



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

Honorable Carol Olson  
Executive Director  
Department of Human Services  
State Capitol  
600 East Boulevard Avenue  
Bismarck, North Dakota 58505-0440

JAN 19 2005

Dear Ms. Olson:

The purpose of this letter is to respond to North Dakota's March 31, 2004 submission of its Federal Fiscal Years (FFYs) 2000, 2001, and 2002 Annual Performance Reports (APRs) for the Individuals with Disabilities Education Act (IDEA) Part C funds used during the grant period July 1, 2000 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. The State's APR should include relevant data, and document the State's 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).

### ***Background***

The OSEP Monitoring Report of September 14, 1999 ("Monitoring Report") identified the following eleven areas of noncompliance that North Dakota had to address in an Improvement Plan (IP):

- 1) No comprehensive and effective monitoring to ensure consistent implementation of Part C requirements;
- 2) No coordinated State-wide child find system;
- 3) Procedures are not effective to ensure referral of children by primary referral sources;
- 4) All Part C services needed by each child and his or her family are not included on individualized family service plans (IFSPs) and are not provided;

- 5) The State does not make individual determinations about the frequency and intensity of services needed by the child and the family;
- 6) Services are not provided in natural environments to the maximum extent appropriate;
- 7) Services that are needed by the child, but not required by Part C, such as medical services, are not included on the IFSPs;
- 8) Services were not always provided at no cost to the family;
- 9) Failure to appoint a single service coordinator;
- 10) Failure to complete a timely multidisciplinary evaluation (MDE) in all developmental areas for all referred infants and toddlers; and
- 11) Transition plans missing from content of IFSPs and most transition meetings were not held at least 90 days before the child's third birthday for children potentially eligible under Part B.

In response to the Monitoring Report, North Dakota submitted an initial IP to OSEP on November 1, 2001 and a revised IP on November 4, 2002. OSEP responded to the revised IP in a May 27, 2003 letter, and asked North Dakota to provide to OSEP, by July 30, 2003, documentation of the steps it took to come into compliance. If noncompliance had not been corrected, OSEP directed North Dakota to submit a revised IP to OSEP by July 30, 2003. North Dakota was also required to submit its FFY 2001 APR in July 2003. OSEP did not receive the requested information from North Dakota and sent reminder emails to the North Dakota Part C coordinator in February, June, and December 2003, and February and March 2004. North Dakota combined its FFY 2001 and FFY 2002 APRs into one document, and submitted it to OSEP on March 31, 2004. The APR covers the period July 1, 2000 through June 30, 2003 and contains the requested information from the May 2003 OSEP letter. As noted in further detail below, the information provided on the FFY 2001 and FFY 2002 APR submissions indicates that the State has addressed five of the eleven findings from OSEP's Monitoring Report. OSEP's comments regarding the FFY 2001 and FFY 2002 APRs are listed by cluster area.

### ***General Supervision***

OSEP's Monitoring Report identified one area of noncompliance in this cluster area: the North Dakota Department of Human Services (NDDHS) did not monitor for compliance with Part C. OSEP found that NDDHS utilized only the State's licensure and the Accreditation Council processes for monitoring, and neither process included monitoring for all Part C requirements. In addition, because the State was not monitoring for compliance, it could not take corrective actions.

The FFYs 2001 and 2002 APRs included data and information that indicated improvement in the areas of monitoring for, and correction of, Part C noncompliance. NDDHS reported that it used the following methods to monitor for Part C compliance at each of the eight human service centers:

- 1) NDDHS established eight Regional Interagency Coordinating Committees (RICCs), and charged them with the responsibility of developing and monitoring Quality Improvement Plans (QIPs). The QIPs must address 43 specific items, including Part C compliance in the areas of child find and public awareness, child outcomes, parent satisfaction, training for early intervention personnel, evaluation and IFSP timelines, evaluation content,

natural environments, service provision, family involvement, and transition (APR, pages 3-5). However, it is unclear from the APR whether each RICC has developed a QIP.

- 2) NDDHS conducted a Human Service Center License Review of each of the eight regional Human Service Centers in the fall of 2002 (APR, pages 5 - 7). The APR states that this review covered the Human Service Centers' "implementation of their written procedures regarding the following early intervention standards: (1) review of parental rights; (2) assignment of a service coordinator/Developmental Disabilities (DD) Case Manager; and (3) a QIP." The review team reviewed a sample of 36 case files from each region, for a total of 288 case files. They were reviewed for eligibility determination timelines, parental notification of eligibility determinations, IFSP content, child and family outcomes, transition, and documentation of required follow-up and monitoring by the DD Case Manager using the Quality Enhance Review Process (QER). The APR provided 2002 monitoring data from the licensure review process, and this data demonstrated that the State has made progress. For example, of the 288 files reviewed, more than 98% completed eligibility re-determinations by age 2 years, 9 months and completed initial eligibility by the required timelines. Licensure monitoring data indicated that two Human Service Centers were required to correct noncompliance; one of the centers corrected noncompliance within 90 days and the other center developed a plan of correction that was developed and implemented (APR, page 7). However, the APR does not include specific monitoring data from QERs or QIPs.

The State reported the following regarding dispute resolution, personnel, and data systems: Attachment 1 of the APR indicated that there were no complaints, requests for mediation, or due process hearing requests filed between July 1, 2000 and June 30, 2003; and the State had targets and activities to address complaint, mediation, and due process concerns should they arise (APR, pages 8-11). To ensure a sufficient number of personnel to administer the Part C program, NDDHS entered into contracts to support the responsibilities of the State Part C coordinator. In addition, NDDHS reported that it established caseload ratios for service coordination and service providers, but acknowledged a challenge in maintaining the established ratios, especially in consideration of the pending implementation of the Child Abuse Prevention and Treatment Act (CAPTA) requirements. NDDHS indicated that its database utilized edits and alerts to support the timeliness of data entry and reduction of data errors, although NDDHS acknowledged that data accuracy could be improved and data elements refined. NDDHS followed up with the Human Service Centers to review the information and data learned during the licensing review.

OSEP accepts the strategies in the State's APR and imposes the following specific timeline and reporting requirements. The State must ensure that it corrects this area of identified noncompliance – failure to monitor for compliance with Part C – within a reasonable period of time not to exceed one year from the date of this letter, and provide OSEP a final report containing evidence of such correction no later than 30 days following the end of that one-year period. The State must submit with the next APR, a progress report including evidence of change and data demonstrating substantial improvement, and 30 days following the end of that one-year period, a final report that includes data demonstrating full compliance.

In the next APR, NDDHS must provide: (1) the status of monitoring findings for each RICC and each RICC's QIP. The APR should include the number of times that each RICC has met,

whether the RICC developed a QIP and the status of the QIP; (2) data (specifically QER and QIP monitoring data from all eight human service centers) demonstrating progress towards compliance with 34 CFR §303.501(b)(4); (3) a description of the Part C noncompliance identified in the licensure process, and the manner in which the State verified that the noncompliance was corrected; and (4) the data the NDDHS receives in response to the requests it makes to the regional DD Case Management Units for “data that can be used to measure and manage the early intervention program’s results and standards . . .” as discussed on page 7 of the APR.

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

OSEP’s Monitoring Report identified two areas of noncompliance in this cluster area: (1) lack of a coordinated child find system (34 CFR §303.321(c)); and (2) lack of effective referral procedures for primary referral sources (34 CFR §303.321(d)). OSEP found no evidence of coordination of child find activities with other agencies that had similar child find responsibilities; NDDHS’ policies and procedures were not effective to ensure that all eligible children were identified; and no evidence that primary referral sources made referrals in a timely manner.

The APR included data and information that indicated improvement in the area of coordinated child find and effective referral procedures. The State reported that it had implemented the Right Track program, which is available to all North Dakota families free of charge who have children under the age of 3 who are not currently receiving services through other community agencies. Right Track screens infants and toddlers for developmental delays in their homes and accepts all referrals. If further evaluation is needed, Right Track will refer back to the local Human Service Center. In addition, NDDHS and the North Dakota Department of Health jointly implemented the Birth Review Project, which contacted 81% of families following the birth of their child (APR, page 20). Furthermore, North Dakota distributed Developmental Wheels – literature containing nutritional, immunization, and other information, including the Human Service contact information – statewide, through hospitals, clinics, and other social service programs and community settings (APR, page 21). In the area of coordination, NDDHS and the North Dakota Department of Health meet quarterly to review the Birth Review program and share information regarding programs affecting young children. In addition, the RICCs monitor local agreements regarding coordination and referrals (APR, page 19). The RICCs also review data regarding the percentage of children receiving services. Finally, the APR reported that the State conducted training on eligibility and now reviews data regarding eligibility determinations throughout the State.

Child count data reported by the State under Part C, Section 618 of IDEA, from [www.ideadata.org](http://www.ideadata.org) indicated that the State’s December 1, 2002 child count was 1.88% compared to the national average of 2.24% for that same time period. By December 1, 2003, North Dakota reported a child count of 2.13%. It appears that the State’s efforts to locate, screen, and refer infants and toddlers in need of services has improved. The State reported implementation of all of its child find and public awareness strategies in its IP. OSEP appreciates the State’s efforts to correct noncompliance in this area.

The APR contains the following target: "Two percent of the children of North Dakota who are less than 3 years of age will be identified and receive early intervention services." (APR, page 19). While it is not inconsistent with Part C to include a numerical goal regarding the percentages of infants and toddlers with disabilities determined eligible for services, the State must continue to monitor to ensure that eligibility decisions for all infants and toddlers are made in conformity with the individual evaluation and assessment requirements of Part C (at 34 CFR §§303.320 through 303.323) and not based upon a numerical goal. In addition, on Page 22 of the APR, the State indicates that it has a projected target of serving two percent of American Indian infants and toddlers. The use of a specific numerical goal for a racial or ethnic subgroup is inconsistent with Federal law. The State may examine whether and why infants and toddlers with disabilities in certain subpopulations were not referred, identified and/or determined eligible for services under Part C. However, under Title VI of the Civil Rights Act, it must do so in a race-neutral manner, without the use of race-or ethnic-specific goals. If the State proposed this target because it was concerned about the number of American Indian infants and toddlers with disabilities being served under Part C, the State should review, and if necessary, revise its policies, procedures and practices (including monitoring) to ensure that traditionally underserved groups are not being excluded by current policies, procedures and practices. Such actions could include expanding the Right Track program so that all reservations are participating in the program, as indicated in the APR on page 22.

In the next APR, the State must delete its numerical target for American Indian infants and toddlers, and instead, the State must report on its child find efforts for this subpopulation. OSEP did not identify any additional concerns in this cluster area.

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

The Monitoring Report did not identify noncompliance in this cluster area. The State included strategies in this APR designed to maintain compliance with the provision of family centered services at 34 CFR §303.12. Based on a review of the data and information reported in the APR, OSEP identified no concerns in this cluster. Strategies included by the State constitute a reasonable approach to maintaining performance in this area. The State also included targets, an explanation of progress or slippage, activities, timelines and resources (APR, pages 25-31). OSEP looks forward to reviewing the impact of North Dakota's strategies in the next APR.

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

OSEP's 1999 Monitoring Report identified seven areas of noncompliance in this cluster area. The State in its APR responded to these seven noncompliance areas and addressed one performance probe in the area of early childhood outcomes. The seven areas of noncompliance are: (1) failure to identify, individualize and provide all needed services (NDDHS failed to include all needed services on the IFSP (34 CFR §303.12(d)), and failed to individualize and provide early intervention services (34 CFR §303.344(d)(2)(i)); (2) the State did not make individual determinations about the frequency and intensity of services needed by the child and the family; (3) children not served in natural environments (service setting was limited by State policy (34 CFR §303.344(d)(1)(ii) and 34 CFR §303.12(b)(2)); (4) failure to include identified and non-required services on IFSP (medical or other services were not identified on the IFSP (34 CFR §303.344(e)); (5) services were not always provided at no cost to families (the State did not

charge a fee for services but parents were paying for services (34 CFR §303.520)); (6) failure to appoint a single service coordinator (the State did not ensure the appointment of a single service coordinator who was responsible for activities specified in the Federal regulations (34 CFR §§303.23(a) and 303.321(e)); and (7) failure to complete a MDE in all developmental areas (the State did not effectively ensure that each child referred for early intervention services received a timely MDE in all developmental areas (34 CFR §303.322)).

1) Failure to identify on the IFSP and individualize all needed services

The monitoring report found that the State did not: (1) identify on the IFSP early intervention services needed by a child and family because the only services identified on the IFSP and provided were home visits and parent training; (2) individualize on the IFSP early intervention services needed by the child and family; and (3) provide all needed services to eligible infants and toddlers. The monitoring report also noted that all infants and toddlers enrolled full time received a parent training home visit once per week, regardless of the nature or severity of the child's disability.

To ensure that early intervention services other than home visits and parent training are provided, the State indicated in its IP and APR that it had revised its policies and practices. The State reported in its IP that it amended the Home and Community Based Waiver to clarify that full time enrollment in the Infant Development Program required a minimum of one home visit per week, but that the State does not restrict the amount of other early intervention services needed or support provided (IP, page 19). At page 37 of the APR, the State reported on the percentage of three early intervention services provided to eligible children and their families (from 2001 through 2003) to include speech therapy, occupational therapy, and physical therapy. In reviewing these numbers, it appears that in 2001, 11% of eligible children received speech services, 12% received physical therapy and 14% received occupational therapy. In 2003, 29% of eligible children received speech services, 21% receive physical therapy and 24% received occupational therapy. While these data indicate that the percentages of these three direct early intervention services increased from 2001 to 2003, it is difficult to determine what the other percentages of eligible children are receiving as early intervention services, particularly given North Dakota's narrow eligibility criteria in its definition of developmental delay.

To ensure that early intervention services are individualized as needed by an eligible child and family, the APR also reports that the State has taken steps to clarify policies that may have been interpreted to limit the provision of early intervention services. The State reported at pages 37 and 38 of the APR that by 2003, it provided different types of early intervention services in addition to home visits and parent training, and further, that the amount of services provided varied. For example, the State noted that 85% of infants and toddlers receiving infant development services received those services for 1 hour per week – the remaining 15% of infants and toddlers received services as follows: 2% received services for 1 hour per month, 4% received services 1 hour every two weeks, and 9% received those services more than one hour per week.

Finally, the State indicated that it has taken steps to track the provision of early intervention services. The State reported on page 40 of the APR that DD Case Managers and Infant Development Home Visitors use the database, ASSIST, to track the service needs of infants and

toddlers. In addition, the State reported that it reviewed this data with regional supervisors, and the Human Service Center licensure review addressed the documentation of all needed early intervention services (APR, page 40).

In the next APR, the State must provide (as it indicated it already collects in its ASSIST database): (1) data on the direct early intervention services (other than home visits and parent training and support) identified as needed by an eligible child and family; (2) data on the direct early intervention services (other than home visits and parent training and support) received by an eligible child and family; and (3) twenty randomly selected initial IFSPs with the State's analysis of how the early intervention services identified as needed on the IFSP relate to the child's present levels of functioning and evaluation and assessment results. Failure to provide any data or data demonstrating compliance by the next APR (due March 31, 2005) may result in North Dakota's designation as a "high-risk" grantee for its FFY 2005 Part C grant.

2) Frequency and intensity of services needed

OSEP's 1999 monitoring report also found that the State did not make individual determinations about the frequency and intensity of services needed by the child and the family. 34 CFR §303.344(d). The State reported in its APR that although NDDHS did not have policies limiting the "frequency and intensity" of home visits and other early intervention services, practices may have varied (APR, page 40). However, the State reported variability in the frequency, intensity and types of early intervention services eligible children and their families receive based on the child's IFSP (APR, pages 37 – 38). OSEP appreciates the work of the State in implementing strategies to address this area of noncompliance.

3) Children not served in natural environments

OSEP found in its Monitoring Report that the "home was the only choice considered by the IFSP team for early intervention services" and that IFSPs did not contain the requisite justification when an early intervention service was not provided in the natural environment. The APR includes a target of documenting services on the IFSP that are not provided in the child's natural environment. In addition, the State reported in the APR that some regions in the State identified challenges in locating inclusive childcare settings for the provision of early intervention services (APR, page 42). In the next APR, the State must provide an update of its efforts to provide early intervention services in natural environments as well as its monitoring data on compliance with 34 CFR §303.344(d)(ii), which requires the IFSP to contain a justification of the extent, if any, to which the services will not be provided in a natural environment.

4) Failure to include identified and non-required services on IFSPs

34 CFR §303.344(e) provides that, to the extent appropriate, the IFSP must identify medical and other services that the child needs, but that are not required under Part C. The Monitoring Report indicated that almost 50% of the IFSPs reviewed did not contain this information. The Improvement Plan submitted by the State in 2002 indicated that the State revised the DD Case Management Handbook to clarify that the non-Part C services the family is receiving are included on the IFSP with the permission of the family. The APR indicated that the State has implemented all strategies to address this issue and monitored for compliance with this requirement. It recorded this data in its database, ASSIST, ran queries and reviewed these results

with regional early intervention supervisors in order to track the increase in the number of IFSPs containing this required information. OSEP appreciates the State's efforts to address this area of noncompliance.

5) Services were not always provided at no cost to families

The APR indicated that the State developed policies that clarified which early intervention services are provided at no cost to families and for which services parents may be financially responsible (APR, page 40). Since receiving the OSEP Monitoring Report, the State indicated it has established a system of payments for early intervention services under 34 CFR §303.521(a). The State filed its system of payment application amendment with OSEP in August 1998 and OSEP approved the amendments in the State's FFY 1998 grant award letter dated August 24, 1999. Therefore, the OSEP finding regarding early intervention services being provided at no cost to families is no longer applicable.

6) Failure to appoint a single service coordinator

The Monitoring Report found that the State did not ensure the appointment of a single service coordinator, as required by 34 CFR §§303.23(a) and 303.321(e). The State's IP indicated that the State had developed a position paper clarifying that the DD Case Manager serves as the single service coordinator. Furthermore, the APR indicated that the case management handbook was changed to clarify that DD Case Managers (who serve as service coordinators in North Dakota) are responsible for the completion of all early intervention service coordination activities. The APR also indicated that, when surveyed, families responded that their service coordinator was their primary source of information, and that, by June 30, 2004, the State would train the service coordinators regarding adult learning theory and develop and provide materials to the service coordinators (APR, pages 33 - 34). In the next APR, the State must confirm the implementation of these activities.

7) Failure to complete an evaluation in all developmental areas

The Monitoring Report found that the State had not ensured that each child referred for early intervention services received a timely multidisciplinary evaluation in all of the developmental areas, and that in many cases, the State limited its evaluations to areas where the parent expressed a concern. The State's IP indicated that the State had developed guidelines that clarified required evaluation areas, and planned to amend its Eligibility Administrative Code to address evaluation areas. The APR indicated that guidelines clarified required evaluation areas, and eligibility teams, who are responsible for determining eligibility, received training in the area of evaluation (APR, page 35). The APR also described the process by which eligibility is determined, and described how its current ASSIST database collects timeliness of evaluation data. However, the APR did not provide data indicating that: (1) evaluations were conducted in the five developmental areas under 34 CFR §303.322(c)(2)(ii); and (2) evaluations were conducted within 45 days of referral under 34 CFR §§303.321(e)(2)(i) and 303.322(e)(1). In the next APR, the State must include data indicating that: (1) evaluations are conducted in the five developmental areas under 34 CFR §303.322(c)(3)(ii); and (2) evaluations are conducted within 45 days of referral under 34 CFR §§303.321(e)(2)(i) and 303.322(e)(1). Failure to provide any



data or data demonstrating compliance by the next APR (due March 31, 2005) may result in North Dakota's designation as a "high-risk" grantee for its FFY 2005 Part C grant.

### Improved and Sustained Functional Abilities

The Part C FFY 2001 and FFY 2002 APRs requested data on the percentage of children participating in the Part C program who demonstrate improved and sustained functional abilities (in the developmental areas listed in 34 CFR §303.322(c)(3)(ii)). The State indicated that it did not have evaluation data to show improved and sustained abilities because standardized evaluation instruments were not required as part of the eligibility process, nor was an annual re-determination required. In the FFY 2003 APR, North Dakota must submit data (whether collected through sampling, monitoring, or other methods), targets for improved performance and strategies to achieve those targets for this area, or its plan to collect and submit the data for the FFY 2004 APR, including a detailed timeline of the activities necessary to implement the plan.

### *Early Childhood Transition*

OSEP's Monitoring Report found one area of noncompliance with two Part C requirements that were not met as required by 34 CFR §§303.344(h) and 303.148(b)(2). First, the State did not ensure that transition requirements are included in IFSPs, and did not ensure that transition planning meetings are held at least 90 days before a child's third birthday for children who may be eligible for Part B. The IP indicated that the State intended to study this issue, modify its transition guidelines, if necessary, and provide training and materials on transition. The APR included data and information regarding both areas.

On the issue of transition steps on the IFSP, the APR reported on page 48 that 80% of IFSPs contained transition outcomes from IFSPs reviewed from a sample of five percent of IFSPs of toddlers over the age of two. The APR indicated that NDDHS modified ASSIST to include a reminder relating to transition. NDDHS and the North Dakota Department of Instruction, with technical assistance from the National Early Childhood Technical Assistance Center (NECTAC) and the Mountain Plains Regional Resource Center, developed a joint transition monitoring process (APR, page 49). While NDDHS also modified its database to collect data to determine if transition outcomes are present at 2 years and 9 months, and will be taking additional steps to monitor progress in this area, OSEP notes that transition steps and outcomes must be identified on IFSPs for children but that the regulations only specify that such steps be in place by the child's third birthday. Thus, in the next APR, the State must provide data (through monitoring or sample IFSP record review or other data) on the percentage of children exiting Part C at age three who do not have IFSPs that meet the transition step and planning requirements of 34 CFR §§303.148(b)(3) and (b)(4) and 303.344(h). Failure to provide any data or data demonstrating compliance by the next APR (due March 31, 2005) may result in North Dakota's designation as a "high-risk" grantee for its FFY 2005 Part C grant.

Regarding the 90-day transition conference, the State reported that Part B eligibility was conducted (or refused by a parent) for 100 percent of children exiting Part C at age three. While this data indicates timely transition interagency coordination, it does not indicate whether a

conference was timely conducted for children potentially eligible under Part B with the family's approval as required under 34 CFR §303.148(b)(2). Thus, in the next APR, the State must provide data (through monitoring or sample IFSP record review or other data) on the number of children who are 2 years and 9 months and potentially eligible under Part B, and whose parents have agreed to a transition conference, for whom the transition conference was timely held under 34 CFR §303.148(b)(2). Failure to provide any data or data demonstrating compliance by the next APR (due March 31, 2005) may result in North Dakota's designation as a "high-risk" grantee for its FFY 2005 Part C grant.

### ***Conclusion***

NDDHS has provided data and information that addresses five of the eleven findings of noncompliance from OSEP's September 1999 Monitoring Report (no coordinated statewide child find system; procedures not effective to ensure referrals by primary referral sources; individualized determinations were not made about frequency and intensity of service needs; failure to include identified and no-required services on the IFSP; and services were not always provided at no cost to families). As requested in this letter, NDDHS must provide, in the next APR, data and information on the correction of the remaining six noncompliance issues. In the next APR due March 31, 2005, North Dakota must submit to OSEP:

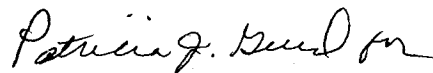
- With respect to the cluster area of General Supervision and the State's monitoring for compliance with Part C, a progress report including evidence of change and data demonstrating substantial improvement; information indicating how it verified the correction of noncompliance from the licensure review; the status of monitoring findings for each RICC and each RICC's QIP; the number of times that each RICC has met, whether the RICC developed a QIP and the status of the QIP; data (specifically QER and QIP monitoring data from all eight human service centers) demonstrating progress towards compliance with 34 CFR §303.501(b)(4); a description of the Part C noncompliance identified in the licensure process, and the manner in which the State verified that the noncompliance was corrected; and the data the NDDHS receives in response to the requests it makes to the regional DD Case Management Units for "data that can be used to measure and manage the early intervention program's results and standards . . ." as discussed on page 7 of the APR.
- Language that deletes its numerical target for American Indian infants and toddlers and a report on its child find efforts for American Indian infants and toddlers;
- Data on the direct early intervention services (other than home visits and parent training and support) identified as needed by an eligible child and family; data on the direct early intervention services (other than home visits and parent training and support) received by an eligible child and family; and twenty randomly selected initial IFSPs, with the State's analysis of how the early intervention services identified as needed on the IFSP relate to the child's present levels of functioning and evaluation and assessment results;
- An update of its efforts to provide early intervention services in natural environments as well as its monitoring data on compliance with 34 CFR §303.344(d)(ii), which requires

the IFSP to contain a justification of the extent, if any, to which the services will not be provided in a natural environment.

- With respect to the failure to appoint a single service coordinator, a report confirming the implementation of the activities described on pages 33 - 34 of the State's FFYs 2001 and 2002 APR;
- Data indicating that evaluations are conducted in the five developmental areas under 34 CFR §303.322(c)(3)(ii); and that evaluations are conducted within 45 days of referral under 34 CFR §§303.321(e)(2)(i) and 303.322(e)(1);
- With respect to improved and sustained functional abilities, data (whether collected through sampling, monitoring, or other methods), targets for improved performance and strategies to achieve those targets for this area, or its plan to collect and submit the data for the FFY 2004 APR (expected deadline March 2006), including a detailed timeline of the activities necessary to implement the plan;
- Data (through monitoring or sample IFSP record review or other data) on the percentage of children exiting Part C at age three who do not have IFSPs that meet the transition step and planning requirements of 34 CFR §§303.148(b)(3) and (b)(4) and 303.344(h); and
- Data (through monitoring or sample IFSP record review or other data) on the number of children who are 2 years and 9 months and potentially eligible under Part B, and whose parents have agreed to a transition conference, for whom the transition conference was timely held under 34 CFR §303.148(b)(2).

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 questions, please contact Mary A. Williams at 202-245-7586.

Sincerely,



Stephanie Smith Lee  
Director  
Office of Special Education Programs

cc: Debra Balsdon,  
Part C Coordinator