



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

Honorable Sandy Garrett  
Superintendent of Public Instruction  
Oklahoma State Department of Education  
2500 North Lincoln Boulevard  
Oklahoma City, OK 73105-4599

AUG - 4 2004

Dear Superintendent Garrett:

The purpose of this letter is to respond to Oklahoma's March 31, 2004 submission of its Federal Fiscal Year (FFY) 2002 Annual Performance Report (APR) for the Individuals with Disabilities Education Act (IDEA) Part C funds used during the grant period July 1, 2002 through June 30, 2003. The APR reflects actual accomplishments made by the State during the reporting period, compared to established objectives. The APR for 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 Continuous Improvement and Focused Monitoring System (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's Memorandum regarding the submission of Part C APRs directed States to address five cluster areas: General Supervision; Comprehensive Public Awareness and Child Find System; Family Centered Services; Early Intervention Services in Natural Environments; and Early Childhood Transition.

### ***Background***

On February 4, 2004, OSEP responded to the Oklahoma State Department of Education's (OSDE's) FFY 2001 APR (submitted in 2003) and identified two areas of noncompliance. The first area of identified noncompliance was that initial Individualized Family Service Plan (IFSP) meetings were not held within 45 days after OSDE received a referral. OSDE was to submit to OSEP in its FFY 2002 APR the strategies, timelines, and evidence of change data to ensure correction of the noncompliance within a reasonable period of time, not to exceed one year from OSEP's acceptance of OSDE's strategies to address this areas of noncompliance. In response, OSDE submitted the FFY 2002 APR with data and information regarding correction. OSEP's response is documented under the Early Intervention Services in Natural Environments (EIS-NE) cluster below.

The second area of noncompliance identified in OSEP's February 4, 2004 letter was that periodic IFSP reviews were not consistently documented. OSEP asked OSDE to provide

a plan with specific strategies, evidence of change, and timelines for correction (within a reasonable period of time, not to exceed one year from OSEP's acceptance of the plan) that the State will implement to ensure all eligible infants and toddlers have periodic IFSP reviews at least every six months, consistent with 34 CFR §303.342(b). In addition, OSEP requested OSDE to provide data in the FFY 2002 APR to reflect whether the periodic reviews that were occurring included all elements described in 34 CFR §303.342(b), including: the degree to which progress toward achieving the outcomes was being made; whether modification or revision of the outcomes or services was necessary; and whether the reviews were carried out by a meeting or by another means that was acceptable to the parents and other participants. In response, OSDE submitted its FFY 2002 APR with data and information regarding correction. OSEP's response is documented under the EIS-NE cluster below.

In its February 4, 2004 letter, OSEP also requested the following: (1) updates on the implementation of revised monitoring procedures (Child Find and Public Awareness cluster); (2) data on the number or percentage of families participating in assessments, identified as needing services, receiving services, and satisfaction with services received (Family Centered Services cluster); (3) responsive data or the State's plan on how it would collect child outcome data on improved or sustained functional abilities (EIS-NE cluster); and (4) monitoring data gathered from local self-assessments to support conclusions about transition, including 90-day conferences, notification of local education agency (LEA), and transition planning requirements (if no State-wide analysis was available, sample data could be submitted). Comments on the information submitted are in the appropriate cluster areas below.

The State's APR should reflect the collection, analysis, and reporting of relevant data, and document data-based determinations regarding performance and compliance in each of the cluster areas (as well as any other areas identified by the State to ensure improvement). OSEP's comments regarding the APR are set forth below by cluster area.

### ***General Supervision***

The State provided data and information on pages one through 21 of the APR demonstrating that its policies, procedures and practices implemented during the year resulted in the State identifying noncompliance, ensuring correction of noncompliance, and encouraging positive program performance.

On page 5 of the FFY 2002 APR, OSDE reported that the monitoring system was revised to function in a parallel manner with the OSEP monitoring and State improvement model and will be fully implemented during 2004. Development and pilot testing occurred between 2000 and 2003. During the reporting period for the FFY 2002 APR, Local Early Intervention Units completed an annual self-assessment and developed Corrective Action Plans to address identified areas of noncompliance. OSDE staff monitored the Corrective Action Plans for implementation and for correction of noncompliance.

On pages 19 and 20 of the APR, OSDE explained that the revised general supervision procedures to be implemented with all Early Intervention Units in 2004 include a three-level process. All Local Early Intervention Units will have an on-site review (level 3) at least every three years (page 19). The level of the review process will be determined by program performance and results of the preceding year's review (page 19). On page 39, OSDE described the reports involved in the new monitoring process: (1) a Quality Assurance report that will be sent 15 working days after an on-site monitoring visit (including findings, requirements, and timelines for corrective action plans); (2) Corrective Action Plans to be submitted 30 calendar days after receipt of the Quality Assurance report; and (3) Progress Reports to be submitted to OSDE once a month for three months, then once every three months for a year. Technical assistance, follow-up, and tracking will be maintained by the Lead Agency to ensure correction of identified noncompliance within required timeframes. OSDE reported that tracking results will be analyzed on a monthly basis.

For the FFY 2002 APR, OSDE used monitoring data based primarily on local self-assessment results. As stated on page five of the FFY 2002 APR, the local self-assessment involves the following: (1) single-record review worksheets; (2) team member surveys; (3) local public awareness/child find plans; (4) team development plans (to address performance issues); (5) Part C database reports; (6) caregiver concern worksheets; and (7) corrective action plans (to address compliance issues).

OSDE described its former and revised general supervision processes and procedures, and provided some data to demonstrate the Lead Agency's ability to identify and correct noncompliance. On page six of the FFY 2002 APR, OSDE identified interagency partners in the general supervision processes and procedures: Oklahoma State Department of Health; Department of Human Services; State Healthcare Authority; the Interagency Coordinating Council (ICC); and the University of Oklahoma Health Sciences Center. OSDE stated that the evaluation subcommittee of the ICC facilitated supplemental monitoring procedures, reviewed research, completed a Logic Model for early intervention, facilitated cooperative data sharing agreements among agencies, and collected data pertinent to the early intervention program. OSDE provided numerous examples throughout the APR of collaborative relationships with other agencies.

On page 8, 10, and 13 of the FFY 2002 APR, OSDE described "mechanisms for ensuring compliance," that included applying enforcement actions, positive recognition and incentives, technical assistance, and training. Technical assistance efforts were linked to results from monitoring procedures, family complaints/concerns, and data reports. Examples of topical areas where technical assistance was included: child find, natural environments, primary service provider model, and early childhood transition.

On pages 16 through 18 of the APR, OSDE provided data and described personnel procedures to ensure staffing was sufficient to provide identified early intervention services. Data were presented to show the number and percent of vacant positions and available positions. Despite vacancies, OSDE reported that SoonerStart<sup>1</sup> did not have a

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<sup>1</sup> SoonerStart is the State-wide name of the Early Intervention program in Oklahoma.

waiting list for early intervention services. OSDE presented strategies used to ensure staffing sufficiency: collaborating with professional training and preparation programs to identify skills and knowledge needs of newly hired graduates; sharing personnel resources across regions; market analysis to ensure competitive salaries; establishing skill-based pay differential; and modifying job descriptions and hiring procedures.

OSDE reported on pages two through four of the APR that one formal complaint, no mediations, and no due process hearings were requested during the reporting period of February 6, 2002 to June 18, 2003. Although not required, OSDE also tracked the number and topic of informal complaints and presented that data on pages three and four of the APR.

OSDE described its methods to ensure all families have access to procedural safeguards protections on pages four through 11 and 14 through 16 of the APR. Procedural safeguard information was available in English, Spanish, and Vietnamese; the OSDE website had a Special Education Services link to provide information about rights and procedural safeguards; distribution and explanation of rights and procedural safeguards were tracked by OSDE; monitoring instruments and procedures tracked family concerns; and OSDE was responsive to identified concerns. OSDE created a Family Service Coordinator position to enhance family centered services, including educating families and professionals about rights and procedural safeguards. The Coordinator participated as a member of the State-level monitoring team, reviewed complaints or requests for mediation, and worked with families and local teams to address concerns before formal complaints or requests for mediation were filed. Numerous trainings for mentors were completed and parent groups were developed throughout the State. Family survey data presented on page seven demonstrated that over 90% of families reported that there was a comfortable way to work out disagreements with SoonerStart; they knew they could accept or decline services offered and change their minds at any time; and information and reports were fully explained in understandable terms.

OSDE data collection strategies were discussed on pages 19 through 21 of the APR. OSDE stated that the revisions to the monitoring processes and procedures were designed to create a data-driven, quantitative, performance-based Quality Assurance Process to increase accountability and documentation of compliance and best practice procedures. Record reviews included a stratified, random sample of child files. Desk reviews (a part of monitoring procedures) included a review of: Quality Assurance Reports and Corrective Action Plans; Public Awareness activity plans and reports; Medicaid reports; database reports; surveys; and other documentation. A State-wide data system was maintained at local sites, supervised by State staff, and data were exported monthly to OSDE, where reports were generated. The reports were used in annual desk reviews and to track progress on Corrective Action Plans.

The information provided by OSDE indicated that the State has mechanisms or systems in place to meet its general supervision responsibilities through monitoring processes and procedures to identify and correct noncompliance, provide technical assistance, ensure staff to meet identified early intervention service needs, report accurate and timely data,

and has policies and procedures in place to ensure complaints are resolved in a timely manner. The State should continue to report in the next APR on its strategies to ensure compliance and performance in this cluster area.

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

OSDE described its child find and public awareness system on pages 22 through 27 of the APR. OSDE did not identify systemic noncompliance in this cluster. OSDE provided the following data and information in the APR: 2.03% of its birth to three population were receiving early intervention services on December 1, 2002; the percentage of infants and toddlers receiving services increased annually for the last three years; public awareness plans and activities were reviewed by OSDE; efforts to provide outreach to minority populations resulted in an increase in infants and toddlers served; referrals from the Birth Defects Registry had increased significantly since 1999; outreach was targeted to neonatal intensive care units across the State; racial/ethnic information was provided; OSDE and local ICC's monitored child find and public awareness activities of local early intervention units; the Quality Assurance Process was revised to include program indicators and benchmarks/standards of compliance for public awareness and child find plans; analysis of public awareness plans resulted in technical assistance to improve the identification of all eligible infants and toddlers; and family surveys indicated that families received information in a timely manner. In the FFY 2001 APR response letter, OSEP asked OSDE to provide information on the implementation of its revised monitoring procedures. OSDE provided the requested updates in the FFY 2002 APR. Examples of revisions to the monitoring procedures included: plans to generate a report that compared the number of infants and toddlers referred with the number identified as eligible for Part C services (by December 2004); any new child find documents were to be available in English, Spanish, and Vietnamese (by June 2004); and the referral process from the Birth Defects Registry was going to be revised (by July 2003).

OSEP concluded that the State's report of its public awareness and child find activities were implemented across interagency partners and appeared to result in increased identification of eligible infants and toddlers. Through the data provided and the performance described, it appears OSDE is implementing a comprehensive, coordinated child find system that results in the identification of eligible infants and toddlers. The State should continue to report in the next APR on its strategies to ensure compliance and performance in this cluster area.

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

OSDE did not identify systemic noncompliance in this cluster in the FFY 2002 APR. In the FFY 2001 APR response letter, dated February 4, 2004, OSEP asked OSDE to provide data on the number or percentage of families participating in assessments, identified as needing services, receiving services, and satisfaction with services received. Family Centered Services were described on pages 28 through 33 of the FFY 2002 APR and included the following data and information: all families participated in the evaluation, assessment, and the development/review of the IFSP; participants in family

training increased significantly from 2001 to 2003; family survey data concluded that families believed the services and information from SoonerStart met the identified family outcomes, SoonerStart provided practical suggestions to be used as part of the family's daily routines, and staff assisted in getting information and community services the families needed; pre-service and in-service sessions included Family Centered Care training; the Family Service Coordinator provided assistance across multiple topics and through individuals and groups; the revised Quality Assurance Process identified program indicators and benchmarks/standards of compliance to determine if family concerns, needs, and child strengths are addressed in the IFSP; SoonerStart partner agencies met monthly to analyze local self-assessment monitoring data, and recommendations resulted in changes to the IFSP form to better address family needs; family mentoring programs had more resources; numerous leadership meetings and team building trainings addressed family centered services and compliance, and provided technical assistance; and the State ICC was interactive and responsive to all components of the general supervision processes and procedures. Future activities were described to enhance family centered services (i.e. resource coordinator core training specific to family supports and families' increased capacity to enhance their child's development).

The information the State provided in its FFY 2002 APR indicates that OSDE has processes and procedures in place for implementing, evaluating and documenting family centered services. The State should continue to report in the next APR on its strategies to ensure compliance and performance in this cluster area.

#### ***Early Intervention Services in the Natural Environment (EIS-NE)***

OSEP's February 2004 response to OSDE's FFY 2001 APR identified two areas of noncompliance in this cluster area. First, initial IFSP meetings were not held within 45 days after OSDE received a referral, see 34 CFR §§303.321(e), 303.322(e), and 303.342(a). The second area of noncompliance identified in the FFY 2001 APR response letter was that periodic IFSP reviews were not consistently documented, as required by 34 CFR §303.342(b).

Regarding the 45-day timeline requirement, OSEP's February 4, 2004 letter requested OSDE submit, in the FFY 2002 APR, the strategies, timelines, and evidence of change data to ensure correction of the noncompliance within a reasonable period of time, not to exceed one year from OSEP's acceptance of OSDE's strategies. On pages 34 through 39 of the FFY 2002 APR, the State included the following data and analysis: of 94 randomly selected files in five locations, 89% of IFSPs were conducted within the 45-day timeline, up from 61% in the FFY 2001 APR (page 35); 94% of respondents to a web-based survey indicated that referring infants and toddlers to SoonerStart and the process for obtaining evaluations were smooth and effective processes (page 35); data from telephone surveys to families indicated almost 90% knew their resource coordinator (page 35); resource coordinators were assigned on the day of referral (page 37); coaching and mentoring models were used to train regional and resource coordinators, with increased emphasis on service coordination responsibilities (page 37); the State ICC created an IFSP task group and monitoring task group to revise the IFSP form and the

local self-assessment form to include indicators to better address family needs (page 38); a pilot project was developed and implemented to improve compliance with the 45-day requirement (page 38); continuous efforts were underway to identify additional barriers to meeting the timeline (page 38); and the new Quality Assurance Process would include a set of program standards designed to result in a more defined, accountable, and documented system of compliance and best practice, starting in October 2003 and fully implemented in 2004 (pages 37 and 39).

This letter serves as acceptance by OSEP of the strategies and timelines proposed by OSDE to ensure correction of the noncompliance, with the exception of how the data must be reported (as noted below, data must reflect actual, not average, number of days from referral to the initial IFSP meeting), to ensure documentation of the correction of the noncompliance within a reasonable period of time not to exceed one year from the date of this letter. The State must submit two progress reports on the status of its correction of this area of noncompliance. The first report is a progress report and must be provided in the next APR (for FFY 2003 due on March 31, 2005). In this progress report, the State must include data and analysis demonstrating progress toward compliance. A final progress report is due to OSEP within 30 days from one year from the date of this letter, and must include data and analysis demonstrating full compliance with Part C's 45-day timeline requirement as soon as feasible but no later than one year from the date of this letter.

The State's current method of computing averages regarding the 45-day timeline, however, does not clearly demonstrate correction of the noncompliance. The State acknowledged that the sample of files showed a range of 67% to 100% compliance across the five locations, with the average at 89% (page 35 of the APR), demonstrating that the monitoring procedures can identify noncompliance regarding the 45-day timeline. Although OSDE did not appear to have systemic noncompliance in this area, an *average* of less than 45-days from referral to holding an initial IFSP meeting does not demonstrate compliance, if the timeline for some children exceeds that timeline. OSEP recommends that the State may wish to collect information through its general supervision procedures that document reasons beyond the control of the lead agency for not meeting the 45-day timeline (i.e. hospitalization of the child; family rescheduled). For example, OSDE could submit the actual number or percentage who met the timeline requirements and the number or percentage for whom child and/or family circumstances prevented compliance with the 45-day timeline and the actual days for these families for the initial IFSP meeting to be held.

The second area of noncompliance identified in the FFY 2001 APR response letter was that periodic IFSP reviews were not consistently documented, consistent with 34 CFR §303.342(b). OSEP asked OSDE to provide a plan with specific strategies, evidence of change, and timelines for correction, within a reasonable period of time, not to exceed one year from OSEP's acceptance of the plan, to ensure all eligible infants and toddlers have periodic IFSP reviews at least every six months. In addition, OSEP requested OSDE to provide data in the FFY 2002 APR to reflect whether the periodic reviews that were occurring included all elements described in 34 CFR §303.342(b), including: the

degree to which progress toward achieving the outcomes was being made, and whether modification or revision of the outcomes or services were necessary. The review could be carried out by a meeting or by another means that is acceptable to the parents and other participants.

In response to the periodic review data requests, OSDE submitted the following data and information: each family participated in the evaluation, assessment, and the development/review of the IFSP (page 29); in 73% of the 77 records reviewed, there was evidence that the IFSP was reviewed at least every six months by a family member, resource coordinator, and one service provider, down from 77% in FFY 2001 (page 36); and general information that the Quality Assurance system was being revised to better reflect compliance and performance. OSDE did not submit specific strategies, evidence of change, and timelines for correction of the noncompliance to ensure all eligible infants and toddlers have periodic IFSP reviews at least every six months, consistent with 34 CFR § 303.342(b). OSDE also failed to provide documentation that the periodic review included all elements described in 34 CFR §303.342(b). OSDE must submit a plan to OSEP, within 60 days of the date of this letter, including strategies, proposed evidence of change, targets, and timelines, to ensure correction of the noncompliance within a reasonable period of time, not to exceed one year from the date OSEP accepts the plan.

In the February 4, 2004 letter, OSEP also requested that OSDE provide responsive data or the State's plan on how it would collect outcome data about improved or sustained functional abilities for infants and toddlers participating in the early intervention program. In response, OSDE submitted the following data and information on pages 48 through 50 of the FFY 2002 APR: in 93% of 100 randomly selected child records, a description of the progress towards the accomplishment of the IFSP outcomes was identified; in 92% of 98 randomly selected records, the IFSP contained information about progress toward achieving the IFSP outcomes; OSDE concluded that sample data from the Comprehensive Quality Assurance report and family surveys indicated the program identifies improved and sustained functional abilities; the evaluation committee of the State ICC would continue a longitudinal study of child outcomes through the use of abstracted records and database information; the ICC was developing a logic model to guide evidence-based services and evaluate program efficacy; and the Battelle Developmental Inventory would continue to be used for infants and toddlers (over the age of six months) at the initial, annual, and exit evaluations, as appropriate. Although the data and information were relevant to the cluster area, they did not demonstrate that infants and toddlers participating in the SoonerStart program demonstrated sustained or improved functional abilities. OSEP requests that OSDE continue to provide, in the FFY 2003 APR, data to demonstrate program outcomes, such as a summary of the rate of achievement of infants and toddlers by using the aggregated results from the Battelle.

No other concerns were identified by OSEP from its review of the State's FFY 2002 APR. Other data and information submitted by OSDE in the FFY 2002 APR on pages 34 through 50 included: personnel procedures were revised to be more responsive to personnel needs (such as timely posting of vacancies); numerous examples of collaboration with partner agencies were described (training and technical assistance,



personnel preparation, collection and analysis of data); pilot projects were implemented to address program issues; personnel in the early intervention community met frequently and made data-based recommendations and program changes to support early intervention services; staff members attended trainings on current topics (such as identifying community resources); OSDE concluded that all children received multi-disciplinary evaluations in natural environments; 94% of appointments were provided for services identified on IFSPs; child records contained information related to family routines, concerns, priorities, resources, and desired outcomes; 93% of child records reflected that the IFSP was developed by the parent/caregiver, resource coordinator, and at least one service provider; 93% of records reviewed contained a statement of specific early intervention services; enforcement actions were described to ensure correction of noncompliance; revisions to the Quality Assurance procedures would include tracking of cancellations for service appointments; and 100% of records reviewed identified the natural environment or provided a justification for why services could not be provided in the natural environment.

The data presented by OSDE in this cluster demonstrated that families had access to a service coordinator; no indicators suggest noncompliance in the facilitation of ongoing, timely early intervention services in the natural environment; the evaluation and assessment of child and family needs appeared to lead to the identification of all child and family needs; indicators suggested all services identified on the IFSP are provided, although more data will be collected to document this area; children received services in natural environments or justifications were found on IFSPs; and OSDE collects child outcome data. The State should continue to report in the next APR on its strategies to ensure compliance and performance in this cluster area.

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

OSDE did not identify systemic noncompliance in the FFY 2002 APR in this cluster. In its February 4, 2004 letter, OSEP requested the following transition information: monitoring data gathered from local self-assessments to support conclusions about the 90-day conference, notification of the LEA, and transition planning requirements (if no State-wide analysis was available, sample data could be submitted). In response, OSDE provided the following data and information about transition on pages 51 through 57 of the APR: in 97% of the 74 records reviewed for transition, a transition plan (not conference) was initiated six to 12 months prior to the child's third birthday; 82% of 55 records reviewed indicated the local education agency (LEA) was identified at least two weeks prior to a transition planning conference and at least 90 days and not more than six months prior to the child's third birthday; and 54% of records reviewed indicated that the LEA participated in the transition planning conferences and the meetings were held at least 90 days before the child's third birthday. At the time the data was collected, OSDE reported that no further data were available to determine the reasons for the transition planning conference occurring less than 90 days before the child's birthday. The Quality Assurance procedures were revised and OSDE indicated it will have data by the next APR to clarify if the transition meetings occurred but were late, if meetings were late because referrals to the early intervention program occurred after the child was 32

months of age, if meetings were not held for children who were not Part B eligible (but their files were included in the review), if meetings occurred but not all participants attended, or if meetings did not occur before the child's third birthday.

Additional transition information presented by OSDE included: families who exited the Part C program were surveyed for their reasons for exiting (most are due to the child aging out); numerous training opportunities were available to families and early intervention personnel about transition planning and implementation; efforts were documented to link Part B and Part C transition requirements; and data available after the revised Quality Assurance process will be State-wide and will more clearly document implementation of transition specific performance and compliance requirements.

OSDE provided data and information requested by OSEP to clarify that transition planning was occurring and LEAs were notified in a timely manner of the transition conferences. In the FFY 2003 APR due on March 31, 2005, OSDE must provide data to demonstrate that all transition conferences for children eligible for Part B occur at least 90 days but not more than six months prior to the child's third birthday. If the data indicate noncompliance, OSDE must also submit, with the next APR, targets, timelines, and improvement strategies to ensure that all eligible children, with parent consent, have transition conferences conducted at least 90 days prior to the child's third birthday.

### ***Conclusion***

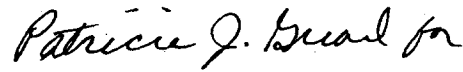
As noted above, within 60 days from the date of this letter, OSDE must submit to OSEP the improvement strategies to ensure that all children have periodic IFSP reviews that include all requirements, as documented in 34 CFR § 303.342(b). If OSDE has documentation to demonstrate it currently collects this information and systemic compliance is evident, the documentation may be submitted, in lieu of the improvement strategies. If OSDE submits improvement strategies, it must include in the FFY 2003 APR, data and analysis demonstrating progress toward compliance. In addition (if improvement strategies are submitted), the State must provide a report to OSEP, with data and analysis demonstrating compliance, as soon as possible, but no later than 30 days following the end of the one-year timeline when OSEP accepts the improvement strategies.

Also in the FFY 2003 APR, please submit: (1) documentation to demonstrate progress toward compliance with the 45-day timeline requirement by revising the method of reporting data; (2) an updated progress report on the periodic IFSP review requirements; (3) data, or if the data indicate noncompliance, a plan to demonstrate that all transition conferences for children eligible for Part B occur at least 90 days but not more than six months prior to the child's third birthday; and (4) early childhood outcome data that demonstrate what percentage of children demonstrate improvement in functional abilities in the Part C developmental areas.

In addition, OSDE must provide to OSEP within 30 days from one year from the date of this letter, a final progress report with data and analysis demonstrating full compliance with Part C's 45-day timeline requirement.

OSEP recognizes that the APR and its related activities represent only a portion of the work in your State and we look forward to collaborating with you as you continue to improve results for infants and toddlers with disabilities and their families. If you have any questions, please contact Kelly Worthington, at (202) 245-7581 to discuss any issues regarding the APR.

Sincerely,



Stephanie Smith Lee  
Director  
Office of Special Education Programs

cc: Mark Sharp  
Part C Coordinator