issues are identified and remediated through the analysis of findings from complaint investigations, due process hearings and information and data collected from all available sources.

OSEP notes that in its review of DHSS's APR and supplements, there is sufficient information to make data-based performance and compliance determinations in three cluster areas. In the general supervision and early childhood transition cluster areas, OSEP requests that DHSS submit certain data in the next APR to ensure adequate information is presented to make data-based performance and compliance determinations. As a result of OSEP's verification visit in September 2003, we are aware that the general supervision activities in the State generate significant information that could be included in a systematic way in the next APR to ensure that the goals statements, desired results, baseline data, improvement strategies and evidence of change are specific enough to document outcomes.

It is OSEP's expectation that, as part of its improvement planning efforts and in reporting on its APR, DHSS will collect, analyze, and report relevant data, and make data-based determinations regarding implementation of the following five cluster areas (as well as other areas identified by the State to ensure compliance and improved results for infants and toddlers with disabilities and their families).

### ***General Supervision***

In the APR (pp. 1-21), DHSS provides a descriptive summary of procedures and numerous activities that are components of the general supervision system. The information is relevant and beneficial to understanding the activities, but DHSS does not clearly explain the results or impact of the processes. DHSS explains that the monitoring activities include annually completing chart audits, collecting information from stakeholders through focus groups and surveys, using database generated reports to monitor programs, and documenting improvement through work with Leadership Teams. In order to demonstrate the impact of its monitoring activities, DHSS could include examples of what it learned from the activities. For example, DHSS could ask and answer the following questions. First, what systemic themes were identified in the chart audits? Second, what did the State do in response to the themes identified in the chart audits? Third, what technical assistance was provided? Fourth, how did the State's actions impact children and families in the programs? OSEP is confident the additional clarifying information is currently available and is recommending it be included in the next APR to provide a more complete picture of the early intervention system in Delaware.

In the next APR, OSEP recommends including specific data and information that would document:

- (1) early intervention services for infants and toddlers with disabilities are ensured through the State's systems for compliance that is based on the analysis and utilization of data collected from all sources;
- (2) monitoring instruments and procedures used by DHSS to identify IDEA compliance;

- (3) deficiencies identified through DHSS's general supervision system are corrected in a timely manner;
- (4) enforcement actions are used when necessary to address persistent deficiencies;
- (5) child find and appropriate and timely services are ensured through interagency agreements and assignment of fiscal responsibility; and,
- (6) appropriately trained public and private providers, administrators, and paraprofessionals provide services to infants and toddlers with disabilities and their families.

### ***Comprehensive Public Awareness and Child Find System***

The information provided in the APR demonstrates how DHSS is implementing its statewide comprehensive public awareness and child find system. DHSS provides data on the percentage of infants and toddlers determined eligible for Part C comparable to State and national data for the percentage of infants and toddlers with developmental delays, the number of eligible infants with disabilities under the age of one that are receiving Part C services, trends in referral sources over four years, information about distribution of public awareness materials, activities and efforts in child find, and information about community partners. In addition, DHSS provides information documenting efforts to ensure a continuous system of services by tracking long-term outcomes for infants and toddlers who receive early intervention services.

### ***Family Centered Services***

In the APR, DHSS provided information from family surveys, discussed State initiatives on family-centered services, described resources available to families, and explained general supervision activities that take place with Leadership Teams to ensure family centered services are emphasized. The supplemental information provides examples of family involvement in training, leadership roles, resources, forums, support partners (for families and siblings), and describes initiatives with other State partners to increase the capacity of families to enhance their child's development. The State is also providing training and technical assistance to enhance the system's capacity in supporting parents to reach the goal of increasing the capacity of families. The information provided in the APR demonstrates how DHSS is implementing, evaluating, and documenting family centered services.

### ***Early Intervention Services in Natural Environments***

DHSS provided the following information and evidence in the APR about early intervention services in the natural environments: (1) documentation that all families have access to a Service Coordinator who facilitates ongoing, timely early intervention services in natural environments; (2) monitoring results documenting that evaluation and assessment of child and family needs leads to the identification of all child needs, and the family needs related to enhancing the development of the child; (3) evidence that appropriate early intervention services in natural environments and informal supports are meeting the unique needs of eligible infants and toddlers and their families; (4) the percentage of children that are

receiving age-appropriate services primarily in home, community-based settings, and in programs designed for typically developing peers increased significantly in the last three years; (5) research results showing that children participating in the Part C program demonstrate improved and sustained functional abilities; and (6) the percentage of children and their families that are receiving all the services identified on their IFSPs. The information provided in the APR demonstrates how DHSS is implementing, evaluating, and documenting implementation of all requirements related to early intervention services in the natural environments. The data provided in this cluster area appears to demonstrate the capacity of its general supervision system.

### ***Early Childhood Transition***

In the October 10, 2002 letter regarding the IP, OSEP asked DHSS to submit a summary of data collected and reports issued on early childhood transition. In the APR, DHSS provided baseline data about the percentage of transition conferences held on time; participation by school district staff in conferences; family survey information about transition rights and procedures; activities taken to impact changes; and evidence of change data that demonstrated progress from the baseline data.

In data reviewed and in discussions with State staff, transition for children exiting Part C is a priority area for program improvement. The 2003 State Monitoring Reports document that transition is being introduced to the family early in the IFSP process, but a report summary states, "...there are many transition meetings not occurring at all and not occurring within the 90-day timeline." In the APR and as reported by State staff, recent improvement strategies to ensure all requirements for transition are implemented include: creating a functional IFSP transition page; working with Department of Education staff to develop a Questions & Answers document to clarify Part C and Part B responsibilities; providing technical assistance to service coordinators about transition requirements; and publicly presenting transition data. Child Development Watch (CDW) staff members report positive working relationships with the school systems and believe the revised transition process and strategies will result in changes in implementation within a year. From the data on file, it appears early childhood transition requirements may be an area of potential noncompliance. Although data improved over time, it appears transition conferences are not consistently held within 90 days of a child's third birthday (p. 54). The State is making efforts to improve early childhood transition, as documented in the APR (pp. 53-56). OSEP recognizes that the State's monitoring data and the summary statement were both based on a small number of children in transition and may not have been representative of all children transitioning out of Part C in Delaware.


Although early childhood transition was not identified by Delaware as an area of noncompliance in the Self-Assessment or Improvement Plan, current information documents a need for Delaware to ensure that all children who may be eligible for preschool services under Part B of the IDEA, with the approval of the family of the child, convene a conference among the lead agency, the family, and the local education agency at least 90 days, and at the discretion of the parties, up to 6 months, before the child is eligible for the preschool services,

to discuss any services that the child may receive (34 CFR § 303.148 (b)(2)(i)). OSEP believes that the improvement strategies documented in the Improvement Plan and discussed by CDW staff are designed to correct the potential noncompliance. OSEP cannot, however, before reviewing the documentation that DHSS will submit regarding the impact of the improvement strategies, determine whether the State is implementing all early childhood transition responsibilities. OSEP requests that DHSS submit documentation and evidence of change data that transition conferences are held at least 90 days before the child's 3<sup>rd</sup> birthday in its next APR to demonstrate full compliance with all requirements for early childhood transition.

Please provide the data requested throughout this letter in the next APR in addition to addressing the information requested in the next APR. OSEP can assist DHSS in the next APR submission to ensure the impact of DHSS's program is evident in the APR. Please contact Kelly Worthington at (202) 401-4022 for assistance.

OSEP recognizes that the APR and Improvement Plan represent only a portion of the work in your State and we look forward to collaborating with Delaware as you continue to improve results for infants and toddlers with disabilities and their families.

Sincerely,



Stephanie Smith Lee  
Director  
Office of Special Education Programs

cc: Rosanne Griff-Cabelli  
Part C Coordinator