



## Illinois Part C Annual Performance Report FFY2010/SFY2011

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### **ATTACHMENTS:**

*Attachment 1 - C-9 Worksheet*

*Attachment 2 - Table 4, Report of Dispute Resolution Under Part C IDEA*

*Attachment 3 - Indicator 14 Rubric*

### Part C State Annual Performance Report (APR) for FFY10/SFY11

#### Overview of the Annual Performance Report Development:

The Illinois Annual Performance Report (APR) documents performance data on State targets for each Child and Family Connections (CFC) office as well as state progress or slippage toward measurable and rigorous targets. The Illinois Early Intervention (EI) Program makes the Illinois APR and State Performance Plan (SPP) available online at: [www.dhs.state.il.us](http://www.dhs.state.il.us) and through links from the other EI websites (the Illinois Early Intervention Training Program; Provider Connections, the Early Intervention credentialing/enrollment office; and the Early Intervention Clearinghouse). The APR and SPP documents are also available to the public at each of the 25 CFC offices. The APR was presented to the Illinois Interagency Council on Early Intervention (IICEI) for review and comment prior to its submission. In addition, CFC managers were given the opportunity to review the draft document and provide input. Both CFC managers and the IICEI reviewed changes to the SPP.

The APR is part of an ongoing process of performance measurement and strategic planning for the Illinois Early Intervention Program. For a number of years, Illinois has been reporting performance data to key stakeholders including the IICEI, the CFC offices, and the general public through various reporting mechanisms. The IICEI receives a data report at each of its meetings. Reports are also provided to IICEI workgroups. Illinois utilizes a central client tracking system called Cornerstone. No activity can take place without a case being active in Cornerstone. Both CFC office and department staff can pull reports to track client data. Currently, options for a web-based system with additional functionality are being explored. A new monthly service delay reporting system was piloted in FFY10/SFY11 and rolled out statewide in August 2011. This system allows CFC offices to identify new children for whom services are delayed, including the reason for delay; reporting on unresolved cases; and making any data corrections.

Since January 2002, the program has also utilized a standardized monthly reporting system on a series of performance measures. Since the beginning of SFY03 (July 1, 2002), Illinois has operated a performance contracting system for CFC offices, based on some of the more important measures found in the monthly statistical reports. These performance measures are also used to identify findings of noncompliance with specific indicators and as part of the process to designate local determinations. Local determinations are made in the first quarter of the fiscal year (July-September), when 12-month data from the previous fiscal year becomes available. Specific factors affecting the department's determination that a CFC office meets requirements, needs assistance, needs intervention, or needs substantial intervention include the reported correction of its findings of noncompliance or maintenance of high levels of performance. A spreadsheet is used to make CFC local determinations and looks at CFC office rankings on incentive funding measures and contract performance floors, along with documentation of transition meetings and child outcomes, submission/implementation of corrective action plans, and existence of longstanding noncompliance. Determination scores determine levels of technical assistance and training and frequency of reporting for corrective action plans and focused monitoring visits.

Other reports to CFC offices include caseload summaries and 45 days intake. These reports allow CFC managers to review service coordinator and child-specific data. Monthly, statewide data on the 32 performance measures are posted on the program's website and include comparison data with the previous month, previous fiscal years' averages, and data from the same month in the two previous years. In FFY10/SFY11, quarterly "mini APRs", including CFC-specific data on Indicators 1, 7, and 8C, were also provided to CFC offices.

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Illinois has fully implemented a system of identification and correction of findings of noncompliance in accordance with OSEP Timely Correction Memo 09-02. Information from data systems and file reviews and the EI monitoring, dispute resolution, complaints and hearings and “other” processes are used to identify noncompliance for both CFC offices and Early Intervention service providers. The CFC office/EI provider is notified in writing of the finding and its correction. Correction of findings involves several steps. Development and implementation of corrective action plans ensure that the policy, procedure, or practice that led to the noncompliance has been corrected. Child-specific/individual instance correction is documented through the use of data systems and file reviews. When required, implementation of the specific statutory/regulatory requirements by CFC offices is documented using data based on 100 percent compliance over three consecutive months or through a file review in which all files demonstrate compliance.

During FFY10/SFY11, two workgroups of the IICEI wrapped up their work and one new workgroup was formed. The Finance workgroup reviewed the status of payment delays, budget updates, applicable legislation, and operation of the Central Billing Office, including the implementation of a new insurance billing unit. The Service Delay workgroup developed Integrated Services Approach Guidelines and monitored the activity of a pilot project. The workgroup also discussed provider recruitment strategies, including strategies for posting unmet service needs.

The Service Delivery Approaches workgroup began meeting in May 2011. The charge of the Service Delivery workgroup is:

- To examine/investigate approaches to Early Intervention service delivery that facilitate teaming and communication;
- To develop and present recommendations for adopting a service delivery approach for early intervention services in Illinois; and
- To design specific steps needed to implement the recommended service delivery approach for early intervention services in Illinois that includes a timeline for a phased in implementation.

The Bureau convened an Outcomes workgroup to review outcome strategies and data for child and family outcomes (Indicators 3 and 4) and make recommendations regarding improvement activities, timelines and setting target values for child and family outcomes. Membership of the advisory group include several IICEI members, including parent representatives, CFC office managers, Early Intervention providers, including representation across professional disciplines, and research and training staff.

In addition, the Bureau has convened several ad hoc workgroups to address specific issues with input from CFC offices and EI providers. An Assistive Technology (AT) workgroup has reviewed the AT request, approval and provision processes in Illinois’ EI Program and is developing recommendations to streamline these processes. In addition, an IFSP workgroup has been reviewing the content and format of the IFSP to make sure that it complies with federal requirements and provides families and providers relevant and understandable information.

House Joint Resolution (HJR) 50 created the Illinois Part C Early Intervention Taskforce in response to an identified need for a comprehensive and thorough review of the Part C Early Intervention Program. The intent of HJR 50 was for the EI Taskforce to make recommendations and action plans to address issues related to workforce, financing, monitoring and evaluation, service delivery, and transitions. HJR 50 required that the Taskforce issue a report with its recommendations to the Governor and the General Assembly by July 1, 2010. The Taskforce was comprised of a broad-based group of

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individuals, including parents of infants and toddlers who are or have participated in the Part C EI Program; advocates who focus on early childhood and early intervention; early intervention, educational and healthcare professionals; and state agency personnel working in early childhood, early intervention, mental health and healthcare programs. The EI Taskforce report can be found at [www.dhs.state.il.us/page.aspx?item=50753](http://www.dhs.state.il.us/page.aspx?item=50753).

All EI Taskforce recommendations have been considered and work is moving forward to address several recommendations.

- Options are being explored on the design and implementation of a web-based data management system, which is recommendation #1 in the report.
- Review of the service delivery model, as requested in recommendation #2, is the work of the Service Delivery Approaches workgroup.
- The recruitment, development and retention of highly qualified and culturally and linguistically competent personnel (recommendation #3) are being addressed through efforts of the Bureau and its contractors, in coordination with the professional associations that support EI. Work is focused on coordinating provider recruitment and on education and information sharing regarding appropriate practice for services to infants and toddlers in the EI program.
- Review of the current Assistive Technology service in order to identify current inefficiencies in the AT system, the incorporation of recommended practices, and the realization of cost savings (recommendation #6) is being considered by the AT workgroup.
- The EI Monitoring Program and the Bureau have been working on recommendation #8, the enhancement of the monitoring system, through plans to roll out Program Integrity Pilot project strategies statewide based on an every-three-year cycle beginning in FFY11/SFY12.
- Several CFC offices have been working with the Chicago Public Schools as requested in recommendation #9.
- Finally, the Bureau continues to explore new funding and maximize cost efficiencies. In FFY10/SFY11, EI has started to receive Medicaid payments from new efforts to bill for interpreter/translator services.

The Program Integrity Project was designed to accomplish statewide program equality; fidelity to program principles and state and federal laws; and long-term program stability continue. Work on several pilot projects continued and 2 new pilot projects were added in FFY10/SFY11.

- In FFY09/SFY10, a system ombudsman position was added to the Illinois EI Training Program. The system ombudsman supports the Department's Program Integrity Project. Activities include data analysis, coordination of focused monitoring activities, development of strategies to promote compliance with program principles and procedures, report writing, and development and implementation of training strategies. The system ombudsman has supported the Program Integrity Project pilots through data analysis; training and support plan development and implementation, and the transfer of strategies from the pilot sites to other CFC areas. In addition, the system ombudsman has visited CFC offices, provided resources to people in the field, reviewed data, identified areas for clarification or training, and researched what is going on nationally, with the goals to improve program practices and communication between system entities.
- During the FFY10/SFY11, the Bureau, the system ombudsman, the EI Training Program, the EI Monitoring Program and selected CFC offices participated in three Program Integrity pilots. The pilot projects involve in-depth file reviews, data analysis, identification of system challenges, and customized training and technical assistance planning and implementation. The pilot projects

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focused on three areas of concern: 1) provision of services in natural environments (Indicator 2), 2) under age 1 participation rate (Indicator 5), and 3) transition (Indicator 8). Piloted strategies are then evaluated. Lesson learned through these pilots are shared with all CFC managers at monthly CFC manager's meetings and strategies are incorporated into system training and technical assistance approaches. A new focused monitoring process will expand the Program Integrity process statewide, with focused monitoring visits in a minimum of eight CFC offices in FFY11/SFY12. Each CFC office will received a focused monitoring visit every three years or more frequently, if needed.

**Monitoring Priority: Early Intervention Services In Natural Environments**

**Indicator 1:** Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a) (3) (A) and 1442)

**Measurement:**

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>FFY10/SFY11</b>	100 percent of infants and toddlers with IFSPs will receive the early intervention services on their IFSP within 30 days.

**Actual Target Data for FFY10/SFY11:****Indicator 1**

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner)/(total # of infants and toddlers with IFSPs)] X 100.

**FFY10/SFY11:  $[(17,696)/(18,814)] \times 100 = 94.06\%$**

**FFY10/SFY11 Target = 100%**

**Infants and Toddlers with IFSPs who receive Early Intervention Services in a Timely Manner:**

a. Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	17,696
b. Total number of infants and toddlers with IFSPs	18,814
Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (Percent = [(a) divided by (b)] times 100)	94.06%

For this APR submission, data from the month of April have been utilized from the Service Delay Reporting System. A delay is identified whenever a child waits more than 30 days to receive the Early Intervention services listed on his/her IFSP. A time series evaluation of the data indicates that service delays vary in a pattern according to seasonality. For the first seven to eight months of the federal/state fiscal year, service delays tend to be lower and then increase annually in the spring which corresponds with an increase in the overall caseload which occurs during that same period. April has been selected as a representative data set, as it is in the middle of the normal caseload period.

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The following table shows the statewide performance as well as each of the state's 25 CFC offices, as of April 2011. Statewide, 94.06% of children with IFSP have experienced no delays. Fifteen CFC offices had 95% or more of their cases with no delays, with one office showing no delays. Six CFC offices were between 90% and 95% of their active cases without delay, and four CFC offices had fewer than 90% of their active cases with no delays.

April 2011			
CFC # & Name	Net IFSPs	No Delays	% No Delays
#1 ROCKFORD	604	482	79.8%
#2 Lake Co.	718	683	95.1%
#3 FREEPORT	343	292	85.1%
#4 Kane-Kendall Co.	898	870	96.9%
#5 DuPage Co.	1,200	1,189	99.1%
#6 N Suburbs	1,627	1,593	97.9%
#7 W Suburbs	1,041	983	94.4%
#8 SW Chicago	857	778	90.8%
#9 Central Chicago	1,060	920	86.8%
#10 SE Chicago	841	759	90.2%
#11 N Chicago	2,510	2,272	90.5%
#12 S Suburbs	1,161	1,140	98.2%
#13 MACOMB	323	309	95.7%
#14 PEORIA	507	477	94.1%
#15 JOLIET	1,321	1,241	93.9%
#16 BLOOMINGTON	644	621	96.4%
#17 QUINCY	247	246	99.6%
#18 SPRINGFIELD	296	285	96.3%
#19 DECATUR	392	388	99.0%
#20 EFFINGHAM	424	414	97.6%
#21 BELLEVILLE	664	664	100.0%
#22 CENTRALIA	363	351	96.7%
#23 NORRIS CITY	207	200	96.6%
#24 CARBONDALE	163	141	86.5%
#25 McHenry Co.	403	398	98.8%
<b>State</b>	<b>18,814</b>	<b>17,696</b>	<b>94.06%</b>
Cook County	9,097	8,445	92.83%
Collar Counties	4,540	4,381	96.50%
Downstate	5,177	4,870	94.07%

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:

Overall, the percentage of children who receive early intervention services on their IFSPs in a timely manner, excluding delays for family reasons, increased from 93.96% in FFY09/FSY10 to 94.06% in FFY10/SFY11.

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In FFY10/SFY11, fifteen CFC offices had more than 95% of open cases with no delays, which is an increase from FFY09/SFY10. One CFC reported 100% compliance.

Regionally, Cook County continued to decline from 93.38% for FFY09/SFY10 to 92.83% for FFY10/SFY11. Both Downstate and the Collar Counties (CFC offices 2, 4, 5, 15, and 25) improved increasing from 93.80% and 95.24% respectively in FFY09/SFY10 to 94.07% and 96.50% in FFY10/SFY11.

Service delays can be impacted by a number of factors leading to an improvement including:

- A reduction in payment delays to Early Intervention providers and
- An increase of service providers providing service in natural environments.

While Illinois' financial situation still results in delays of payments to EI service providers, these delays have decreased during FFY10/SFY11. Based on analysis of service delays in connection with the provider payment delays, there appears to be little correlation between the status of provider payments and the percentage of children receiving timely service. The biggest effect on service delays continues to be the size of the provider community, which is constantly changing as new providers enter and existing providers leave or modify their availability to provide services to enrolled children.

Improvement Activity	Status/Timelines/Resources
Illinois will use a full 12 months of data for the identification of findings for Indicator 1.	<p>This was implemented for FFY10/ SFY11 data (i.e., 12 months ending June 30, 2011) as part of the finding notification process and will continue as an ongoing strategy.</p> <p>Resources include the Bureaus of Early Intervention and Performance Support Services.</p>
The EI Monitoring Program will increase the number of service coordinators it interviews as part of the onsite monitoring process for CFC offices. The EI Monitoring Program will also enhance interview questions to capture additional information about the IFSP decision-making process.	<p>An expanded focused monitoring visit format has been developed for the CFC offices and includes a larger sampling of service coordinators for interviews (25% of service coordinators with a minimum of 2 interviews being conducted) and a more comprehensive list of questions. All 25 CFC offices will receive a focused monitoring visit one time over a 3-year period or more frequently, if needed. The first focused monitoring visit was held in October 2011.</p> <p>Resources include the EI Monitoring Program and the Bureau of Early Intervention.</p>
The Bureau and its contractors who provide training, credentialing, monitoring, resource materials and billing/claims services will coordinate their efforts to work with professional associations and others that support the EI Program.	<p>This will be an ongoing effort through FFY12/SFY13. In FFY10/SFY11, initial work focused on coordinating provider recruitment and on education and information sharing regarding appropriate practices for services to infants and toddlers in the EI Program. Websites that support the EI system worked together to provide discipline-specific, nationally recognized best practice documents, recruitment materials, and information about the EI services system directed</p>

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	<p>to both potential and current EI providers.</p> <p>In FFY11/SFY12, Provider Connections, the EI credentialing/enrollment office, will roll out an updated website to enhance recruitment and retention efforts.</p> <p>A planning meeting will be held monthly with the Bureau and its contractors to identify, implement, and coordinate strategies.</p> <p>Resources include the Bureau of Early Intervention and its contractors.</p>
Expand Program Integrity Pilot to include additional targeted CFC areas.	<p>Two new pilot sites were initiated in FFY2010/SFY2011, including one with a focus on transition and a second with a focus on participation of children under age 1. Pilot activities have been integrated into the focused monitoring process. In addition to annual compliance monitoring visit, all CFC offices will receive a focused monitoring visit once, over a 3-year period or more frequently, if needed.</p> <p>Resources include the Bureau of Early Intervention, the EI Training Program, EI System Ombudsman, and the EI Monitoring Program.</p>
Additional data will be provided to CFC offices so they can monitor service delays, address child-specific, and system issues in a timely way.	<p>In FFY2010/SFY2011, quarterly reports were provided to CFC offices so that they could monitor performance on Indicators 1, 7, and 8C.</p> <p>Resources include the Bureaus of Early Intervention and Performance Support Services.</p>

### Other improvement activities:

- A new monthly service delay reporting system was piloted in FFY10/SFY11 and rolled out statewide in August 2011. This system allows CFC offices to identify new children for whom services are delayed, including the delay reason; report on unresolved cases; and make data corrections. An unresolved case list is provided to the CFC offices and is updated as part of this monthly report.
- An AT workgroup has reviewed the AT request, approval and provision processes in Illinois' EI Program and is developing recommendations to streamline them.
- The Service Delay workgroup developed Integrated Services Approach Guidelines and monitored the activity of a pilot project. The workgroup also discussed provider recruitment strategies, including strategies for posting unmet service needs.
- The Service Delivery Approaches workgroup has begun to examine/investigate approaches to Early Intervention service delivery that facilitate teaming and communication and consider recommendations for adopting a service delivery approach for early intervention services in Illinois.
- On March 18, 2011, CFC office staff participated in a webinar on how to search and generate reports from the IL Department of Children and Family Services' Provider Database, which contains statewide information on over 50 types of services, such as counseling, case management, mentoring, tutoring, etc. Information needed for families to access services, such as eligibility requirements, hours of operation, contact information, and locations are included in the database.

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User names were issued to EI service coordinators so that they may begin using the database to help identify community resources for families in Early Intervention.

### **Correction of FFY09/SFY10 Findings of Noncompliance (if State reported less than 100% compliance):**

Level of compliance (actual target data) State reported for FFY 2009 for this indicator: 93.96%

1. Number of findings of noncompliance the State made during FFY09/SFY10 (the period from July 1, 2009, through June 30, 2010)	4
2. Number of FFY09/SFY10 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding)	2
3. Number of FFY09/SFY10 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	2

### **Correction of FFY09/SFY10 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:**

4. Number of FFY09/SFY10 findings not timely corrected (same as the number from (3) above)	2
5. Number of FFY09/SFY10 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY09/SFY10 findings not verified as corrected [(4) minus (5)]	2

### **Actions Taken if Noncompliance Not Corrected:**

Data are reported to each CFC office for all children exiting Part C who did not receive timely services, based upon 12-month data. When a finding of noncompliance is identified, a corrective action plan (CAP) to address noncompliant policies, procedures, and practices must be submitted and implemented. On an annual basis, if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and submit and implement a new CAP.

Service delays are considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan for addressing service delays, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

On a quarterly basis, a status report on each finding of noncompliance is sent to each CFC office and includes the following information: year of finding, CAP implementation, Prong 1 (child-specific correction) and Prong 2 (implementation of specific regulatory requirement). These reports are used to notify CFC offices when correction of noncompliance has been fully documented.

### **Verification of Correction of FFY09/SFY10noncompliance or FFY09/SFY10findings (either timely or subsequent):**

The Illinois Early Intervention Program ensures that noncompliant policies, procedures and/or practices have been revised and the noncompliance has been corrected. The following procedure outlines the steps that ensure correction of noncompliance, including submission, approval and implementation of a corrective action plan; verification of correction of individual instances of noncompliance; and the use of updated data showing compliance with statutory/regulatory requirements.

**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY09/SFY10:**

- A. A CAP is submitted and its implementation documented. Review and approval of these plans are completed by the Bureau of Early Intervention. CFC offices report on implementation of the plan in six months, or more frequently if the CFC office determination is “Needs Intervention” or “Needs Substantial Intervention.” Findings are based on data for all children enrolled in the program during a 12-month time period ending June 30.
- B. Child-specific/individual instance correction is documented through the use of the Cornerstone system and file reviews. Instances of noncompliance are considered resolved when data errors have been corrected, the required action has been completed, or the child is no longer within the jurisdiction of the program.
- C. CFC office implementation of the specific statutory/regulatory requirement is documented when data demonstrate that a CFC office has 100 percent compliance during three consecutive months.

**Correction of Remaining FFY08/SFY09 Findings of Noncompliance:**

1. Number of remaining uncorrected FFY08/SFY09 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator	20
2. Number of remaining FFY08/SFY09 findings the State has verified as corrected	0
3. Number of remaining FFY08/SFY09 findings the State has NOT verified as corrected [(1) minus (2)]	<b>20</b>

**Verification of Correction of Remaining FFY08/SFY09 findings:**

On an annual basis if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and develop and implement a new CAP. Noncompliance with the requirement is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan for addressing service delays, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

The primary issue with the correction of findings of noncompliance related to timely services remains the ability of CFC offices to document 100 percent compliance during three consecutive months.

**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY08/SFY09:**

See “Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY09/SFY10.” above.

**No Findings of Noncompliance Remain from FFY07/SFY08 or Earlier.**

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**Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):**

Statement from the Response Table	State's Response
The State must demonstrate in FFY2010 APR, due February 1, 2012, that the State is in compliance with the timely service provision requirements in 34 CFR 303.340(c), 303.342(e), and 303.344(f)(1). Because the State reported less than 100% compliance for FFY2009, the state must report on the status of correction of noncompliance reflected in the data the state reported for this indicator.	See status in “Correction of FFY09/SFY10 Findings of Noncompliance,” above.
If the State does not report 100% compliance in the FFY2010 APR, the State must review its improvement activities and revise them, if necessary.	See new improvement activities, below.
The State must demonstrate in FFY2010 APR that the remaining 20 uncorrected noncompliance findings indentified in FFY2008 were corrected.	See status in “Correction of Remaining FFY08/SFY09 Findings of Noncompliance,” above.
When reporting on the correction of noncompliance, the State must report, in its FFY2010 APR, that it has verified that each EIS program with noncompliance reflected in the FFY2009 data the State reported for this indicator and each EIS program with remaining noncompliance identified in FFY2008: (1) is correctly implementing 34 CFR 303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or State data system; and (2) has initiated services, although late, for any child whose services were not initiate in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008. In the FFY2010 APR, the State must describe the specific actions that were taken to verify correction.	See “Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY09/SFY10,” above.

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### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11 (if applicable):

New Improvement Activity	Timelines & Resources
The EI monitoring process will complete focused monitoring visits to a minimum of eight CFC offices as part of the expansion of Program Integrity pilot efforts. Each CFC office will receive a focused monitoring visit every three years or more frequently if needed.	Eight CFC offices will receive a focused monitoring visit by April 2012.  Resources include the Bureau of EI, the EI Ombudsman and the EI Monitoring Program.
In FFY11/SFY12, the AT workgroup will share its recommendations with the IICEI and the Bureau. Implementation will begin on efforts to streamline the AT process.	Recommendations from the AT workgroup will be presented to the IICEI and the initial rollout steps will be completed by July 2012.  Resources include the Bureau of EI, the AT workgroup, the EI Training Program, and the IICEI.
A new monthly service delay reporting system will be rolled out statewide.	By August 2011, all CFC offices will begin using the new monthly service delay reporting system.  Resources include the Bureaus of Early Intervention and Performance Support Services.
A comprehensive review of EI service delivery will be conducted to help ensure that practice supports EI principles and policy/procedure while maximizing resources.	By December 30, 2012, the Service Delivery Approaches workgroup will complete its review of EI service delivery components and begin consider recommendations for system change.  Resources include the Bureau of EI, the Service Delivery Approaches workgroup, the EI Ombudsman, and the IICEI.
The functionality of the central client tracking/billing system will be improved, including supports for teaming/communication among EI providers, enhanced monitoring functions, and better tracking of timely service.	By June 30, 2013, a web-based client tracking/billing system will be developed and rollout initiated.  Resources include the Bureau of EI, the EI CBO, and the CFC offices.
Provide targeted technical assistance to ensure correction of noncompliance and improve overall compliance.	By June 30, 2012, provide targeted technical assistance to CFC offices that demonstrate less than 90.0% compliance with timely services in FFY10/SFY11. Share strategies with all CFC offices to address long-standing noncompliance. The EI Ombudsman will work with these CFC offices to identify issues related to noncompliance and help develop strategies to address them.  Resources include the Bureau of EI and the EI Ombudsman.

## APR Template – Part C (4)

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### Overview of the Annual Performance Report Development: See Indicator 1.

#### Monitoring Priority: Early Intervention Services in Natural Environments

**Indicator 2:** Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

(20 U.S.C. 1416(a) (3) (A) and 1442)

##### **Measurement:**

Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
FFY10/SFY11	At least 90.0% of all children with IFSPs active on October 31, 2010 will have their services provided predominately in the home or in community settings.

#### Actual Target Data for FFY10/SFY11:

##### **Indicator 2**

(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings/total # of infants and toddlers with IFSPs) X 100

**FFY10/SFY11 Result: (17,853/18,587) X 100 = 94.6%**

**FFY10/SFY11 Target = 90.00%**

October 31, 2010, data (94.6%) demonstrate an improvement in the proportion of children with IFSP services authorized predominately in natural settings and exceeds the target for FFY10/SFY11 of 90.0%. When a service, which is identified in a child's IFSP, is authorized in the Cornerstone system, a place of service code is designated. When the provider submits a claim for that service, the Early Intervention Central Billing Office (EI CBO) ensures that the place of service code matches the authorization for that service. On a monthly basis, the EI CBO generates a report on services provided predominately in the home or in community settings, which reflects the settings for services that have been processed for payment. The child's IFSP must include a justification when services are authorized in a non-natural setting, along with a plan to transition to a natural setting, when available.

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Cases in Predominately in Natural Settings By CFC & Geographic Regions						
CFC # & Area	October 2009			October 2010		
	Home	Day Care/ Comm.	Natural Settings	Home	Day Care/ Comm.	Natural Settings
#1 ROCKFORD	79.10%	9.39%	88.50%	75.98%	7.21%	83.19%
#2 Lake Co.	92.60%	1.91%	94.60%	95.75%	1.47%	97.21%
#3 FREEPORT	68.90%	10.70%	79.60%	64.98%	10.77%	75.76%
#4 Kane-Kendall Co.	93.90%	3.05%	96.90%	94.89%	4.54%	99.43%
#5 DuPage Co.	97.00%	1.27%	98.30%	96.10%	3.25%	99.35%
#6 N Suburbs	86.40%	7.86%	94.30%	87.87%	7.61%	95.48%
#7 W Suburbs	90.70%	3.28%	94.00%	91.68%	3.52%	95.20%
#8 SW Chicago	96.50%	1.38%	97.90%	96.15%	1.00%	97.15%
#9 Central Chicago	92.00%	3.71%	95.70%	90.72%	4.16%	94.88%
#10 SE Chicago	92.10%	0.49%	92.60%	88.96%	0.76%	89.71%
#11 N Chicago	87.70%	2.21%	89.90%	96.13%	2.26%	98.39%
#12 S Suburbs	98.60%	1.08%	99.70%	98.20%	1.58%	99.79%
#13 MACOMB	82.60%	10.92%	93.50%	80.74%	11.15%	91.89%
#14 PEORIA	25.50%	6.62%	32.20%	36.12%	7.66%	43.78%
#15 JOLIET	88.00%	5.33%	93.40%	92.03%	4.68%	96.71%
#16 BLOOMINGTON	74.50%	17.60%	92.10%	74.18%	18.88%	93.06%
#17 QUINCY	82.00%	10.36%	92.30%	85.59%	8.11%	93.69%
#18 SPRINGFIELD	56.70%	33.52%	90.30%	47.22%	44.79%	92.01%
#19 DECATUR	87.80%	9.51%	97.30%	86.67%	6.93%	93.60%
#20 EFFINGHAM	98.50%	0.88%	99.40%	96.41%	3.33%	99.74%
#21 BELLEVILLE	99.20%	0.33%	99.50%	99.33%	0.34%	99.66%
#22 CENTRALIA	97.90%	0.88%	98.80%	97.49%	1.40%	98.88%
#23 NORRIS CITY	100.00%	0.00%	100.00%	100.00%	0.00%	100.00%
#24 CARBONDALE	92.90%	6.55%	99.40%	91.43%	8.57%	100.00%
#25 McHenry Co.	92.60%	3.24%	95.90%	94.38%	2.81%	97.19%
<b>State</b>	<b>88.00%</b>	<b>4.89%</b>	<b>92.90%</b>	<b>89.46%</b>	<b>5.14%</b>	<b>94.60%</b>
Cook County	90.90%	3.21%	94.10%	93.02%	3.30%	96.3%
Collar Counties	92.70%	3.08%	95.70%	94.49%	3.56%	98.0%
Downstate	79.30%	9.14%	88.40%	79.19%	9.57%	88.8%

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:

**Progress or Slippage for Indicator 2:** Statewide, the proportion of children served predominately in natural settings increased from 92.9% at the end of October 2009 to 94.6% at the end of October 2010. Both Cook County and its collar counties continue to demonstrate an increase in the proportion of children served predominately in natural settings, with 9 out of the 12 CFC offices in these areas showing increases. This year, downstate CFC offices showed a slight increase (88.4% to 88.8%) when compared to October 2009 data. Although CFC # 14 (Peoria) has shown an improvement over last year going from 32.20% to 43.78%, this CFC continues to struggle with providing services in the natural setting and as a result contributes the most to this regions lower number. Among the downstate CFC

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offices, only two other CFC offices continue to have a proportion of children serviced predominately in natural settings that falls below 90% (CFC offices #1 and #3), both of which showed a decline from the previous year. Overall CFC offices' performance remained fairly constant, with 17 CFC offices making improvements, 7 CFC offices showing modest decreases, and 1 reflecting no change.

### Improvement Activities

Previous improvement activities, such as monthly predominate setting reporting to CFC offices, performance contracting, and identification of findings and development of corrective action plans continue.

Improvement Activity	Status/Timeline/Resource
As part of the CFC 14 pilot project, develop and implement a training plan targeting strategies to increase the proportion of children served predominately in natural settings. Other strategies for FFY10/SFY11 include the following: hold provider recruitment fair, distribute recruitment letters to area licensed professionals; and continue discussions with CFC office staff, EI providers and parents. Strategies will be shared with other CFC offices.	The CFC 14 pilot project training and technical assistance plan was completed and implemented by June 30, 2011. This plan included natural environments training and resource sharing for the CFC staff, a Winter Institute open to providers and CFC staff addressing key principles, assessment, intervention and family-centered practices, and provision of training materials for CFC staff to use that addressed supporting families, building relationships, facilitating teams, and self-care. Other strategies were identified to generate ideas for improvement including the identification of additional providers willing to provide services in settings outside of hospital and clinic settings. Recruitment letters were sent to licensed professionals in the CFC area and surrounding counties and an EI Provider Fair was held on October 19, 2010. Information was provided to other CFC offices at CFC managers' monthly meetings. Resources include the Bureau of Early Intervention, the EI Training Program, EI System Ombudsman, and the EI Monitoring Program.
Continue to track CFC office performance on services provided predominately in the home or in community settings, but discontinue the practice of issuing findings based strictly upon data.	Findings of noncompliance issued in the first quarter of FFY11/SFY12 did not include findings related to services provided predominately in the home or in community settings. CFC offices continued to receive a standardized monthly reporting system on a series of performance measures. Resources include the Bureaus of Early Intervention and Performance Support Services.

### Other improvement activities include the following:

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- Upon implementation of the policy requiring the use of the “Developmental Justification of Need to Change Frequency, Intensity or Location” worksheet, Illinois developed and made available to the Part C early intervention field, an online module entitled “Natural Environments and the Developmental Justification of Need Requirement”. This module provides information about the federal requirement for services to be provided in the child’s natural environment and further examines Illinois’ processes and procedures to make changes to the frequency, intensity or location of services on the Individualized Family Service Plan. In addition to the policy and clarification memos released by the Bureau, this module served as an avenue to inform the field of the federal requirement as well as link policy to practice in the field. From July 1, 2010 through June 30, 2011, over 400 individual providers completed this online training module. This module continues to be available to the field and registration is ongoing.
- The Illinois Systems Overview training, which is required to be completed before an EI credential is awarded, and the Illinois Service Coordination training, are offered to the field in an online as well as a face-to face format in order to accommodate individual learning styles and in an effort to be accessible to the broadest audience. Both the Service Coordination and the Systems Overview curricula include federal legislation as a cornerstone of the Part C system and review natural environments language from federal legislation as well as supports participants in understanding the policies and procedures in place in Illinois related to natural environments. Within the Systems Overview curriculum, several activities and group discussions encourage participants to consider available evidence and practices that support natural environments. Additionally, participants are asked to consider how policies and procedures related to natural environments will impact them in their daily practice, including personal safety. Over the course of FFY10/SFY11, approximately 600 participants attended or completed the Systems Overview training.
- The Illinois Early Intervention Training Program developed a new Foundational Institute curriculum entitled “Partnering for Success” that infused the concept of natural environments throughout the curriculum and allowed for application activities, reflective assessments, and the chance to observe, using videotape, the provision of services in natural environments. This particular curriculum is considered “next-level” as it allows participants from a variety of disciplines and with varying levels of experience to build upon their knowledge over the course of a five-week Institute and network, creating communities of practice that can continue to support learning and growth long after the Institute ends. This curriculum was offered in two locations around the state in FFY10/SFY11 and will be offered in three additional locations in FFY11/SFY12.
- The Early Intervention Training Program also offers several one-day trainings that cover the topic of natural environments including Using the Family’s Stuff, Developing Meaningful Intervention Plans for Families and Providers, Key Principles in Early Intervention: What Does It Look Like? How Do I Do It?, The Pressure of Poverty: Effects on Young Children and their Families, and Child Outcomes in Action. These training sessions are made available in different locations across the state and are open to early interventionists of all disciplines. Each of these curricula infuses the concept of natural environments at the foundational level and asks participants to participate in activities that serve to support them in practical application of the training content.
- The EI Training Program has also developed and made public a “Resources” page on the EI Training Program website at [www.illinoiseittraining.org](http://www.illinoiseittraining.org), which has an entire section devoted to national and Illinois-specific articles, resources, websites and trainings related to natural environments.

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New Improvement Activity	Timelines & Resources
Determine if other CFC offices would benefit from strategies and training materials developed in conjunction with the Program Integrity pilot project targeting natural environments.	By June 30, 2012, materials from the Program Integrity pilot project targeting natural environments will be evaluated and distributed to other CFC offices with TA/training support, when needed. Resources include the Bureau of Early Intervention, the EI Ombudsman, and the EI Training Program.
Develop, disseminate curriculum that supports early interventionists personal safety while providing services in the natural environment. This could be in the form of online or face to face format.	By June 30, 2012, the personal safety curriculum will be developed and disseminated. Resources include the Bureau of Early Intervention and the EI Training Program.
The Partnering for Success Institute (described above) will be offered in three additional locations.	By June 30, 2012 the Partnering for Success Institute will be offered in three additional locations. Resources include the Bureau of Early Intervention and the EI Training Program.

**Overview of the Annual Performance Report Development:****See Indicator 1.****Monitoring Priority: Early Intervention Services in Natural Environments****Indicator 3:** Percent of infants and toddlers with IFSPs who demonstrate improved:

- A: Positive social-emotional skills (including social relationships);
  - B: Acquisition and use of knowledge and skills (including early language/communication); and
  - C: Use of appropriate behaviors to meet their needs.
- (20 U.S.C. 1416(a)(3)(A) and 1442)

**Measurement:****Outcomes:**

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

**Progress categories for A, B and C:**

- a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

**Summary Statement for Each of the Three Child Outcomes:****Summary Statement 1:** Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turn 3 years of age or exited the program.**Measurement for Summary Statement 1:** Percent = #of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d) divided by [# of infants and

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toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d) times 100.

**Summary Statement 2:** The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turn 3 years of age or exited the program.

**Measurement for Statement 2:** Percent = # of infants and toddlers reported in progress category (d) plus [# of infants and toddlers reported in progress category (e) divided by the total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (e)] times 100.

FFY	Measurable and Rigorous Target	%
FFY10/SFY11	Positive Relationships Summary Statement 1:	65.6%
	Positive Relationships Summary Statement 2:	63.3%
	Acquire Knowledge & Skills Summary Statement 1:	77.0%
	Acquire Knowledge & Skills Summary Statement 2:	48.0%
	Able to Meet Needs Summary Statement 1:	74.5%
	Able to Meet Needs Summary Statement 2:	55.0%

### Actual Data FFY10/SFY11:

Summary Statements	Actual FFY09/SFY10	Targets FFY10/SFY11	Actual FFY10/SFY11
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>			
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program $[(c+d)/(a+b+c+d)] \times 100 = 3,949/5,950 \times 100 = 66.4\%$	65.6%	65.6%	66.4%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program $[(d+e)/(a+b+c+d+e)] \times 100 = 5,908/9,362 \times 100 = 63.1\%$			
<b>Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>			
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program $[(c+d)/(a+b+c+d)] \times 100 = 6,749/8,626 \times 100 = 78.2\%$	77.0%	77.0%	78.2%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program $[(d+e)/(a+b+c+d+e)] \times 100 = 4,708/9,358 \times 100 = 50.3\%$	49.6%	48.0%	50.3%

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<b>Outcome C: Use of appropriate behaviors to meet their needs</b>					
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program $[(c+d)/(a+b+c+d)] \times 100 = 6,028/7,887 \times 100 = 76.4\%$	75.5%	74.5%	76.4%		
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program $[(d+e)/(a+b+c+d+e)] \times 100 = 5,315/9,353 \times 100 = 56.8\%$	56.0%	55.0%	56.8%		

<b>SUMMARY STATEMENT SCORED BY CFC</b>						
CFC	City	<b>Outcome 1</b>		<b>Outcome 2</b>		<b>Outcome 3</b>
		Summary Statement 1	Summary Statement 2	Summary Statement 1	Summary Statement 2	Summary Statement 1
1	Loves Park	61.16%	64.18%	79.61%	50.52%	77.85%
2	Waukegan	63.82%	59.82%	75.48%	53.35%	77.99%
3	Freeport	64.13%	56.30%	72.00%	48.15%	74.31%
4	Geneva	51.29%	66.22%	73.67%	52.51%	62.12%
5	Lisle	52.90%	70.27%	76.36%	56.10%	71.99%
6	Arlington Heights	64.81%	74.70%	81.97%	47.94%	80.19%
7	Hillside	78.61%	63.27%	85.75%	48.83%	83.71%
8	Chicago-S. Hoyne	72.26%	63.74%	86.05%	50.55%	81.44%
9	Chicago-W. Harrison	76.56%	64.85%	85.97%	54.44%	86.45%
10	Chicago-E. 61 <sup>st</sup> St.	55.91%	38.03%	65.40%	27.87%	63.76%
11	Chicago – W. George St.	76.74%	66.72%	82.94%	55.44%	79.57%
12	Tinley Park	70.09%	63.52%	77.54%	55.64%	77.71%
13	Monmouth	58.97%	66.51%	70.00%	51.63%	68.97%
14	Peoria	52.34%	73.91%	62.25%	59.63%	63.16%
15	Joliet	55.24%	62.52%	75.00%	53.01%	73.02%
16	Danville	63.86%	47.57%	75.26%	41.50%	73.46%
17	Quincy	65.42%	57.05%	80.85%	42.28%	81.75%
18	Springfield	66.96%	55.08%	79.21%	31.55%	74.85%
19	Decatur	79.02%	51.68%	78.85%	46.64%	78.41%
20	Effingham	65.38%	69.80%	77.73%	56.33%	77.88%
21	Belleville	67.16%	48.99%	82.48%	41.16%	78.22%
22	Centralia	76.53%	57.39%	88.18%	46.96%	85.98%
23	Norris City	71.93%	41.73%	83.74%	37.80%	77.59%
24	Carbondale	67.35%	57.14%	81.67%	46.03%	74.58%
25	Crystal Lake	53.85%	77.78%	63.00%	52.56%	68.45%
STATE SUMMARY STATEMENT		66.4%	63.1%	78.2%	50.3%	76.4%
						56.8%

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### Progress Data for Part C Children FFY10/SFY11

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of children who did not improve functioning	95	1.01%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,906	20.36%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	1,453	15.52%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	2,496	26.66%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	3,412	36.45%
<b>Total</b>	N = 9,362	100%
B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of children who did not improve functioning	62	.66%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,815	19.40%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	2,773	29.63%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	3,976	42.49%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	732	7.82%
<b>Total</b>	N = 9,358	100%
C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of children who did not improve functioning	73	.78%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,786	19.10%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	2,179	23.30%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	3,849	41.15%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	1,466	15.67%
<b>Total</b>	N = 9,353	100%

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Year	Outcome Area	Total	A	B	C	D	E
	<b>Positive Relationships</b>						
FFY09/SFY10		7,254	81	1,470	1,110	1,842	2,751
			1.12%	20.26%	15.30%	25.39%	37.92%
FFY10/SFY11		9,362	95	1,906	1,453	2,496	3,412
			1.01%	20.36%	15.52%	26.66%	36.45%
	<b>Acquire Knowledge &amp; Skills</b>						
FFY09/SFY10		7,251	59	1,465	2,128	2,961	638
			0.81%	21.20%	29.35%	40.84%	8.80%
FFY10/SFY11		9,358	62	1,815	2,773	3,976	732
			0.66%	19.40%	29.63%	42.49%	7.82%
	<b>Meet Needs</b>						
FFY09/SFY10		7,248	58	1,443	1,688	2,928	1,131
			0.80%	19.91%	23.29%	40.40%	15.60%
FFY10/SFY11		9,353	73	1,786	2,179	3,849	1,466
			0.78%	19.10%	23.30%	41.15%	15.67%

Illinois has improved compliance with program policies and procedures, leading to an increase in the number of matched entry-exit pairs, going from 59.88% in FFY09/SFY10 to 77.89% in FFY10/SFY11.

### Discussion of Improvement Activities and Explanation or Progress or Slippage that occurred during FFY10/SFY11:

**Progress or Slippage for Indicator 3:** In terms of progress or slippage, there are two areas of focus: (1) quality of data, and (2) quality of services. Illinois' data quality has improved over the last fiscal year as demonstrated by the significant increase in the number of matched entry-exit pairs. This is also evident to the EI Program based on feedback from CFC offices and providers regarding increased use of the decision tree and increased overall understanding of the Child Outcome measurement process, including use of the Child Outcome Summary Form (COSF).

Illinois continues to work to understand the relationship between the Child Outcomes ratings and the quality of EI services and supports being provided. FFY10/SFY11 Progress Data for Part C Children reveals a slight decrease (from 63.3% to 63.1%) in only the percentage of children who were functioning within age expectations with regard to their positive social-emotional skills. All other percentages and the accompanying summary statements increased. When comparing progress to the target values, the targets for children who increased their rate of growth were met for all three outcomes. The target for children who exited the program within age expectations was only not achieved for the outcome assessing the use of positive social emotional skills. The EI program, in collaboration with the IICEI, the Outcomes workgroup and other key stakeholders has considered this slippage and an explanation follows:

- *Accuracy and compliance have improved.* While the natural response to improved accuracy and compliance may be an expectation to see higher numbers, in this case, the opposite may very well be true. Nationally, state Part C programs using the ECO Child Outcome Summary have reported concerns with early intervention service coordinators and/or providers rating children higher than

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they should be. This was a concern in Illinois as well. As training has become more prolific and focused and as well as more widespread use of the decision tree, early intervention service coordinators and providers in Illinois report a better understanding of the rating process and a feeling that ratings are now more accurate than they may have been earlier in the COSF implementation process. It is felt that this is reflected primarily in summary statement 2 for positive social-emotional skills as fewer children than anticipated exited with age-expected skills. This does not appear to indicate that children are not making progress, but perhaps that original ratings (which were inflated by artificially higher ratings) were set too high.

- *ENHANCE activities.* Illinois is piloting the ENHANCE Project. Three CFCs (2, 14, and 20) were identified to participate in conjunction with the corresponding LEAs in their areas. Illinois is one of seven states that is participating in the ENHANCE project. This is a national study that is designed to look at Child Outcomes and the use of the Child Outcomes Summary as a useful tool for examining outcomes. During this fiscal year, the focus has been on identifying the children for the child assessment study. This portion of the project compares standardized assessment results to child outcomes ratings. In addition to participating in recruitment efforts, the chosen CFCs have also received several global COSF refresher webinars and individualized trainings that have been attended by a number of individuals in the Illinois programs. In the coming year, ENHANCE CFCs will begin working on an online provider survey and begin videotaping child outcomes summary discussions.

Improvement Activity	Status/Timeline/Resource
Continued training on the importance of completing the Child Outcomes Summary Form as a normal part of the IFSP and exit process.	In FFY10, training focused not only on the importance of completing the Child Outcomes Summary Form, but also addressing barriers to completing Child Outcomes and improving the quality of Child Outcomes data. Six face-to-face trainings on Child Outcomes were provided. In addition, two online modules were developed, with 451 people completing these modules.
Routine evaluation to assure there are no patterns in the instances where assessments are not being completed at entry and at exit, as required.	Three quarterly reports were provided to CFC Managers so that they could review their own data and address any concerns. This information allowed CFCs to improve local data collection.
To improve uniformity of administration, having one of the two lowest percentage of compliance with child outcomes entry-exit pairs was a factor in the CFC determination scorecard, if the percentage is below 50% of the state average effective with CY07 and each year thereafter.	This activity is ongoing.
The EI program continued to emphasize the importance of correctly filling in the child outcome ratings at each IFSP, with particular emphasis on indicating progress.	This activity is ongoing.

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The EI program reviewed the rates of compliance with rules regarding child outcomes measurement with CFCs and the Outcomes workgroup and developed strategies to assure uniformity of administration.	This activity is ongoing. The Outcomes workgroup has also suggested reviewing the data by area to determine if there are areas that could benefit from targeted training around Child Outcomes.
The EI program reviewed aggregated child outcomes results, discussed the results, and made initial plans for activities to improve data.	This activity is ongoing.
During FFY10/SFY11, the EI program worked with the Outcomes workgroup to develop goals to examine and improve child outcomes.	This activity is in progress. The Outcomes workgroup reviewed additional analyses to better understand the relationships between certain demographic variables and child outcomes ratings. Earlier discussions focused on assuring reliability and validity of the data. To this end, Illinois is participating in the ENHANCE Project, which is working in multiple states to determine the reliability and validity of the child outcomes measurement process using the ECO COS. Additionally, Illinois created a System Ombudsman position, whose role it is to improve compliance with program rules and principles and, in turn, facilitate better outcomes for children.
The EI program will continue to work with contractors and stakeholders to educate the public on the early results of child outcome measurement and why it is important, with the help of the Outcomes workgroup, which began meeting quarterly in December 2009.	The Child and Family Outcomes workgroup met quarterly to assist the State in developing strategies for disseminating information regarding the Child and Family Outcomes measurement processes, improving those processes, assuring reliability and validity of outcomes data and improving performance. Notices were put in the EI Clearinghouse and the Training Program newsletters regarding the family outcomes survey.
By the end of FFY10/SFY11, the EI program will implement specific goals to improve child outcomes.	The EI program continued to work with the IICEI, the Outcomes workgroup, and the ENHANCE Project on this activity. The Training Program will incorporate child outcomes information in all future Institutes that are offered and will develop the third typical child development online module.
The System Ombudsman began in February 2010 to improve compliance with program rules and principles. Better compliance with principles will result in better outcomes for children.	The System Ombudsman continued to actively work toward this effort.

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By December 31, 2011, the IICEI will create a workgroup to investigate the correlation, if any, between low family outcomes reported in a prior year by Spanish-speaking families and the child outcome ratings for children in Spanish-speaking households.	Due to a number of emergent priorities in the State, it was determined that this improvement activity would need to be delayed. Further, it is felt that additional information about outcomes for Hispanic children must be obtained before this activity can be fully implemented. The IICEI will be presented with family outcomes information and ideas for improving outcomes will be solicited from this group.
The EI program will add two Child Outcomes measurement modules to the Systems Overview training which is currently required of all new service providers. This improvement activity will target both the quality of Illinois' Child Outcomes data as well as the quality of services designed to improve children's outcomes.	This activity has been completed.
Utilizing a multifaceted approach to training and support related to the Child Outcomes measurement process, the EI program will develop an online training module in order to improve access to information about the Child Outcomes measurement process.	An additional online training module has been developed and will be shared at the ECO conference.
The EI program will begin analyzing Child Outcome data by race/ethnicity and comparing these data to Family Outcome data. This improvement activity will primarily target the quality of services designed to improve children's outcomes	An analysis of Child Outcomes data by race, ethnicity, time in service, medical diagnosis, and degree of delay was presented to the Outcomes workgroup in May, 2011. An analysis of relationships between child and family outcomes will be completed using FFY10/FFY11 data.

### Other improvement activities:

- Systems overview training has been expanded to include additional information about child outcomes. An online module discussing typical child development in regard to acquisition of knowledge and skills was developed.
- The Foundational Institute offered by the Training Program also included information about the importance of child outcomes.

### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11:**

The improvement activities described in the SPP are ongoing efforts. The following are new improvement activities to be implemented through FFY12/SFY13.

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New Improvement Activities	Timelines & Resources
Training opportunities and supports will be developed and implemented to improve the quality of child outcomes data, increase the understanding of the Child Outcome measurement process, and build best practice skills.	<p>By June 30, 2012, a module on typical development which addresses young children's efforts to meet their needs will be developed.</p> <p>By March 31, 2012, a Systems Overview Refresher Course will be developed to provide updates to providers and service coordinators on system changes and improvements, including Child Outcomes.</p> <p>By July 15, 2011, the EI Training program will offer a post-training team discussion, mentoring and support to better ensure generalization of skills and consistency of practice.</p> <p>Resources include the EI Training Program and the Bureau of EI.</p>
Data will be reviewed to identify CFC office areas that are having more difficulty with child outcomes and targeted training/technical assistance will be provided to improve performance.	<p>Data will be shared by December 31, 2011 and findings shared with the Outcomes workgroup at its January meeting. By June 30 2012, targeted training/technical assistance will be offered to selected CFC offices.</p> <p>Resources include the Outcomes workgroup, the EI Training Program and the Bureau of EI.</p>
CFC offices will share information to improve compliance and accuracy in completing child outcomes.	<p>By June 30, 2012, CFC offices that have high compliance and accuracy completing child outcomes will be identified. During a CFC Managers' meeting, program managers of high performing CFC offices will be asked to share their strategies.</p> <p>Resources include the EI Training Program and the Bureaus of EI and Performance Support Services.</p>

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### Overview of the Annual Performance Report Development: See Indicator 1.

#### Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator 4:** Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 USC 1416(a)(3)(A) and 1442)

#### Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

#### Target Data and Actual Target Data for FFY10/SFY11:

Target Data and Actual Data	FFY10/SFY11 Target	FFY10/SFY11 Positive Family Responses (adjusted)	
A. Know their rights	78.0%	(1,556.44/2,295) X100	67.82%
B. Effectively communicate their children's needs	85.8%	(1,755.80/2,295) X100	76.51%
C. Help their children develop and learn	85.0%	(1,705.50/2,295) X100	74.31%

Illinois utilized the revised version of the Family Outcomes Survey (FOS-R) again this year. The FOS-R uses a 5-point rating scale (versus a 7-point scale used in previous versions) to assess the helpfulness of early intervention, ranging from 1 = Not at all to 5 = extremely helpful. The FOS-R contains 17 helpfulness indicators (5 for "Know their rights"; 6 for "Effectively communicate their children's needs; and 6 for "Help their children develop and learn") as opposed to just the three questions on the original FOS. These additional indicators were added to collect more informative and valid data than what have been collected with the previous version of the FOS.

Since the FOS-R contains more than one item for each of the OSEP helpfulness indicators, Illinois has calculated a mean score for each indicator for each family. Families who meet the criteria for each indicator (i.e., mean value  $\geq 4$  on associated items for each indicator) are divided by the total number of families who completed the survey and then that number is then multiplied by 100 to get the percentage of families who meet the criteria for each indicator.

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For the third consecutive year, Illinois used an all mail survey in an effort to utilize a more representative group of families. The net return rate of about 16.72% was lower than the 20.91% of last year. Weighting to make the results better reflect the state's geographic caseload decreased the proportion of scores of 4 or over by 0.68% for "knowing rights", by 0.66% for "effectively communicating" and 0.33% for "helping your child develop and learn." While it is generally agreed that the all mail approach is best for Illinois, the program will continue to work with the Outcomes workgroup on ways to improve race, ethnic and geographical representativeness as well as overall return rates.

This year, more surveys were distributed and returned. All families who had been in the system for at least six months as of June 30, 2010, were mailed a survey. In total, 13,719 surveys were mailed and 2,295 surveys were returned, resulting in a return rate of 16.72%.

In order to determine the representativeness of the responses, two areas were examined. The first area examined was representativeness based on race and ethnicity. The second area examined was geographic representativeness. As illustrated in the table below, the percent of surveys returned separated by race and ethnicity somewhat mirrors the percents distributed. The largest discrepancy was observed between Black/African American and White returns. In this regard, Black/African American families' responses are under-represented compared to the system as a whole and White families' responses are over-represented compared to the whole. While the response rate increased for Hispanic families, it still slightly under-represents the number of Hispanic families in the whole system. As a result, non-Hispanic families are slightly over-represented. As the number of families surveyed continues to increase, it is assumed that the returns will more closely approximate the demographic makeup of the system.

Race	Sent	% Sent	Returned	Return Rate	% of Total Returns
American Indian/Alaska Native	5	.01%	2	40.00%	.10%
Asian	365	2.60%	66	18.08%	2.80%
Black or African American	2,162	15.70%	258	11.93%	10.90%
White	9,830	71.30%	1,871	19.03%	78.90%
Other	1,416	10.30%	173	12.21%	7.30%
Ethnicity	Sent	% Sent	Returned	Return Rate	% of Total Returns
Hispanic	3,824	27.70%	526	13.76%	22.20%
Non-Hispanic	9,954	72.20%	1,874	18.83%	77.80%

There continue to be disparities in the number of surveys returned by each CFC. This year, no CFC had a return rate of less than 10% even though the statewide return rate was lower. It is expected that the percent returned may continue to decrease as a result of increasing the overall number of surveys delivered while the overall number of families returning surveys will increase. As detailed in the adjusted response tables above, the returns for Chicago differ substantially from the system totals.

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To what extent has early intervention helped your family know and understand your rights?					
	Chicago	Suburban Cook	Collar Counties	Downstate	Illinois Total
<b>Raw Totals</b>					
Distributed	3,259	2,720	4,026	3,714	<b>13719</b>
Mean Returns/Responses	456	462	737	640	<b>2295</b>
Mean Return Rate/ Responses	13.99%	16.99%	18.31%	17.23%	<b>16.73%</b>
Mean Responses 4 or Higher	286	320	517	447	<b>1572</b>
% 4 or Higher	62.72%	69.26%	70.15%	69.84%	<b>68.50%</b>
Mean Average Response	3.95	4.13	4.18	4.20	<b>4.13</b>
Statewide Return %	19.87%	20.13%	32.11%	27.89%	<b>100%</b>
<b>Totals Adjusted for Geography</b>					
Avg. IFSP in Period	5,207	3,776	4,558	5,182	<b>18,723</b>
Caseload %	27.81%	20.17%	24.35%	27.68%	<b>100%</b>
Adjusted Returns	638	463	559	635	<b>2,295</b>
Adjusted Responses 4 or Higher	400.15	320.67	392.14	443.48	<b>1,556.44</b>
% 4 or Higher	62.72%	69.26%	70.15%	69.84%	<b>67.82%</b>
Average Response	3.95	4.13	4.18	4.20	<b>4.13</b>

To what extent has early intervention helped your family effectively communicate your child's needs?					
	Chicago	Suburban Cook	Collar Counties	Downstate	Illinois Total
<b>Raw Totals</b>					
Distributed	3,259	2,720	4,026	3,714	<b>13,719</b>
Mean Returns/Responses	456	462	737	640	<b>2295</b>
Mean Return Rate/Responses	13.99%	16.99%	18.31%	17.23%	<b>16.73%</b>
Mean Responses 4 or Higher	321	359	580	511	<b>1771</b>
% 4 or Higher	70.39%	77.71%	78.70%	79.84%	<b>77.17%</b>
Average Response	4.14	4.28	4.34	4.37	<b>4.29</b>
Statewide Return %	19.87%	20.13%	32.11%	27.89%	<b>100%</b>
<b>Totals Adjusted for Geography</b>					
Avg. IFSP in Period	5207	3776	4558	5182	<b>18,723</b>
Caseload %	27.81%	20.17%	24.35%	27.68%	<b>100%</b>
Adjusted Returns	638	463	559	635	<b>2,295</b>
Responses 4 or Higher	449.09	359.80	439.93	506.98	<b>1,755.8</b>
% 4 or Higher	70.39%	77.71%	78.70%	79.84%	<b>76.51%</b>
Average Response	4.14	4.28	4.34	4.37	<b>4.29</b>

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Illinois

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To what extent has early intervention helped your family be able to help your child develop and learn?					
	Chicago	Suburban Cook	Collar Counties	Downstate	Illinois Total
<b>Raw Totals</b>					
Distributed	3,259	2,720	4,026	3,714	<b>13,719</b>
Mean Returns/Responses	456	462	737	640	<b>2295</b>
Mean Return Rate/Responses	13.99%	16.99%	18.31%	17.23%	<b>16.73%</b>
Mean Responses 4 or Higher	324	349	558	483	<b>1714</b>
% 4 or Higher	71.05%	75.54%	75.71%	75.47%	<b>74.64%</b>
Average Response	4.14	4.27	4.28	4.29	<b>4.26</b>
Statewide Return %	19.87%	20.13%	32.11%	27.89%	<b>100%</b>
<b>Totals Adjusted for Geography</b>					
Avg. IFSP in Period	5,207	3,776	4,558	5182	<b>18,723</b>
Caseload %	27.81%	20.17%	24.35%	27.68%	<b>100%</b>
Adjusted Returns	638	463	559	635	<b>2295</b>
Responses 4 or Higher	453.3	349.75	423.22	479.23	<b>1705.5</b>
% 4 or Higher	71.05%	75.54%	75.71%	75.47%	<b>74.31%</b>
Average Response	4.14	4.27	4.28	4.29	<b>4.26</b>

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FFY10/SFY11 Family Outcome Survey Results Return Rates & Unweighted Results by CFC									
CFC	Surveys	Returns	Return Rate	Know Rights		Communicate Child Needs		Help Child Develop & Learn	
				%Scores 4 or >	Mean Score	%Scores 4 or >	Mean Score	%Scores 4 or >	Mean Score
#1 - ROCKFORD	550	89	16.18%	74.16	4.21	83.15	4.40	78.65	4.34
#2 - LAKE Co.	710	131	18.45%	74.05	4.24	80.15	4.38	77.86	4.32
#3 - FREEPORT	183	28	15.30%	57.14	3.91	71.42	4.08	60.17	3.93
#4 - KANE-KENDALL Co.	841	130	15.46%	64.62	4.12	75.38	4.25	71.32	4.20
#5- DuPAGE Co.	940	174	18.51%	73.56	4.24	81.03	4.39	75.86	4.34
#6 - N SUBURBS	869	176	20.25%	68.75	4.10	74.43	4.25	75.43	4.26
#7 - W SUBURBS	905	143	15.80%	72.03	4.19	82.52	4.32	77.62	4.28
#8 - SW CHICAGO	626	74	11.82%	64.86	3.98	79.93	4.27	72.97	4.24
#9 -CENTRAL CHICAGO	864	122	14.12%	66.39	3.94	70.49	4.04	68.03	4.02
#10 - SE CHICAGO	561	67	11.94%	68.66	4.08	70.14	4.23	73.13	4.16
#11 - N CHICAGO	1,208	193	15.98%	59.59	3.89	66.84	4.12	71.35	4.18
#12 - S SUBURBS	946	143	15.12%	67.13	4.09	76.92	4.29	73.43	4.29
#13 - MACOMB	288	52	18.06%	65.38	4.14	82.69	4.42	73.08	4.33
#14 - PEORIA	200	22	11.00%	72.73	4.39	81.82	4.61	90.17	4.65
#15 - JOLIET	1,180	237	20.08%	68.35	4.13	79.66	4.35	77.12	4.26
#16 - BLOOMINGTON	336	61	18.15%	73.77	4.33	90.16	4.56	88.52	4.65
#17 - QUINCY	201	34	17.01%	73.53	4.26	88.24	4.44	67.65	4.27
#18 - SPRINGFIELD	284	51	17.96%	80.39	4.36	78.43	4.42	72.55	4.24
#19 - DECATUR	215	45	20.93%	62.22	4.20	77.78	4.30	71.11	4.14
#20 - EFFINGHAM	317	50	15.77%	66.00	4.12	70.00	4.24	64.00	4.03
#21 - BELLEVILLE	610	118	19.34%	65.25	4.13	77.19	4.34	77.12	4.31
#22 - CENTRALIA	237	32	13.50%	71.88	4.25	78.13	4.36	68.75	4.30
#23 - NORRIS CITY	194	38	19.59%	76.32	4.20	81.58	4.28	83.78	4.32
#24 - CARBONDALE	99	20	20.20%	60.00	4.00	70.00	4.18	75.00	4.10
#25 - MCHENRY Co.	355	65	18.31%	66.01	4.14	72.73	4.32	74.24	4.33
CHICAGO	3260	456	13.99%	62.72	3.99	70.39	4.14	71.05	4.14
SUBURBS	2719	462	16.99%	69.26	4.13	77.71	4.28	75.54	4.27
COLLAR COUNTIES	4026	737	18.31%	70.15	4.18	78.70	4.34	75.71	4.28
DOWNSTATE	3714	640	17.23%	69.84	4.20	79.84	4.37	75.47	4.29
STATEWIDE	13,719	2,295	16.72%	68.50	4.13	77.17	4.29	74.64%	4.26

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:

**Progress or Slippage for Indicator 4:** The percentage of families that indicated a positive response decreased from last year for all three indicators and target values were not met. This decrease is believed to be due to the new method for calculating positive responses. The method was changed to be more in line with the recommendations of the ECO Center. To better understand the reason behind the significant decrease in the percentages, last year's data were recalculated using the same approach as was used for this year. This is reflected in the chart below, which show the data as submitted in the FFY09/SFY10 APR, the data adjusted using the new methodology, and the

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FFY10/SFY11 results. This was done to determine if the decrease was related to actual changes in early intervention families' experiences or was related to the difference in the calculation method. The table below illustrates the results. When using the same method to calculate last year's and this year's results, only minor changes were noted. This suggests that the substantial decreases are more likely the result of calculation differences rather than actual differences in family experiences.

Survey Results	FFY09/SFY10 Original Submission	FFY09/SFY10 Results adjusted using new methodology	FFY10/ SFY11 Results
To what extent has early intervention helped your family know and understand your rights?	78.6%	66.9%	67.82%
To what extent has early intervention helped your family effectively communicate your child's needs?	85.6%	77.75%	76.51%
To what extent has early intervention helped your family be able to help your child develop and learn?	83.3%	73.58%	74.31%

Changing the format of the survey and, consequently, the method for calculating a positive response (mean versus single question) after targets had been determined is believed to be impacting whether or not targets are met. The information that was originally used as a baseline and that helped us determine our targets may no longer be directly applicable to the tool and process being utilized. The revised survey, with the additional items, is more reflective of a family's experience and will provide more valid data than what could be collected from the previous version of the FOS which only contained one question about each area. Ultimately, this more informative data will help us better guide and train providers to make program improvements that will directly impact these indicators for families. It may, however, make reaching targets that were set using a different survey difficult.

The use of the revised survey for the last two years has directly contributed to not meeting our targets for the three subparts of this indicator. When comparing the results from the last two years, where the same survey and calculation method were utilized, improvements are seen in two of the three areas. With the use of a consistent survey, a consistent method of calculating positive responses, and a full census survey, baseline and target data will need to be re-examined, but the results will likely become more informative.

Local/CFC level data continue to illuminate the differential return rate problem. Weighting the four large regions helps adjust for this, but there are also disparities within those larger regions. This differential return rate causes concern beyond just geographic disparities as lower return rates in Chicago and its suburbs impacts the racial, ethnic, linguistic, and economic diversity represented in the returns. For this report year, families were selected differently than in the past. All families that had been in the program for at least six months as of June 30, 2010, were sent a survey. All surveys were mailed from a central program office.

As was the case last year, the program focused on taking steps that would improve outcomes for families. In many instances, a single item within one of the three areas (i.e., "giving you useful information about available options when your child leaves the program" within the knowing your rights area and "connecting you with other services or people who can help your child and family" within the communication area) that comprise the indicator pulled the overall mean for an area down. In examining reasons behind why we may not be achieving desired results with family outcomes three concerns come to mind.

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- Surveying a larger group of families (as was done this year) allowed inclusion of families who have been in the system for varying lengths of time. Although this is similar to other years, the percentage of families who have been in the system a shorter period of time may be greater, thereby limiting the impact of system participation.
- Concerns over the approach to services have been discussed in a number of statewide workgroups. It is felt that more of a focus on traditional, medical model service delivery may be negatively impacting families' abilities to achieve the identified family outcomes. As a result, training materials have been modified to incorporate more family-centered practices and a workgroup to examine service delivery approaches has been created.
- The state of Illinois has also experienced budgetary difficulties in the last year. Due to these constraints, a number of community-based programs have been reduced or eliminated. As a result, the options available for families when their children turn three may have changed. This may be impacting how families think about how prepared they are for what comes after early intervention.

Improvement Activity	Status, Timeline/Resource
The Outcomes workgroup will develop a guidance document to help CFCs report the local results of the FOS to the community. Based on what is learned from the survey data statewide and locally, providers and programs will have an opportunity to reflect on the data and may choose to make changes or adjustments in their practice with families to see an improvement in family outcomes and/or individual indicators.	This was completed in FFY10/SFY11. A guidance document was shared with the Outcomes workgroup after the May meeting. The guidance document will accompany each CFC office's results. Resources included the EI Training Program, the Bureau of EI, and the Outcomes workgroup.
The Illinois EI Training Program will imbed training on the FOS indicators in both their online training modules and as a part of face-to-face training opportunities for providers. The intent of this training will be to highlight the importance of what is asked of families as a part of the FOS, and to highlight how data from the FOS can help states see how their families are doing, identify any areas in need of improvement, and then, after program adjustments, assess the impact of those changes—with the goal of moving to ever higher percentages of families reporting outcomes attained.	This was completed in FFY10/SFY11 and will continue as an ongoing activity. An online module about the family outcomes survey was developed and published by 6/30/11. Resources included EI Training Program and the Bureau of EI.
The IICEI will create a workgroup to study issues related to Hispanic families. This workgroup will recommend program changes that will have a positive impact on the way Hispanic families experience the program and thus their outcomes. The focus of this group will be expanded to include African American families.	The creation of this workgroup was delayed. Family outcomes survey results will be shared with the broader Council to solicit potential strategies to improve minority families' experiences with the early intervention system. Resources included the IICEI, the EI Training Program, and the Bureau of EI.

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Illinois will discontinue the use of mailing to a sampling of families participating in the program. All families enrolled in the program at a given point in time will be sent a Family Outcomes Survey.	This was initiated in FFY10/SFY11 and will continue as an ongoing activity. This year, 13,719 surveys were mailed to families. This included all families who were in the system for at least six months as of a certain date. In FFY11/SFY12, all families who have children in the system on a given date will be surveyed. Resources included the EI Training Program and the Bureau of EI.
An online survey will be developed as an option for families to complete the Family Outcomes Survey. The online option will be available in both English and Spanish. The online option will not replace the paper version of the FOS. It is the hope that by offering an online option for FOS completion, Illinois will see an increase in the overall return rate.	The English version of the survey was available this year online, with 154 families completing the online version. The English version will remain as an option in future years and the Spanish version will be created in FFY11/SFY12. Resources included the EI Training Program and the Bureau of EI.
To increase the return rate for African American and Hispanic families surveyed statewide and for all families' surveyed living in the City of Chicago, targeted phone calls will be made to families who have not returned a completed survey two weeks following the distribution of the surveys. Phone calls will be made by the EI Training Program staff and will be done for both English and Spanish speaking families. Families will be given the option to complete the survey over the phone at the time of the phone call.	This was not completed in FFY10/SFY11 due to time and financial constraints, but it will remain as an ongoing activity. Resources included the EI Training Program.
The Illinois EI Training Program will develop a specific online training module for providers focused on cultural competency with the goal of increasing the percentage of African American and Hispanic Families reporting outcomes attained.	This was completed in FFY10/SFY11. In addition, three face-to-face trainings that expanded on the online modules were offered as well. Resources included the EI Training Program and the Bureau of EI.
The EI Clearinghouse will develop materials for distribution to families and update information on its website to help ensure that families are well informed of their rights.	This work began in FFY10/SFY11 and will continue as an ongoing activity. The EI Clearinghouse has supported efforts to ensure that Illinois families participating in EI have access to up-to-date information and are well informed about how to resolve concerns or complaints that involve their EI services. To that end the EI Clearinghouse has provided additional online and library (i.e., books and videos) resources for Illinois families. In addition, it authored updates/revisions to the Illinois EI brochure for families and the family guide book. It also published newsletters/fact

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	sheets on family rights, including procedural safeguards and transition, and added additional resource guides. Spanish translation of EI forms have been developed and posted on the EI Clearinghouse website for use by CFC offices and families. Resources included the EI Clearinghouse, the Bureau of EI, and CFC offices.
Graduate student research on issues that may impact family outcomes will be approved and the resulting information considered for future improvement activities.	This work did not begin due to the graduate student choosing another area of study, but Illinois is working with the ECO center to develop a framework for measuring family outcomes and experiences. It is believed that this framework will help identify future improvement activities. Resources include the Bureau of EI and Illinois graduate programs who contact the program for support and approval of research topics.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11:** The improvement activities described in the SPP are ongoing efforts.

The following are new improvement activities to be implemented through FFY12/SFY13

New Improvement Activities	Timelines & Resources
Incorporate information about practices that support child and family outcomes in all of the linked trainings offered by the Training Program.	By July 1, 2011, the EI Training Program will include this information in all offered Institute trainings. Resources include the EI Training Program and the Bureau of EI.
Work with ECO staff and the Outcomes workgroup to develop a plan for data analysis and its use in identifying improvement activities.	By December 31, 2012, a planning process will be completed. Resources include the EI Training Program and the Bureau of EI.

## APR Template – Part C (4)

Illinois  
State

**Overview of the Annual Performance Report Development:**  
**See Indicator 1.**

### **Monitoring Priority: Effective General Supervision Part C / Child Find**

**Indicator 5:** Percent of infants and toddlers birth to 1 with IFSPs compared to national data.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

#### **Measurement:**

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to national data.

FFY	Measurable and Rigorous Target
FFY10/SFY11	The percentage of all children in Illinois under age 1 served through an IFSP will be at least 1.08%, approximately 1,956 children.

#### **Actual Target Data for FFY10/SFY11:**

##### **Indicator 5**

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100

FFY10/SFY11 Result: Based on October 31, 2010 data  $(1,970/181,132) \times 100 = 1.09\%$

FFY10/SFY11 Target: 1.08%

FFY10/SFY11 National Ranking: 22 out of all states and D.C. (and Puerto Rico)

Based on October 31, 2010 data, Illinois reported 1,970 children under 1 had active IFSPs, equal to a 1.09% participation rate. This represents a slight increase from the 1.08% reported for October 31, 2009, and exceeds the FFY10/SF11 target of 1.08%. Illinois does perform above the national percentage of 1.03%. Illinois continues to hold at a ranking of 22 among the 50 states D.C (and Puerto Rico).

The following chart provides statewide, regional, and CFC office participation rate histories. The participation rates are based upon October 31, 2010 data, with the census estimates used for the population of infants and toddlers birth to 1. For previous years, the participation rates were calculated using birth data rather than census estimates. Birth data for Illinois infants that are born in bordering states are no longer available to the program.

## APR Template – Part C (4)

Illinois  
State

Participation Rate Under 1 History by CFC & Region				
CFC # & Area	October			Rank
	SFY09	SFY10	SFY11	
#1 ROCKFORD	1.22%	1.07%	0.94%	15
#2 Lake Co.	0.84%	0.78%	0.89%	19
#3 FREEPORT	0.92%	1.21%	1.19%	12
#4 Kane & Kendall Co.	0.88%	0.68%	0.94%	15
#5 DuPage Co.	0.87%	0.87%	0.93%	18
#6 N Suburbs	1.41%	1.20%	1.36%	5
#7 W Suburbs	1.07%	1.23%	1.22%	11
#8 SW Chicago	1.35%	1.22%	1.29%	7
#9 Central Chicago	1.45%	1.24%	1.16%	13
#10 SE Chicago	1.39%	1.25%	1.38%	4
#11 N Chicago	1.18%	1.10%	1.24%	9
#12 S Suburbs	1.38%	1.17%	0.97%	14
#13 MONMOUTH	1.11%	0.96%	0.73%	23
#14 PEORIA	0.92%	0.94%	0.70%	25
#15 Joliet	0.85%	0.89%	0.77%	22
#16 DANVILLE	1.17%	0.84%	1.40%	3
#17 QUINCY	1.66%	1.61%	1.24%	9
#18 SPRINGFIELD	0.82%	1.13%	0.86%	21
#19 DECATUR	1.39%	1.10%	1.28%	8
#20 EFFINGHAM	2.12%	1.53%	1.76%	2
#21 BELLEVILLE	0.85%	0.76%	0.88%	20
#22 CENTRALIA	1.08%	0.97%	1.36%	5
#23 NORRIS CITY	2.05%	1.47%	1.97%	1
#24 CARBONDALE	0.81%	0.96%	0.72%	24
#25 McHenry Co.	0.81%	0.68%	0.94%	15
<b>Statewide</b>	1.14%	1.08%	1.09%	
<b>Cook (6-12)</b>	1.31%	1.18%	1.23%	
<b>Collar Counties (2,4,5,15,25)</b>	0.89%	0.80%	0.88%	
<b>Downstate (All Others)</b>	1.15%	1.03%	1.08%	

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09/SFY10:**

**Progress/Slippage for Indicator 5:** The October 31, 2010 under 1 participation rate of 1.09% is higher than the October 31, 2009 participation rate of 1.08%, and does exceed the FFY10/SF11 target of 1.08%. Illinois continues to rank 22 out of the 50 states as well as DC and Puerto Rico. Further, Illinois continues to perform above the national median percentage of 1.03%. Additionally, 13 CFC offices continue to have participation rates above the national percentage. Fourteen CFC offices have increased under 1 participation rates from the previous year.

## APR Template – Part C (4)

Illinois  
State

For this year, all regional data for Cook County CFC offices, Collar County CFC offices, and the remaining CFC offices outside of Cook County show a downward trend. Partial responsibility for this continued decline in under 1 participation rate can be attributed to continuing economic stresses causing families to reconsider participation in EI services.

Improvement Activity	Status/Timeline/Resource
The Adverse Pregnancy Outcomes Reporting System (APORS) referral process will be reviewed to ensure that it has been successfully implemented.	In August 2010, all CFC offices were asked to complete a survey of the APORS referral process. Survey results were shared and discussed with CFC managers at the October 4, 2011 CFC Manager's meeting. Resources include APORS, the Bureau of EI, and the CFC offices.
Continue participation in Assuring Better Child Health and Development (ABCD) III, Illinois Healthy Beginning II (IHB2) project, including CFC office participation in pilot project activities and data sharing between the HFS and the IL Department of Human Services/EI.	The IHB2 Status report for January – May 2011 states the following: "IHB2 hosted a first round of learning collaboratives to better engage medical homes, EI, and [community service providers} (CSP) and foster dialogue between these three affinity groups. The initial round of these learning collaborative yielded valuable information in terms of assessing the factors currently obstructing improved collaboration and how they might be overcome through the duration of the project." This first learning collaborative also established the foundation for the pilot sites to begin the referral communication feedback loop. The pilot sites will begin the process during May 2011. Future learning collaborative and affinity group meetings will be held during the summer to assess progress in the screening, referral and feedback process and to adjust, as needed, with information gleaned through the Plan Do Study Act(PDSA) process."  Bureau staff will continue to participate in the ABCD III, IHB2 project including CFC office participation in pilot project activities and data sharing between the HFS and the IL Department of Human Services/EI.  Resources include HFS and its IHB2 Project Management Committee and subcommittees, Bureau of EI, and CFC offices.
Continued participation in Children's Health Insurance Program Reauthorization Act (CHIPRA) Child Health Quality Demonstration Grant.	The Bureau continued participation in workgroups and will continue to assist in the development and implementation of strategies throughout the grant period (i.e., 2015). Resources include HFS and its CHIPRA Child Health Quality Demonstration Grant workgroups, Bureau of EI, and CFC offices.
Continue participation in Enhancing	Bureau and EI Training Program staff continued

## APR Template – Part C (4)

Illinois

State

Developmentally Oriented Primary Care (EDOPC) initiative.	<p>participation in the EDOPC advisory group and CFC offices participated in pilot project activities.</p> <p>The Intact Screening Program became fully operational in October 2010. The Illinois Department of Child and Family Services (DCFS) hired eight developmental screeners, two in each of the four regions (Cook County, Central, Southern and Northern regions). A procedure was developed, by which information for all new intact cases with children 0-3 is communicated to the project in order to initiate case referrals for developmental screenings. Orientation and initial training for all developmental screeners were completed and numerous meetings and trainings with Intact Family Services staff were conducted. As a result of these efforts, the program conducted 322 screenings of children and their biological parents during fiscal year 2011, resulting in 112 referrals to EI.</p> <p>Resources include the Advocate Health Care Steps Program, Illinois Chapter, American Academy of Pediatrics, Bureau of EI, EI Training Program, and CFC offices.</p>
Utilize Program Integrity pilot project efforts to identify barriers to participation of infants in the program and develop strategies that can be shared with other CFC offices.	A CFC office with low under 1 participation was chosen as a pilot project in FFY10/SFY11. Data were reviewed to identify challenges and strategies were identified. The primary strategy for the pilot project involved sharing resources about: other states' efforts to improve under 1 participation, a checklist for identifying potentially eligible infants, other states' efforts to reach underserved populations, improving outreach to primary referral sources, sustaining referral efforts, and tailoring effective messages to referral sources. Another improvement strategy was meeting with service coordinators to see if additional barriers to under 1 participation could be identified and discussion of options for addressing these barriers. This meeting occurred on 6/21/11.

### Other improvement activities:

- In an effort to update and improve public information for parents, a new Illinois Early Intervention Services brochure was released in the fall of 2010 and a new "Early Intervention in Illinois: A Guide for Families" book was released in the spring of 2011. Both were written by the IL Early Intervention Clearinghouse. Input was received from the Bureau, parent liaisons, and service coordinators. The brochure and family guide book replace outdated material and provide a more family friendly, informative public awareness pieces to support child find efforts.
- The Intact Screening Program became fully operational in October 2010. The Illinois Department of Child and Family Services (DCFS) hired eight developmental screeners, two in each of the four regions (Cook County, Central, Southern and Northern regions). A procedure was developed, by

## APR Template – Part C (4)

Illinois  
State

which information for all new intact cases with children 0-3 is communicated to the project in order to initiate case referrals for developmental screenings. Orientation and initial training for all developmental screeners were completed and numerous meetings and trainings with Intact Family Services staff were conducted. As a result of these efforts, the program conducted 322 screenings of children and their biological parents during fiscal year 2011, resulting in 112 referrals to EI.

### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11 (if applicable):**

New Improvement Activity	Timelines & Resources
Determine if other CFC offices would benefit from strategies and training materials developed in conjunction with the Program Integrity pilot project targeting natural environments.	By June 20, 2012, materials from the Program Integrity pilot project targeting under 1 participation will be evaluated and distribute to CFC offices with TA/training support, when needed. Resources include the Bureau of EI, the EI Ombudsman, and the EI Training Program.
An interagency agreement will be developed between the IL Department of Public Health (IDPH) and the IL Department of Human Services (IDHS) to facilitate referrals from the APORS.	By June 30, 2012, an interagency agreement between IDPH and IDHS will be implemented.

## APR Template – Part C (4)

Illinois  
State

**Overview of the Annual Performance Report Development:**  
**See Indicator 1.**

### **Monitoring Priority: Effective General Supervision Part C / Child Find**

**Indicator 6:** Percent of infants and toddlers birth to 3 with IFSPs compared to national data.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:**

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data.

FFY	Measurable and Rigorous Target
FFY10/SFY11	The percentage of children in Illinois under age 3 served through an IFSP will be at least 3.37%, approximately 18,383 children.

**Actual Target Data for FFY10/SFY11:**

**Indicator 6**

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data.

**FFY10/SFY11 Result (based on October 31, 2010 data): (18,603/545,486) X 100= 3.41%**

**FFY10/SFY11 Target: 3.37%**

**FFY10/SFY11 National Ranking: 17among all states and D.C (and Puerto Rico)**

Based on October 31, 2010, Illinois reported 18,603 children under 3 had active IFSPs, equal to a 3.41% participation rate. This represents an increase over the October 31, 2009 participation rate of 3.38%, as well as exceeds the FFY10/SFY11 target value of 3.37%. For FFY09/SFY10 Illinois was ranked 17<sup>th</sup> among all states and D.C. (including Puerto Rico).

The following chart provides statewide, regional, and CFC office participation rate histories. The participation rates are based upon October 31, 2010 data, with the census estimates used for the population of infants and toddlers birth to 3. For previous years, the participation rates were calculated using birth data rather than census estimates. Birth data for Illinois infants that are born in bordering states are no longer available to the program.

## APR Template – Part C (4)

Illinois  
State

Participation Rate Under 3 History by CFC & Region				
CFC # & Area	October			Rank
	SFY09	SFY10	SFY11	
#1 ROCKFORD	3.78%	3.29%	3.22%	16
#2 Lake Co.	2.89%	2.59%	2.73%	22
#3 FREEPORT	3.29%	3.66%	2.42%	25
#4 Kane & Kendall Co.	2.92%	2.72%	2.67%	24
#5 DuPage Co.	3.20%	3.36%	3.48%	11
#6 N Suburbs	4.09%	3.99%	4.01%	6
#7 W Suburbs	4.05%	4.05%	4.17%	4
#8 SW Chicago	3.30%	3.22%	4.75%	2
#9 Central Chicago	3.89%	3.65%	3.60%	10
#10 SE Chicago	3.52%	3.23%	3.42%	12
#11 N Chicago	3.50%	3.81%	3.69%	8
#12 S Suburbs	3.63%	3.48%	3.35%	14
#13 MONMOUTH	3.14%	2.91%	2.77%	21
#14 PEORIA	3.70%	3.17%	3.01%	20
#15 Joliet	3.38%	3.40%	3.32%	15
#16 DANVILLE	3.42%	3.17%	3.11%	18
#17 QUINCY	3.96%	3.50%	4.23%	3
#18 SPRINGFIELD	3.51%	3.68%	3.15%	17
#19 DECATUR	3.68%	3.65%	3.62%	9
#20 EFFINGHAM	4.54%	4.16%	3.91%	7
#21 BELLEVILLE	2.77%	2.75%	2.68%	23
#22 CENTRALIA	3.97%	4.05%	4.17%	4
#23 NORRIS CITY	7.38%	7.09%	6.19%	1
#24 CARBONDALE	3.34%	3.38%	3.36%	13
#25 McHenry Co.	3.65%	3.14%	3.05%	19
<b>Statewide</b>	3.52%	3.38%	3.41%	
<b>Cook (6-12)</b>	3.71%	3.68%	3.72%	
<b>Collar Counties (2,4,5,15,25)</b>	3.17%	3.07%	3.06%	
<b>Downstate (All Others)</b>	3.58%	3.40%	3.31%	

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09/SFY10:

**Progress/Slippage for Indicator 6:** The October 31, 2010 under 3 participation rate of 3.41% is an increase over the October 31, 2009 participation rate of 3.38%, and exceeds the FFY10/SF11 target of 3.37%. Illinois has fallen from a ranking of 15 in FFY09/SFY10 to 17 among the 50 states and D.C (as well as Puerto Rico). Illinois performed above the national median percentage of 2.82%. In addition, 20 CFC offices have participation rates above the national median percentage. Seven CFC offices

## APR Template – Part C (4)

Illinois  
State

have increased under 3 participation rates from the previous year. Continued economic stressors on families may result in fewer families accessing program services.

**Improvement Activities:** Previous improvement activities, such as monthly reporting to CFC offices, performance contracting, and identification of findings and development of corrective action plans continue. In addition, the bulk of funding to CFC offices for service coordination is distributed based on average caseloads over a recent period.

Improvement Activity	Status/Timeline/Resource
<p>Continue participation in Assuring Better Child Health and Development (ABCD) III, Illinois Healthy Beginning II (IHB2) project, including CFC office participation in pilot project activities and data sharing between the HFS and the IL Department of Human Services/EI.</p>	<p>The IHB2 Status report for January – May 2011 states the following: “IHB2 hosted a first round of learning collaboratives to better engage medical homes, EI, and [community service providers} (CSP) and foster dialogue between these three affinity groups. The initial round of these learning collaboratives yielded valuable information in terms of assessing the factors currently obstructing improved collaboration and how they might be overcome through the duration of the project.</p> <p>This first learning collaborative also established the foundation for the pilot sites to begin the referral communication feedback loop. The pilot sites will begin the process during May 2011. Future learning collaborative and affinity group meetings will be held during the summer to assess progress in the screening, referral and feedback process and to adjust, as needed, with information gleaned through the Plan-Do-Study-Act (PDSA) process.”</p> <p>Bureau staff will continue to participate in the ABCD III, IHB2 project including CFC office participation in pilot project activities and data sharing between the HFS and the IL Department of Human Services/EI.</p> <p>Resources include HFS and its IHB2 Project Management Committee and subcommittees, Bureau of EI, and CFC offices.</p>
<p>Continued participation in Children’s Health Insurance Program Reauthorization Act (CHIPRA) Child Health Quality Demonstration Grant</p>	<p>Bureau staff participated in CHIPRA workgroups and will continue to assist in the development and implementation of strategies throughout the grant period (i.e.2015).</p> <p>Resources include HFS and its CHIPRA Child Health Quality Demonstration Grant workgroups, Bureau of EI, and CFC offices.</p>
<p>Continue participation in Enhancing Developmentally Oriented Primary Care</p>	<p>Bureau and EI Training Program staff continued participation in the EDOPC advisory group and</p>

## APR Template – Part C (4)

Illinois  
State

(EDOPC) initiative.	CFC offices participated in pilot project activities.  Resources include the Advocate Health Care Steps Program, Illinois Chapter, American Academy of Pediatrics, Bureau of EI, EI Training Program, and CFC offices.
In order to bring the state into full compliance with CAPTA, the Department of Children and Family Services (DCFS) will implement a process to screen children that reside in intact families and refer to EI, when appropriate.	DCFS staff have been hired and screening of children that reside in intact families has begun. DCFS administrative staff attended a CFC manager's meeting to provide training as the screening process was rolled out statewide. This screening will be an ongoing strategy. Resources include DCFS and Bureau of EI staff, CFC offices and the Early Intervention Training Program.

### Other improvement activities:

- In an effort to update and improve public information for parents, a new Illinois Early Intervention Services brochure was released in the fall of 2010 and a new "Early Intervention in Illinois: A Guide for Families" book was released in the spring of 2011. Both documents were created by the Illinois Early Intervention Clearinghouse. Input for the documents was received from the Bureau, parent liaisons, and service coordinators. The brochure and family guide book replace outdated material and provide a more family friendly, informative public awareness pieces to support child find efforts.
- The Intact Screening Program became operational in October 2010. The Illinois Department of Child and Family Services (DCFS) hired eight developmental screeners, two in each of the four regions (Cook County, Central, Southern and Northern regions). A procedure was developed, by which information for all new intact cases with children 0-3 is communicated to the project in order to initiate case referrals for developmental screenings. Orientation and initial training for all developmental screeners were completed and numerous meetings and trainings with Intact Family Services staff were conducted. As a result of these efforts, the program conducted 322 screenings of children and their biological parents during fiscal year 2011, resulting in 112 referrals to EI.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11 (if applicable):** No revisions needed.

## APR Template – Part C (4)

Illinois  
State

### Overview of the Annual Performance Report Development: See Indicator 1.

#### Monitoring Priority: Effective General Supervision Part C / Child Find

**Indicator 7:** Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

##### Measurement:

Percent = [(# of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

FFY	Measurable and Rigorous Target
FFY10/SFY11	100% of new IFSPs will be initiated within 45 days of referral.

#### Actual Target Data for FFY10/SFY11:

**Indicator 7:** [Number of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline/Number of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted] X 100

FFY10/SFY11 Result: [(17,836)/17,877] X100 = 99.77%  
FY10/SFY11 Target = 100%

#### Infants Evaluated and Assessed and provided an Initial IFSP meeting Within Part C's 45-day timeline:

a. Number of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	17,836
b. Number of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted	17,877
Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline (Percent = [(a) divided by (b)] times 100)	99.77%

Illinois utilized its Cornerstone system to measure the time in intake for every child referred to Early Intervention during the time period July 1, 2010 through June 30, 2011. In response to Indicator 7, data exclude those cases that are delayed for family reasons. The last column in the following chart provides statewide and CFC-specific data for Indicator 7.

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Illinois  
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CFC offices assign a delay reason of either CFC Delay, Family Delay, or Provider Delay when a case takes more than 45 days. These data are provided in the following chart, along with a calculation for IFSPs initiated within 45 days (in the “On Time” column) which includes cases delayed for family reasons. The EI Program includes IFSPs that have been delayed for family reasons when reporting monthly performance data to the CFC offices, as delays for any reason can be detrimental to children.

Ten of the 25 CFC offices demonstrate 100% compliance with the 45-day requirement. All three geographic groupings of the state (i.e., Cook County Collar County and Downstate) have a minimum of 99.4% compliance, with only two CFC offices falling below the 99.0% compliance level.

FFY 10/SFY11 IFSPs Initiated Within 45 Days			
CFC # & Area	Total	Not Delayed	Percent On Time
#1 ROCKFORD	570	570	100.00%
#2 Lake Co.	708	707	99.86%
#3 FREEPORT	299	296	99.00%
#4 Kane & Kendall Co.	864	863	99.88%
#5 DuPage Co.	1,206	1,206	100.00%
#6 N Suburbs	1,573	1,572	99.94%
#7 W Suburbs	1,015	1,014	99.90%
#8 SW Chicago	736	736	100.00%
#9 Central Chicago	980	980	100.00%
#10 SE Chicago	765	763	99.74%
#11 N Chicago	2,429	2,427	99.92%
#12 S Suburbs	1,076	1,076	100.00%
#13 MONMOUTH	298	297	99.66%
#14 PEORIA	518	511	98.65%
#15 Joliet	1,271	1,269	99.84%
#16 DANVILLE	616	614	99.68%
#17 QUINCY	217	217	100.00%
#18 SPRINGFIELD	261	259	99.23%
#19 DECATUR	330	330	100.00%
#20 EFFINGHAM	390	390	100.00%
#21 BELLEVILLE	620	609	98.23%
#22 CENTRALIA	346	344	99.42%
#23 NORRIS CITY	178	178	100.00%
#24 CARBONDALE	171	171	100.00%
#25 McHenry Co.	372	369	99.19%
<b>Statewide</b>	<b>17,809</b>	<b>17,768</b>	<b>99.77%</b>
<b>Cook (6-12)</b>	<b>8,574</b>	<b>8,568</b>	<b>99.93%</b>
<b>Collar Counties (2,4,5,15,25)</b>	<b>4,421</b>	<b>4,414</b>	<b>99.84%</b>
<b>Downstate (All Others)</b>	<b>4,814</b>	<b>4,786</b>	<b>99.42%</b>

## APR Template – Part C (4)

Illinois  
State

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:

In FFY10/SFY11, the proportion of cases with IFSPs initiated within 45 days (99.77%) increased from the FFY09/SFY10 target data (99.46%). Regional data shows an improvement in all regions between the two years. In FFY10/SFY11, ten CFC offices were at 100.0% compliance while only two were below 99.0%, which is an improvement over FFY09/SFY10, which had only seven CFCs at 100% and four below 99.0%. The major challenge in this continues to be the growth of the Illinois EI system creating staff vacancy problems for CFC offices.

Improvement Activity	Status/Timelines/Resources
Policies and procedures will be reviewed and revised, as needed, to ensure that the integrity of the referral, intake, evaluation/assessment and IFSP processes are maintained.	The Bureau of Early Intervention meets monthly with the CFC office managers to identify and address issues that impact service delivery, including compliance with the 45-day timeline. The EI Monitoring Program CFC office monitoring process includes components to ensure that evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline and are appropriately documented in the child's file/Cornerstone system. Resources include the Bureau of Early Intervention and EI Monitoring Program

### Correction of FFY09/SFY10 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2009 for this indicator: **99.46%**

1. Number of findings of noncompliance the State made during FFY09/SFY10 (the period from July 1, 2009, through June 30, 2010)	12
2. Number of FFY09/SFY10 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	11
3. Number of FFY09/SFY10 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

### Correction of FFY09/SFY10 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY09/SFY10 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY09/SFY10 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY09/SFY10 findings <u>not</u> verified as corrected [(4) minus (5)]	1

### **Actions Taken if Noncompliance Not Corrected:**

Data are reported to each CFC office for all children exiting Part C on meeting the 45-day timeline based upon 12-month data. When a finding of noncompliance is identified, a corrective action plan (CAP) to address noncompliance policies, procedures, and practices must be submitted and implemented. On an annual basis if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and submit and implement a new CAP.

Meeting the 45-day timeline is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan, fails to make adequate progress, or fails to implement major features of the plan and 2) if the CFC office has more than one finding of noncompliance pending from SFY09 or longer. Targeted technical assistance will be provided to CFC office(s) that have not demonstrated correction of noncompliance.

As part of performance contracting, CFC offices receive a penalty adjustment (i.e., a 1 or 2 percent reduction in their quarterly base contract amount) based upon poor performance in meeting the 45-day timeline.

On a quarterly basis, a status report on each finding of noncompliance is sent to each CFC office and includes the following information: year of finding, CAP implementation, Prong 1 (child-specific correction) and Prong 2 (implementation of specific regulatory requirement). These reports are used to notify CFC offices when correction of noncompliance has been fully documented.

### **Verification of Correction of FFY09/SFY10 noncompliance or FFY09/SFY10 findings (either timely or subsequent):**

The Illinois Early Intervention Program ensures that noncompliant policies, procedures and/or practices have been revised and the noncompliance has been corrected. The following procedure outlines the steps that ensure correction of noncompliance, including submission, approval and implementation of a corrective action plan; verification of correction of individual instances of noncompliance; and the use of updated data showing compliance with statutory/regulatory requirements.

### **Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY09/SFY10:**

- A. A CAP is submitted and its implementation documented. The Bureau of EI completes the review and approval of these plans. CFC offices report on implementation of the plan in six months, or more frequently if the CFC office determination is “Needs Intervention” or “Needs Substantial Intervention.” Findings are based on data for all children enrolled in the program during a 12-month time period ending June 30.
- B. Child-specific/individual instance correction is documented with the Cornerstone system and file reviews. Instances of noncompliance are considered resolved when data errors have been corrected, the required action has been completed, or the child is no longer within the jurisdiction of the program.
- C. CFC office implementation of the specific statutory/regulatory requirement is documented when data demonstrate that a CFC office has 100 percent compliance during three consecutive months.

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Illinois  
State

### **Correction of Remaining FFY08/SFY09 Findings of Noncompliance:**

1. Number of remaining FFY08/SFY09 findings of noncompliance noted in OSEP's June 2010, FFY 2008 APR response table for this indicator	3
2. Number of remaining FFY08/SFY09 findings the State has verified as corrected	1
3. Number of remaining FFY08/SFY09 findings the State has NOT verified as corrected [(1) minus (2)]	2

### **Verification of Remaining FFY08/SFY09 findings:**

On an annual basis if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and develop and implement a new CAP. Noncompliance with the requirement is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

The primary issue with the correction of findings of noncompliance related to meeting the 45-day timeline remains the ability of CFC offices to document 100 percent compliance during three consecutive months.

### **Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY08/SFY09:**

See "Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009," above.

### **No Findings of Noncompliance Remain from FFY07/SFY08 or Earlier.**

### **Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):**

<b>Statement from the Response Table</b>	<b>State's Response</b>
Because the State reported less than 100% compliance for FFY2009, the state must report on the status of correction of noncompliance reflected in the data the state reported for this indicator	See status in "Correction of FFY09/SFY10 Findings of Noncompliance," above.
The State must demonstrate in FFY2010 APR that the remaining three uncorrected noncompliance findings identified in FFY2008 were corrected	See status in "Correction of Remaining FFY08/SFY09 Findings of Noncompliance," above. One of the three uncorrected finding identified in FFY08/SFY09 was corrected.
When reporting on the correction of noncompliance, the State must report, in its FFY2010 APR, that it has verified that each EIS program with noncompliance reflected in the FFY2009 data the State reported for this indicator and each EIS program with remaining noncompliance identified in FFY2008: (1) is correctly implementing 34 CFR 303.340l, 303.342(e), and 303.344(f)(1) (i.e., achieved 100% compliance) based on	See "Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY09/SFY10," above.

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updated data such as data subsequently collected through onsite monitoring or State data system; and (2) has initiated services, although late, for any child whose services were not initiated in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 0902, dated October 17, 2008. In the FFY2010 APR, the State must describe the specific actions that were taken to verify correction.	
If the State does not report 100% compliance in the FFY2010 APR, the State must review its improvement activities and revise them, if necessary.	See new improvement activities, below.

### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11 (if applicable):**

<b>New Improvement Activity</b>	<b>Timelines &amp; Resources</b>
The intake and evaluation/assessment processes will be reviewed by the Service Delivery Approaches workgroup and recommendations for improvement considered.	By January 1, 2012, the Service Delivery Approaches workgroup will discuss the intake and evaluation/assessment processes. Recommendations for changes will be incorporated into the workgroup's recommendations to the IICEI and the Department.  Resources include the Service Delivery Approaches workgroup, the EI Ombudsman, and the EI Bureau
Provide targeted technical assistance to ensure correction of noncompliance and improve overall compliance with the 45-day timeline.	By June 30, 2012, provide targeted technical assistance to CFC offices with a pending finding of noncompliance from FF09/SFY10 or FFY08/SFY09 or who demonstrate less than 99.0% compliance with the 45-day timeline in FFY10/SFY11. The EI Ombudsman will work with these CFC offices to identify issues related to noncompliance and help develop strategies to address them.  Resources include the Bureau of EI and the EI Ombudsman.

**Overview of the Annual Performance Report Development:**  
**See Indicator 1.****Monitoring Priority: Effective General Supervision Part C / Effective Transition**

**Indicator 8:** Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:**

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
FFY10/SFY11	<ul style="list-style-type: none"><li>A. 100 percent of children exiting Part C have an IFSP with transition steps and services.</li><li>B. The LEAs will have been notified of 100 percent of the children exiting Part C that are potentially eligible for Part B.</li><li>C. A transition conference will be held for 100 percent of the children who leave the Part C program at age 3 and whose families have consented to participate in a meeting.</li></ul>

**Actual Target Data for FFY10/SFY11:****Indicator 8A: Transition Steps and Services**

(Number of files with transition steps in IFSP/Total number of files reviewed) X 100

**FFY10/SFY11 Result: (794/860) X 100 = 92.3%**

**FFY10/SFY11 Target = 100%**

**Indicator 8B: Referrals Made to LEA = 100% Compliance through data sharing agreement**

(Referrals/Potentially eligible) X 100

**FFY10/SFY11 Result: (10,078/10,078) X 100 = 100%**

**FFY10/SFY11 Target = 100%**

**Indicator 8C: Transition Meetings Held = (Transition meetings/ Potentially eligible excluding family delay) X 100**

**FFY10/SFY11 Result: (9,986/10,078) x 100 = 99.1%**

**FFY10/SFY11 Target = 100%**

### **8A IFSPs with transition steps and services:**

File reviews completed as part of CFC office onsite monitoring visits held in the spring 2011 indicate that 92.3% [(794/860) x 100] files included IFSPs with transition steps and services. As part of a contractual agreement with the lead agency, the Illinois EI Monitoring Program conducts annual onsite monitoring visits to the 25 CFC offices. File selection included all children who transitioned between February 1, 2011 and March 30, 2011, excluding those children who had been in the system less than 90 days prior to the children's third birthday. The EI Monitoring Program conducted the file review utilizing a tool with elements that verify that the IFSP of children exiting Part C had transition steps and services. In particular, the review ensured the completion of an Early Intervention to Early Childhood Tracking form. CFC offices have been instructed to include this completed form as part of the child's IFSP.

### **8B Referrals made to Local Education Agency (LEA)**

Illinois utilized the data sharing agreement with Part B/IL State Board of Education (ISBE) to assure that every child who reached 27 months of age or who started EI services after that age were made known to the LEA.

### **8C Transition meetings held**

Data from the Cornerstone system for the time period July 1, 2010 – June 30, 2011 are used to document transition meetings. Cases with exceptional family circumstances that have been excluded from this calculation total 1587. The last column of the following chart provides statewide and CFC-specific data on compliance with indicator 8C. All areas of the state performed well, with full compliance (100%) in 15 of the 25 CFC offices.

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Illinois  
State

FFY 10/SFY 11 Transition Meetings Held				
	Terminations Over 30 Mon.	Potentially SE Eligible	Meetings Held	% Of Meetings Held
#1 Rockford	478	362	362	100.0%
#2 Lake Co.	612	462	458	99.1%
#3 Freeport	260	188	188	100.0%
#4 Kane & Kendall Co.	723	583	583	100.0%
#5 DuPage Co.	996	776	776	100.0%
#6 N Suburbs	1,258	945	945	100.0%
#7 W Suburbs	816	580	569	98.1%
#8 SW Chicago	563	315	314	99.7%
#9 Central Chicago	761	515	512	99.4%
#10 SE Chicago	567	317	286	90.2%
#11 N Chicago	1,721	902	876	97.1%
#12 S Suburbs	815	577	570	98.8%
#13 Monmouth	265	202	202	100.0%
#14 Peoria	423	308	308	100.0%
#15 Joliet	1,122	904	900	99.6%
#16 Danville	526	358	358	100.0%
#17 Quincy	164	102	102	100.0%
#18 Springfield	282	238	238	100.0%
#19 Decatur	286	222	222	100.0%
#20 Effingham	292	208	207	99.5%
#21 Belleville	510	364	360	98.9%
#22 Centralia	267	189	189	100.0%
#23 Norris City	157	121	121	100.0%
#24 Carbondale	143	88	88	100.0%
#25 McHenry Co.	333	252	252	100.0%
<b>Statewide</b>	<b>14,340</b>	<b>10,078</b>	<b>9,986</b>	<b>99.1%</b>
<b>Chicago</b>	3,612	2,049	1,988	97.0%
<b>Suburban Cook</b>	2,889	2,102	2,084	99.1%
<b>Collar Counties</b>	3,786	2,977	2,969	99.7%
<b>Downstate</b>	4,053	2,950	2,945	99.8%

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:

**Progress/Slippage for 8A:** In FFY10/SFY11, 92.3% of the files demonstrated IFSPs with transition steps and services, down from 98.2% in FFY09/SFY10. Four of the five CFC offices with noncompliant files are located in Chicago, where the availability of Chicago Public School (CPS) staff to participate in the transition process has been a major challenge. CFC managers from Chicago CFC offices have been meeting with the CPS to share their concerns and discuss strategies to address them. In addition, a Program Integrity Pilot project targeting transition issues was initiated to help develop technical assistance and training supports and services. Of the 66 noncompliant files, 51 were from a single CFC office.

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Illinois  
State

**Progress/Slippage for 8B:** In FFY10/SFY11 and in FFY09/SFY10, Illinois demonstrated 100 percent compliance with 8B. With the full implementation of the data sharing agreement between the EI Program and the Illinois State Board of Education and subsequent data sharing reports, no area of noncompliance have been identified and no previous findings of noncompliance remain uncorrected.

**Progress/Slippage for 8C:** In FFY10/SFY11, the number of transition meeting held decreased to 99.1%, from 99.4% in the previous year. The number of CFC offices in full compliance (100%) did however increase from 13 to 15. Regionally, the largest decrease was in Chicago, which dropped from 98.4% the previous year to 97.0% in FFY10/SFY11. Suburban Cook County also dropped from 99.4% last year to 99.1% percent in FFY10/SFY11. The collar counties remained the same as last year, while Downstate increased from 99.7% to 99.8%. While significant improvements have continued to be made, there are still ongoing improvement efforts within the City of Chicago to improve those CFCs documentation of transition meetings within the Cornerstone system. The Illinois EI Program has documented an increase in the number of transition meetings not held due to family reasons, the program continues to monitor this increase and work with CFCs to ensure appropriate and timely entry of transition data into the Cornerstone system.

Improvement Activity	Status/Timelines/Resources
Additional data will be provided to CFC offices so they can monitor compliance with transition requirements and address child-specific and system issues in a timely way.	<p>In FFY2010/SFY2011:</p> <p>Monthly, a report on 32 performance indicators is sent to CFC offices and includes data on timely service delivery, 45-day timeline and transition.</p> <p>Quarterly, “mini APR tables” were sent to CFC offices so that they can monitor performance on Indicators including 1, 7, and 8C.</p> <p>Resources include the Bureaus of Early Intervention and Performance Support Services.</p>
Continue to address CFC office, LEA, and EI provider training and parent information needs about the transition process.	<p>The Bureau of Early Intervention and the EI Training Program continued their participation on the Illinois Birth-5 Transition Guidance Committee and coordination of training efforts with Part B.</p> <p>During FFY10, SFY11, the EI Training Program collaborated with StarNet (Part B training entity) to provide eight transition workshops throughout the state.</p> <p>The CFC manager meeting (September 2010) was used to share and discuss transition requirements, including the OSEP Early Childhood Transition FAQ and the document that synthesized its key points.</p> <p>In FFY10/SFY11, a Program Integrity pilot targeting transition was initiated. The pilot project involved the use of available Cornerstone system data and an in-depth, onsite file review with analysis targeting transition activities and challenges. A plan of</p>

	<p>training and technical assistance was developed and is being implemented. Lessons learned through the pilot project are shared with all CFC managers at monthly CFC managers' meetings.</p> <p>On October 4, 2010, the Illinois State Board of Education issued a memorandum to Directors of Special Education on the use of the IFSP to assist in determining eligibility and in writing the Individual Education Program (IEP).</p> <p>Resources include Bureau of Early Intervention, ISBE, the Illinois Births5 Transition Guidance Committee, the EI Ombudsman, and the EI Training Program.</p>
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**Other Improvement Activities:**

- The Early Intervention Taskforce report included a recommendation regarding transition issues with the Chicago Public Schools (CPS). CFC offices 8, 9, 10, and 11 worked directly with CPS on these issues. The Bureau has spoken with the Illinois State Board of Education regarding several transition issues.
- In February 2011, an IFSP workgroup was formed to address content and format suggestions from CFC managers for the IFSP document.

**Correction of FFY09/SFY10 Findings of Noncompliance for 8A (if State reported less than 100% compliance):** Level of compliance (actual target data) State reported for FFY 2009 for this indicator: **98.2%**

1. Number of findings of noncompliance the State made during FFY09/SFY10 (the period from July 1, 2009 through June 30, 2010)	<b>4</b>
2. Number of FFY09/SFY10 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	<b>3</b>
3. Number of FFY09/SFY10 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>1</b>

**Correction of FFY09/SFY10 Findings of Noncompliance for 8A Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:**

1. Number of FFY09/SFY10 findings not timely corrected (same as the number from (3) above)	<b>1</b>
2. Number of FFY09/SFY10 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	<b>0</b>
3. Number of FFY09/SFY10 findings <u>not</u> verified as corrected [(4) minus (5)]	<b>1</b>

**Actions Taken if Noncompliance Not Corrected for 8A:**

The EI Monitoring Program notifies the CFC offices of identified findings of noncompliance (i.e., transition steps and services are not included in 100% of children transitioning during a defined time period) within 30 days of the onsite monitoring visit. When a finding of noncompliance is identified, a corrective action plan (CAP) to address noncompliant policies, procedures, and practices must be submitted and implemented. On an annual basis, if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and develop and implement a new CAP.

Noncompliance with the transition conference requirement is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

**Verification of Correction of FFY09/SFY10 noncompliance for Indicator 8A or FFY09/SFY10 findings (either timely or subsequent):** The Illinois Early Intervention Program ensures that noncompliant policies, procedures and/or practices have been revised and the noncompliance has been corrected. The following procedure outlines the steps that ensure correction of noncompliance, including submission, approval, and implementation of a corrective action plan; verification of correction of individual instances of noncompliance; and the use of updated data showing compliance with statutory/regulatory requirements

**Describe the specific actions that the State took to verify the correction of findings of noncompliance for Indicator 8A identified in FFY09/SFY10:**

- A. Following the monitoring visit, the CFC office with a finding of noncompliance submits a CAP to the EI Monitoring Program for approval. Within six months, the EI Monitoring Program follows up with the CFC office to determine status of CAP implementation. Areas of noncompliance are reviewed at the CFC office's next monitoring visit to ensure CAP implementation.
- B. Child-specific/individual instance correction is documented during the onsite file review to ensure that the required action was completed or the child is no longer in the jurisdiction of the program.
- C. At the next annual compliance monitoring visit, the EI Monitoring Program ensures that the IFSPs of all children transitioning from EI contain transition steps and services.

**Correction of Remaining FFY08/SFY09 Findings of Noncompliance for 8A (if applicable):**

1. Number of remaining FFY08/SFY09 findings of noncompliance noted in OSEP's June 2010, FFY 2008 APR response table for this indicator	2
2. Number of remaining FFY08/SFY09 findings the State has verified as corrected	0
3. Number of remaining FFY08/SFY09 findings the State has NOT verified as corrected [(1) minus (2)]	2

**Verification of Correction of Remaining FFY08/SFY09 findings for 8A:**

On an annual basis if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and develop and implement a new CAP. Noncompliance with the transition steps and services requirement is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

**Describe the specific actions that the State took to verify the correction of findings of noncompliance for 8A identified in FFY08/SFY09:**

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Illinois  
State

See “Describe the specific actions that the State took to verify the correction of findings of noncompliance for 8A identified in FFY09/SFY10,” above.

**There are no finding of noncompliance for 8A for FFY07/SFY08 or earlier.**

**There are no findings of noncompliance for 8B for FFY09/SFY10 or earlier.**

**Correction of FFY09/SFY10 Findings of Noncompliance for 8C (if State reported less than 100% compliance):** Level of compliance (actual target data) State reported for FFY09/SFY10 for this indicator: **99.4%**.

1. Number of findings of noncompliance the State made during FFY09/SFY10 (the period from July 1, 2009 through June 30, 2010)	13
2. Number of FFY09/SFY10 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	12
3. Number of FFY09/SFY10 findings not verified as corrected within one year [(1) minus (2)]	1

**FFY09/SFY10 Findings of Noncompliance for 8C Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:**

4. Number of FFY09/SFY10 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY09/SFY10 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	1
6. Number of FFY09/SFY10 findings not verified as corrected [(4) minus (5)]	0

### **Actions Taken if Noncompliance for 8C Not Corrected:**

Data are reported to each CFC office for the percent of children potentially eligible for Part B where the transition conference occurred, based upon 12-month data. When a finding of noncompliance is identified (i.e., a transition meeting was not held for 100% of children potentially eligible for Part B), a CAP to address noncompliant policies, procedures, and practices must be submitted and implemented. On an annual basis if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and develop and implement a new CAP.

Noncompliance with the transition conference requirement is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible CAP for addressing transition, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

On a quarterly basis, a status report on each finding of noncompliance is sent to each CFC office and includes the following information: year of finding, CAP implementation, Prong 1 (child-specific correction) and Prong 2 (implementation of specific regulatory requirement). These reports are used to notify CFC offices when correction of noncompliance has been fully documented

**Verification of Correction of FFY09/SFY10 noncompliance or FFY09/SFY10 findings for 8C  
(either timely or subsequent):**

The Illinois Early Intervention Program ensures that noncompliant policies, procedures and/or practices have been revised and the noncompliance has been corrected. The following procedure outlines the steps that ensure correction of noncompliance, including submission, approval and implementation of a CAP; verification of correction of individual instances of noncompliance; and the use of updated data showing compliance with statutory/regulatory requirements.

**Describe the specific actions that the State took to verify the correction of findings of noncompliance for 8C identified in FFY09/SFY10:**

- A. A CAP is submitted and its implementation documented. The Bureau of Early Intervention completes the review and approval of these plans. CFC offices report on implementation of the plan in six months, or more frequently if the CFC office determination is "Needs Intervention" or "Needs Substantial Intervention." Findings are based on data for all children enrolled in the program during a 12-month time period ending June 30.
- B. Child-specific/individual instance correction is documented through the use of the Cornerstone system and file reviews. Instance of noncompliance are considered resolved when data errors have been corrected, the required action has been completed, or the child is no longer within the jurisdiction of the program.
- C. CFC office implementation of the specific statutory/regulatory requirement is documented when data demonstrate that a CFC office has 100 percent compliance during three consecutive months.

**Correction of Remaining FFY08/SFY09 Findings of Noncompliance for 8C (if applicable):**

1. Number of remaining FFY08/SFY09 findings of noncompliance noted in OSEP's June 2010, FFY 2008 APR response table for this indicator	4
2. Number of remaining FFY08/SFY09 findings the State has verified as corrected	3
3. Number of remaining FFY08/SFY09 findings the State has NOT verified as corrected [(1) minus (2)]	1

**Verification of Correction of Remaining FFY08/SFY09 findings:**

On an annual basis if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and develop and implement a new CAP. Noncompliance is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY08/SFY09:**

See "Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY09/SFY10." above.

In addition a Program Integrity pilot project was held in the CFC with the pending finding of noncompliance to address ongoing concerns about the lack of successful special education eligibility determinations/limited number of transition meetings being held. Needs identified by the CFC included expanded list/better definitions of case closure codes as well as clarification about what can be counted

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Illinois  
State

as a transition meeting. Three primary sources of information were used to identify transition strengths and challenges: data from Cornerstone, information from files reviews, and feedback from CFC staff.

To get a sense of the codes being used as well as to understand the number of cases closed without special education eligibility being determined, all cases closed during a six-month period were pulled along with the reasons for case closure.

The data examined revealed a few patterns. Many of the auto-terminations were due to service coordinators waiting for information from the school district. Many of the parent delays were due to families being unavailable or unwilling to pursue transition prior to age 3, with unavailability documented in different ways and listed by some as no contact; and unwillingness, sometimes due to perception that school district didn't offer viable options given families' work situation (i.e., half day program, but full day needs). Some of these families return to the CFC for transition support after the child turns three.

LEA delays were primarily due to a missing Chicago Public School (CPS) liaison, with no one to receive referrals or talk through process with family. File reviews completed by service coordinators and verified by monitoring staff revealed that transition steps that can be completed by the CFC are often occurring and being documented. Strategies recommended or utilized include: the development of a spreadsheet to track children referred to CPS as well as their progress; continued communication with the advocacy group addressing transition concerns with CPS; collaboration with group examining transitions between Early Head Start and Head Start; improving documentation of transition discussions/activities when they occur; and developing a protocol for conducting transition meetings to share information with families even if LEA representative is not present.

### **Findings of Noncompliance Remain from FFY07/SFY08 or Earlier.**

One finding of noncompliance for 8C remains uncorrected from FFY07/SFY08. The remaining findings of noncompliance from FFY07/SFY08 and from FFY08/SFY09 were issued to the same CFC office, which has not been able to demonstrate 100 percent compliance during three consecutive months. This CFC office participated in a Program Integrity Project specifically targeted to transition. These pilot activities are described above.

### **Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):**

Statement from the Response Table	State's Response
Because the State reported less than 100% compliance for FFY2009, the state must report on the status of correction of noncompliance reflected in the data the state reported for this indicator.	See status in "Correction of FFY09/SFY10 Findings of Noncompliance" for both 8A and 8C, above.
The State must demonstrate, in the FFY2010 APR, that the remaining two uncorrected noncompliance findings identified in FFY2008 were corrected.	For 8C, one of the two uncorrected noncompliance findings identified in FFY2008 was corrected.

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State

When reporting on the correction of noncompliance, the State must report, in its FFY2010 APR, that it has verified that each EIS program with noncompliance reflected in the FFY2009 data the State reported for this indicator and each EIS program with remaining noncompliance identified in FFY2008: (1) is correctly implementing 34 CFR 303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through onsite monitoring or State data system; and (2) has initiated services, although late, for any child whose services were not initiated in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 0902, dated October 17, 2008. In the FFY2010 APR, the State must describe the specific actions that were taken to verify correction.	See "Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY09/SFY10" for 8A and 8C above.
If the State does not report 100% compliance in the FFY2010 APR, the State must review its improvement activities and revise them, if necessary.	See new improvement activities, below.

### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 (if applicable):**

New Improvement Activity	Timelines & Resources
Complete Program Integrity pilot project activities related to transition and implement strategies to address issues.	In FFY11/SFY12, complete planning group meetings with CFC pilot site. Strategies will be implemented and then evaluated for effectiveness and use by other CFC offices. Resources include Bureau of Early Intervention, ISBE, the EI Monitoring Program, the EI Ombudsman, and the EI Training Program.
Recommendations from the IFSP workgroup regarding documentation of transition will be implemented.	The IFSP workgroup will review the format and content of the IFSP. Recommendations related to transition will be considered for implementation by January 1, 2012. Resources include Bureau of Early Intervention and CFC offices. The EI Ombudsman will work with these CFC offices to identify issues related to noncompliance and help develop strategies to address them. Resources include the Bureau of EI and the EI Ombudsman.

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Ongoing transition issues with CPS will be identified and shared with Illinois State Board of Education (ISBE).	The Bureau will continue to notify the ISBE of transition issues in the Chicago area. CFC offices 8, 9, 10, and 11 will continue ongoing meetings with CPS to address transitions issues. Resources include Bureau of Early Intervention and CFC offices.
Technical assistance and training will be provided to CFC offices with longstanding noncompliance.	By June 30, 2012, the Program Integrity pilot project, described in 8C, above, will complete its planning phase and training and supports to the CFC office will be provided. Resources include Bureau of Early Intervention, the EI Monitoring Program, the EI Ombudsman, and the EI Training Program
The transition process will be reviewed by the Service Delivery Approaches workgroup and recommendations for improvement considered.	By December 30, 2012, the Service Delivery Approaches workgroup will complete its review of EI service delivery components and begin consider recommendations for system change. Resources include the Bureau of EI, the Service Delivery Approaches workgroup, the EI Ombudsman, and the IICEI.
The transition process will be reviewed to ensure compliance with Part C regulations.	By July 1, 2013, a process to identify and refer children who come to EI less than 45 days before their third birthday will be implemented. Recourses include ISBE and the Bureaus of EI and Program Support Services
Provide targeted technical assistance to ensure correction of noncompliance and improve overall compliance with the requirement to hold a transition meeting if the child is potentially eligible for Part B.	By June 30, 2012, provide targeted technical assistance to CFC offices with a pending finding of noncompliance from FFY09/SFY10 or FFY08/SFY09 or who demonstrate less than 99.0% compliance with the transition meeting being held in FFY10/SFY11. The EI Ombudsman will work with these CFC offices to identify issues related to noncompliance and help develop strategies to address them.  Resources include the Bureau of EI and the EI Ombudsman.

**Overview of the Annual Performance Report Development:**  
**See Indicator 1.****Monitoring Priority: Effective General Supervision Part C / General Supervision**

**Indicator 9:** General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification. (20 U.S.C. 1416 (a)(3)(B) and 1442)

**Measurement:**

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

**States are required to use the “Indicator C 9 Worksheet” to report data for this indicator (see Attachment A).**

FFY	Measurable and Rigorous Target
FFY10/SFY11	100 percent of noncompliance will be corrected within one year of identification.

**Actual Target Data for FFY10/SFY11:****Indicator 9**

(Target data for FFY 2009 – the percent shown in the last row of the Indicator C 9 Worksheet [(column (b) sum divided by column (a)) times 100])

**FFY10/SFY11 Result:  $(28/33) \times 100 = 84.8\%$**

**FFY10/SFY11 Target = 100%**

**Describe the process for selecting EIS programs for Monitoring:** Annually, all 25 Child and Family Connections (CFC) offices receive a compliance monitoring visit. CFC offices are notified of findings of noncompliance by the EI Monitoring Program within 30 days of the monitoring visit. Data systems are used to identify findings of noncompliance for Indicators 1 (timely service delivery), 7 (45-day timeline) and 8C (transition conference, if child potentially eligible for Part B). Findings of noncompliance are identified for all CFC offices in the first quarter of the fiscal year (July-September) based upon data for all children enrolled in the program during a 12month time period ending June 30.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY10/SFY11:** In FFY10/SFY11, the percentage of noncompliance corrected within one year of identification was 84.8 percent, up from 59.2 percent in FFY09/SFY10. The CFC offices showed an increased ability to demonstrate correction of noncompliance across indicators. In addition, these numbers do not include findings of noncompliance that remain open from previous fiscal year(s). The main issue for longstanding noncompliance involves implementation of the specific statutory/regulatory requirements by CFC offices, which is documented using data based on 100

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percent compliance over three consecutive months or through a file review that in which all files demonstrate compliance.

Illinois has fully implemented a system of identification and correction of findings of noncompliance in accordance with OSEP Timely Correction Memo 09-02. Information from data systems and file reviews and the EI monitoring, dispute resolution, complaints and hearings and “other” processes are used to identify noncompliance for both CFC offices and Early Intervention service providers. The CFC office/EI provider is notified in writing of the finding and its correction. Correction of findings involves several steps. Development and implementation of corrective action plans (CAPs) ensure that the policy, procedure, or practice that led to the noncompliance has been corrected. Child-specific/individual instance correction is documented through the use of data systems and file reviews. When required, implementation of the specific statutory/regulatory requirements by CFC offices is documented using data based on 100 percent compliance over three consecutive months or through a file review that in which all files demonstrate compliance.

On a quarterly basis, a status report on each finding of noncompliance using data/EI monitoring is sent to each CFC office and may include the following information: year of finding, CAP implementation, Prong 1 (child-specific correction) and Prong 2 (implementation of specific regulatory requirement). These reports are used to notify CFC offices when correction of noncompliance has been fully documented.

Improvement Activity	Status/Timelines/Resources
Additional data will be provided to CFC offices so they can monitor compliance with transition requirements and address child specific and system issues in a timely way.	In FFY2010/SFY2011: Monthly, a report on 32 performance indicators is sent to CFC offices and includes data on timely service delivery, 45-day timeline and transition. Quarterly, “mini APR tables” were sent to CFC offices so that they can monitor performance on Indicators including 1, 7, and 8C. Resources include the Bureaus of Early Intervention and Performance Support Services.
In addition to making findings to CFC offices based upon dispute resolution, complaints and hearings and reporting them in Indicator 9 of the APR, findings will also include those made to individual service providers. The EI provider will be notified of the finding and child-specific correction of the violation will be ensured. When broader noncompliance exists, the provider will be required to submit and implement a corrective action plan to ensure that the policy, procedure, or practice that led to the noncompliance has been corrected so that future provision of services to other children are compliant.	In FFY10/SFY11, Bureau policies and procedures were revised to ensure that EI providers are notified of findings based upon dispute resolution, complaints and hearings and that child-specific correction of the violation is ensured. When broader noncompliance exists, the provider is required to submit and implement a CAP to ensure that the policy, procedure, or practice that led to the noncompliance has been corrected so that future provision of services to other children is compliant. Resources include the Bureaus of Early Intervention and the EI Monitoring Program.

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**Note:** For this indicator, report data on the correction of findings of noncompliance the State made during FFY09/SFY10 (July 1, 2009 through June 30, 2010) and verified as corrected as soon as possible and in no case later than one year from identification.

### Timely Correction of FFY09/SFY10 Findings of Noncompliance (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State made during FFY09/SFY10 (the period from July 1, 2009 through June 30, 2010) (Sum of Column a on the Indicator C 9 Worksheet)	33
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	28
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	5

### Correction of FFY09/SFY10 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

1. Number of FFY09/SFY10 findings not timely corrected (same as the number from (3) above)	5
2. Number of FFY09/SFY10 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	1
3. Number of FFY09/SFY10 findings <u>not</u> yet verified as corrected [(4) minus (5)]	4

### Actions Taken if Noncompliance Not Corrected

When a finding of noncompliance is identified, a CAP to address noncompliant policies, procedures, and practices must be submitted and implemented. On an annual basis, if a finding is not verified as corrected, the CFC office must reassess policies, procedures and practices and develop and implement a new CAP. In addition, noncompliance is considered in making local determination scores. The following items are taken into consideration: 1) if an agency fails to submit a credible corrective action plan, fails to make adequate progress, or fails to implement major features of the plan and 2) If the CFC office has more than one finding of noncompliance pending from SFY09 or longer.

### Verification of Correction of FFY09/SFY10 findings (either timely or subsequent)

The Illinois Early Intervention Program ensures that noncompliant policies, procedures and/or practices have been revised and the noncompliance has been corrected. The following procedure outlines the steps that ensure correction of noncompliance, including submission, approval, and implementation of a corrective action plan; verification of correction of individual instances of noncompliance; and the use of updated data showing compliance with statutory/regulatory requirements.

### Describe the specific actions that the State took to verify the correction in FFY09/SFY10 of findings of noncompliance identified in FFY09/SFY10:

Monitoring activities are used to identify findings of noncompliance for Indicator 8A (IFSPs with transition steps and services). As part of a contractual agreement with the lead agency, the Illinois EI Monitoring Program conducts annual onsite monitoring visits to the 25 CFC offices. File reviews are completed as part of CFC office onsite monitoring visits. The minimum number of files to be reviewed in a CFC office is based upon the numbers of active cases and service coordinators. A minimum of one file will be reviewed for each service coordinator. Reviewed files include all children who have

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transitioned during representative months. The EI Monitoring Program notifies the CFC offices of identified findings of noncompliance within 30 days of the monitoring visit.

- A. Following the monitoring visit, the CFC office with a finding of noncompliance submits a CAP to the EI Monitoring Program for approval. Within six months, the EI Monitoring Program follows up with the CFC office to determine status of CAP implementation. Areas of noncompliance are reviewed at the CFC office's next monitoring visit to ensure CAP implementation.
- B. Child-specific/individual instance correction is documented during the onsite file review to ensure that the required action was completed or the child is no longer in the jurisdiction of the program.
- C. At the next annual compliance monitoring visit, the EI Monitoring Program ensures that the IFSPs of all children transitioning from EI contain transition steps and services.

Data systems are used to identify findings of noncompliance for Indicators 1 (timely service delivery), 7 (45-day timeline) and 8C (transition conference, if child potentially eligible for Part B). Findings are based on data for all children enrolled in the program during a 12month time period ending June 30. Reports are provided on either a monthly or quarterly basis to assist Child and Family Connections (CFC) offices in the identification and correction of noncompliance prior to June 30, including the correction of data entry errors.

- A. A CAP is submitted and its implementation documented. Review and approval of these plans is completed by the Bureau of Early Intervention. CFC offices report on implementation of the plan in six months, or more frequently if the CFC office determination is "Needs Intervention" or "Needs Substantial Intervention." Findings are based on data for all children enrolled in the program during a 12-month time period ending June 30.
- B. Child-specific/individual instance correction is documented through the use of the Cornerstone system and file reviews. Instance of noncompliance are considered resolved when data errors have been corrected, the required action has been completed, or the child is no longer within the jurisdiction of the program.
- C. CFC office implementation of the specific statutory/regulatory requirement is documented when data demonstrate that a CFC office has 100 percent compliance during three consecutive months.

For findings of noncompliance based upon dispute resolution, complaints and hearings, the CFC office/EI provider is notified of the finding and child-specific correction of the violation ensured. When broader noncompliance exists, the CFC office/EI provider is required to submit and implement a CAP to ensure that the policy, procedure, or practice that led to the noncompliance has been corrected so that future provision of services to other children is compliant.

### Correction of Remaining FFY08/SFY09 Findings of Noncompliance (if applicable)

If the State reported less than 100% for this indicator in its FFY08/SFY09 APR and did not report that the remaining FFY 2007 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY08/SFY09 findings noted in OSEP's June 2011 FFY09/SFY10 APR response table for this indicator	29
2. Number of remaining FFY08/SFY09 findings the State has verified as corrected	4
3. Number of remaining FFY08/SFY09 findings the State has NOT verified as corrected [(1) minus (2)]	25

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**Correction of Any Remaining Findings of Noncompliance from FFY07/SFY08 or Earlier (if applicable):** One finding of noncompliance for 8C remains uncorrected from FFY07/SFY08. See indicator 8C for information regarding Program Integrity pilot efforts in this CFC to identify technical assistance and training strategies to address this noncompliance.

**Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):**

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY2010 APR, due February 1, 2012, that the remaining 29 findings of noncompliance identified in the FFY2008 and the remaining one finding of noncompliance identified in FFY2007 that were not reported as corrected in the FFY2009 APR were corrected.  The State's failure to correct longstanding noncompliance raises serious questions about the effectiveness of the State's general supervision system. The State must take the steps necessary to ensure that it can report, in the FFY2010 APR, that it has corrected this noncompliance	See "Correction of Remaining FFY08/SFY09 Findings of Noncompliance," above.
The state must review its improvement activities and review them, if appropriate, to ensure they will enable the State to provide data in the FFY2010 APR, demonstrating the State timely corrected findings of noncompliance identified in the FFY2009 in accordance with IDEA section 635(a)10(A), CFR 303.501, and OSEP Memo 0902... In the FFY10 APR, the State must describe the specific actions that were taken to verify the correction.	See "Describe the specific actions that the State took to verify the correction in FFY09/SFY10 of findings of noncompliance identified in FFY09/SFY10" and status of improvement activities, above.
In addition, in reporting on Indicator 9 in the FFY2010 APR, the State must use the Indicator 9 worksheet.  Further, in responding to Indicators 1, 7, 8A and 8C in the FFY2010 APR, the State must report on the correction of the noncompliance described in this table under those indicators.	See attachments for Indicator 9 worksheet. See narrative in specific indicators.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 (if applicable):**

New Improvement Activity	Timelines & Resources
Longstanding noncompliance will be considered as part of the CFC office local determination process.	Beginning in August 2011, the local determination process will include the consideration of findings of noncompliance from previous fiscal years in making local determination scores. The consequences of

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	<p>poor determination scores include additional reporting requirements and focused monitoring visits.</p> <p>Resources include the Bureaus of Early Intervention and Performance Support Services.</p>
Required CFC offices to use a template provided by the Bureau when developing and reporting on their CAPs to improve the quality of these documents and the success of the implemented strategies.	<p>Beginning in FFY11/SFY12, CFC offices will be required to utilize a defined template for CAPs submitted in response to findings of noncompliance. This format will be used for both developing and reporting on CAP improvement activities.</p> <p>Resources Bureau of Early Intervention</p>
Quarterly, review data to determine if CFC offices with findings of noncompliance have demonstrated 100 percent compliance over three consecutive months. Provide a quarterly report to CFC offices on the status of findings of noncompliance determined through data/EI Monitoring.	<p>Data review will be completed and status reports sent to CFC offices on a quarterly basis.</p> <p>Resources include the Bureaus of Early Intervention and Performance Support Services</p>
Provide targeted technical assistance to ensure correction of noncompliance and improve overall compliance.	<p>By June 30, 2012, provide targeted technical assistance to CFC offices with a pending finding of noncompliance from FF09/SFY10 or FFY08/SFY09 or who demonstrate less than 99.0% compliance with the 45-day timeline in FFY10/SFY11.</p> <p>By June 30, 2012, provide targeted technical assistance to CFC offices with a pending finding of noncompliance from FF09/SFY10 or FFY08/SFY09 or who demonstrate less than 99.0% compliance with the transition meeting being held in FFY10/SFY11.</p> <p>By June 30, 2012, provide targeted technical assistance to CFC offices that demonstrate less than 90.0% compliance with timely services in FFY10/SFY11. Share strategies with all CFC offices to address long-standing noncompliance. The EI Ombudsman will work with these CFC offices to identify issues related to noncompliance and help develop strategies to address them.</p> <p>Resources include the Bureau of EI and the EI Ombudsman</p>

### Overview of the Annual Performance Report Development: See Indicator 1.

#### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 10:** Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
FFY10/SFY11	100 percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

#### Actual Target Data for FFY10/SFY11

##### **Indicator 10:**

From Table 4: [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

**FFY10/SFY11 Result:**  $[(10+6)/16]*100=100\%$

**FFY10/SFY11 Target = 100%**

100 percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

#### **Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:**

The number of signed written complaints increased from 11 in FFY09/SFY10 to 16 in FFY10/SFY11. A reason for this increase cannot be identified by reviewing the content of the complaints. The number of signed complaints continues to be relatively small when compared to the number of families enrolled in the program (approximately 19,000). The number of resolutions that required an extended timeline increased from 3 in FFY09/SFY10 to 6 in FFY10/SFY11. The extended timelines were required to allow staff to investigate complaints, with delays attributable to waits to receive additional information from families or documentation from service providers.

An electronic database is used to track complaint status. Staffing levels have remained stable to facilitate timely resolution. Complaints are resolved within the 60-day timeline, unless exceptional circumstances arise.

#### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11:**

The improvement activities described in the SPP are ongoing efforts.

**Overview of the Annual Performance Report Development:**  
**See Indicator 1.****Monitoring Priority: Effective General Supervision Part C / General Supervision**

**Indicator 11:** Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** Percent =  $[(3.2(a) + 3.2(b)) \text{ divided by } 3.2] \text{ times } 100.$

FFY	Measurable and Rigorous Target
FFY10/SFY11	100 percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

**Actual Target Data for FFY10/SFY11****Indicator 11**

From Table 4:  $[(3.2(a) + 3.2(b)) \text{ divided by } 3.2] \text{ times } 100.$

**FFY10/SFY11 Result:** No due process complaints were received.

**FFY10/SFY11 Target = 100%**

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:**

In FFY09/SFY10 and in FFY10/SFY11, no due process complaints were received.

An electronic database is used to track due process hearing requests/due process complaints. Bureau staffing levels have remained stable to facilitate timely resolution. Contracts are in place with individuals who serve as Impartial Hearing Officer for the Illinois Early Intervention Program.

The State has chosen, pursuant to 34 CFR §303.420(a), to adopt mediation and due process procedures in 34 CFR §300.506 through §300.512, and develop procedures that meet the requirements of §303.425.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11:**

The improvement activities described in the SPP are ongoing efforts.

**Overview of the Annual Performance Report Development:**  
**See Indicator 1.****Monitoring Priority: Effective General Supervision Part C / General Supervision**

**Indicator 12:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
FFY10/SFY11	States are not required to establish baseline or targets if the number of resolution sessions is less than 10.

**Indicator 12:**

From Table 4: (3.1(a) divided by 3.1) times 100.

**FFY10/SFY11 Result:** **No due process complaints were received.**

**FFY10/SFY11 Target = Not established**

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:**

No due process complaints were received in FFY09/SFY10 and in FFY10/SFY11.

Contracts are in place with individuals who serve as Impartial Hearing Officer for the Illinois Early Intervention Program. Legal staff of the Lead Agency is available to facilitate the development and negotiation of all resolution session agreements. Hearing requests are tracked using an electronic database. Bureau staffing levels have remained stable to facilitate timely resolution.

The State has chosen, pursuant to 34 CFR §303.420(a), to adopt mediation and due process procedures in 34 CFR §300.506 through §300.512, and develop procedures that meet the requirements of §303.425.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11:** The improvement activities described in the SPP are ongoing efforts.

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Overview of the Annual Performance Report Development:  
See Indicator 1.

### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 13:** Percent of mediations held that resulted in mediation agreements.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** Percent =  $[(2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1] \times 100$ .

FFY	Measurable and Rigorous Target
FFY10/SFY11	95 percent of mediations held will result in mediation agreements.

#### **Indicator 13**

From Table 4:  $[(2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1] \times 100$ .

**FFY10/SFY11 Result:**  $[(0+0)/0] \times 100 = 100\%$

**FFY10/SFY11 Target = 95%**

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:

In FFY10/SFY11, no mediation requests were received. In FFY09/SFY10, one mediation request was received, resulting in a mediation agreement that was pending on 6/30/10 but signed on 7/1/10.

Bureau staffing levels have remained stable to facilitate timely resolution. An electronic database is used to track mediations.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11:** The improvement activities described in the SPP are ongoing efforts.

### Overview of the Annual Performance Report Development: See Indicator 1.

#### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 14:** State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and settings; and November 1 for dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

States are required to use the “Indicator 14 Data Rubric” for reporting data for this indicator (see Attachment B).

FFY	Measurable and Rigorous Target
FFY10/SFY11	100 percent of state reported data will be timely and accurate.

#### Actual Target Data for FFY10/SFY11:

##### **Indicator 14**

From Part C Indicator Data Rubric - Percent of timely and accurate data = $(C / 70) \times 100$

**FFY10/SFY11 Result: 70/70 X 100 = 100%**

**FFY10/SFY11 Target = 100%**

The Illinois Cornerstone system is a statewide database application that is used by all Child and Family Connections (CFC) offices. The application includes a number of edit checks on numeric data, character data, and data fields, as well as content-specific edit checks and logical consistency checks. The design of the Cornerstone system, including all of the edit and logical consistency checks, help ensure the quality and consistency of the data.

All 618 data tables and APR data used in responses to Indicators 2 through 9 meet computational and logic edit checks. An electronic database is used to track complaint, mediation and administrative hearing status and outcomes used in response to Indicators 10 through 13. On a monthly basis, CFC offices use an electronic reporting system to submit service delay data for Indicator 1. For Indicator 8A, data are pulled from the EI Monitoring Program’s database that includes information from onsite monitoring visits of CFC offices.

All 618 and APR data were accurate to the best knowledge of the lead agency. All reports were submitted in a timely fashion.

#### **Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY10/SFY11:**

**Progress/Slippage for Indicator 14:** In FFY09/SFY10 and in FFY10/SFY11, Illinois demonstrated 100% compliance with data accuracy and report submission.

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**Improvement Activities:** Previous improvement activities continue, such as distribution of monthly statistical reports, CFC office capacity to run its own reports, Cornerstone edit rights, onsite monitoring visits, service coordination training, data sharing with Illinois State Board of Education/Part B, security for protected health information, CFC Procedure Manual updates, Cornerstone system updates, submission of required federal reports, and maintenance of Bureau staffing.

Improvement Activity	Status/Timelines/Resources
Access to Early Intervention Cornerstone data will be improved to expedite the process of generating reports. Currently, Cornerstone is not a standalone system for EI, but is inclusive of other community health programs, which make it less flexible.	Beginning in FFY10/SFY11, Business Objects was used to prepare monthly claim reports, including new Medicaid claims for interpretation/translation services. Resources include the Bureaus of Early Intervention and Performance Support Services
Additional data will be provided to CFC offices so they can monitor compliance with Indicators 1, 7 and 8C and address child-specific and system issues in a timely way.	In FFY10/SFY11, three “mini APR tables” were provided to CFC offices so that they can monitor performance on Indicators 1, 7, and 8C. Resources include the Bureaus of Early Intervention and Performance Support Services.

- Various EI Training Program training session include the review of policies and procedures, including data collection and entry. During FFY10/SFY11, the EI Training Program collaborated with StarNet (Part B training entity) to provide eight transition workshops throughout the state. Systems training included 540 individuals who completed a series of online modules followed by the one-day, face-to-face systems overview training. Forty-six service coordinators completed a series of online service coordination modules in addition to the systems overview training. Training focused on not only the importance of completing the Child Outcomes Summary Form, but also addressing barriers to completing Child Outcomes and improving the quality of Child Outcomes data. Six face to face trainings on Child Outcomes were provided. In addition, two online modules were developed, with 451 people completed these modules.
- A new monthly service delay reporting system was piloted in FFY10/SFY11 and rolled out statewide in August 2011. This system allows CFC offices to identify new children for whom services are delayed, including the delay reason; report on unresolved cases; and make data corrections. An unresolved case list is provided to the CFC offices and is updated as part of this monthly report
- The Bureau has convened several ad hoc workgroups to address specific issues with input from CFC offices and EI providers. An Assistive Technology (AT) workgroup has reviewed the AT request, approval and provision processes in Illinois’ EI Program and is developing recommendations to streamline them. In addition, an IFSP workgroup has been reviewing the content and format of the IFSP to make sure that it complies with federal requirements and provides families and providers relevant and understandable information.
- The Bureau of Early Intervention and Cornerstone staffs have collaborated on the development of standards for submitting the Part C Early Intervention Request to Add/Adjust/Delete Cornerstone Data. This data correction process is a method to ensure accurate data are secured in the Cornerstone system. New procedures were developed and will be implemented in FFY11/SFY12 to streamline procedures used to request correction of data errors and the processing of these requests.

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### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY10/SFY11:**

The improvement activities described in the SPP are ongoing efforts. The following are new improvement activities to be implemented through FFY12/SFY13.

New Improvement Activity	Timelines & Resources
The functionality of the central client tracking/billing system will be improved, including supports for teaming/communication among EI providers, enhanced monitoring functions, and better tracking of timely service.	By June 30, 2013, a web-based client tracking/billing system will be developed and rollout initiated. Resources include the Bureau of EI, the EI CBO, and the CFC offices.
A new monthly service delay reporting system will be rolled out statewide.	By August 2011, all CFC offices will begin using the new monthly service delay reporting system. Resources include the Bureaus of Early Intervention and Performance Support Services
System functions will be reviewed and streamlined/improved, including procedures to ensure accurate data collection.	Recommendations from the AT workgroup will be presented to the IICEI and the initial rollout steps will be completed by July 2012. The IFSP workgroup will review the format and content of the IFSP. Recommendations related to transition will be considered for implementation by January 1, 2012. During July 2011, the updated data correction process will be rolled out. By June 30, 2012, a workgroup involving the CFC managers and EI Bureau staff will review the new process and make recommendations for improvements. Resources include the Bureau of EI, various workgroups, and the IICEI.

## Attachment 1: Part C Indicator C 9 Worksheet

## INDICATOR C-9 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY09/SFY10 (7/1/09 through 6/30/10)	(a) # of Findings of noncompliance identified in FFY09/SFY10 (7/1/09 through 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	2
	Dispute Resolution: Complaints, Hearings	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	12	12	11
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A. IFSPs with transition steps and services;	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	3
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY09/SFY10 (7/1/09 through 6/30/10)	(a) # of Findings of noncompliance identified in FFY09/SFY10 (7/1/09 through 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
preschool and other appropriate community services by their third birthday including:  B. Notification to LEA, if child potentially eligible for Part B; and	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:  C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	13	13	12
	Dispute Resolution: Complaints, Hearings	0	0	0
<b>Sum the numbers down Column a and Column b</b>		33	28	

Percent of noncompliance corrected within one year of identification =  
 (column (b) sum divided by column (a) sum) times 100 - 28/33 X 100= **84.8%**

Data Transmission System (DTS)

**DATE:** September 26, 2011

**STATUS:** ORIGINAL SUBMISSION

**Part C, Dispute Resolution count data are due November 2, 2011.**

Please read the following basic guidelines before completing the Data Transmission System (DTS) forms:

1. To change the size and appearance of the text on the spreadsheet, select VIEW from the toolbar, select ZOOM, and then select the percentage increase or decrease.
2. Enter the appropriate data into the YELLOW shaded areas on each page of the form. Please be sure to read section heading descriptions so data are entered in the correct section. Also, be sure to enter any State and date information. The two-digit State postal code should appear on every page of the form. A list is available on PAGE1. Use the scroll bar or the up or down arrow keys to scroll through the list. Click on the appropriate State postal code to select it.
3. If you choose to cut and paste data from another area, use the PASTE SPECIAL option and select VALUES. This will protect the current formats.
4. Any comments regarding the submitted data should be entered on the last page of the workbook, titled COMMENTS.
5. Save the completed forms. Please be sure that your State postal code appears in the file name. (Example: Maryland - CT410MD.XLS)
6. Each cell in the attached spreadsheet contains a "-9" value by default. If you do not enter a count in each cell it will be determined that the State did not collect the requested data element. In such cases, the State must provide an explanation in the comments section for the missing data. Note that if the submission is missing a required data element, it will not be entered into DANS and the State will be required to resubmit.
7. RED cells indicate computational errors or an error in reporting race/ethnicity. Sum totals for race/ethnicity should not be greater than reported totals. Please make sure there are NO RED CELLS before saving and submitting data.
8. Please return electronic copies of completed DTS forms to Westat: IDEAData\_PartC@WESTAT.COM
9. If you have any questions or comments, please contact Luis Romero ([LuisRomero@westat.com](mailto:LuisRomero@westat.com)).

Version Date: 8/12/2011

U.S. DEPARTMENT OF EDUCATION  
OFFICE OF SPECIAL EDUCATION  
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TABLE 4  
REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE  
INDIVIDUALS WITH DISABILITIES EDUCATION ACT  
**2010-11**

PAGE 1 OF 1

OMB NO.: 1820-0678

FORM EXPIRES: 1/31/2013

STATE:

**IL - ILLINOIS**

SECTION A: Written, Signed Complaints	
(1) Total number of written, signed complaints filed	16
(1.1) Complaints with reports issued	16
(a) Reports with findings of noncompliance	0
(b) Reports within timeline	10
(c) Reports within extended timeline	6
(1.2) Complaints pending	0
(a) Complaints pending a due process hearing	0
(1.3) Complaints withdrawn or dismissed	0
SECTION B: Mediation Requests	
(2) Total number of mediation requests received	0
(2.1) Mediations held	0
(a) Mediations held related to due process complaints	0
(i) Mediation agreements related to due process complaints	0
(b) Mediations held not related to due process complaints	0
(i) Mediation agreements not related to due process complaints	0
(2.2) Mediations pending	0
(2.3) Mediations not held	0
SECTION C: Due Process Complaints	
(3) Total number of due process complaints filed (for all States)	0
(3.1) Resolution meetings (applicable ONLY for States using Part B due process hearing procedures)	0
(a) Written settlement agreements reached through resolution meetings	0
(3.2) Hearings fully adjudicated (for all States)-	0
(a) Complete EITHER item (1) OR item(2), below, as applicable.	
(1) Decisions within timeline - <u>Part C</u> Procedures	-0
(2) Decisions within timeline - <u>Part B</u> Procedures	0
(b) Decisions within extended timeline (applicable ONLY if using Part B due process hearing procedures)	0
(3.3) Hearing pending (for all States)	0
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing) (for all States)	0

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PROGRAMS

COMMENTS

TABLE 4

REPORT OF DISPUTE RESOLUTION UNDER PART C OF THE  
INDIVIDUALS WITH DISABILITIES EDUCATION ACT  
**2010-11**

STATE IL - ILLINOIS

COMMENTS

The number of signed complaints filed increased from 11 in 2009-10 to 16 in 2010-11. A reason for this increase cannot be identified by reviewing the content of the complaints. The number of signed complaints continues to remain relatively small when compared to the number of families enrolled in the program (approximately 19,000). As seen in 1.1c, extended time lines were necessary in six instances to allow staff time to investigate complaints, including receiving and reviewing additional information from families and documentation from providers. No mediation requests or due process complaints were received in 2010-11, with only one mediation request received in 2009-10.

**FFY 2010 APR (Illinois)**

<b>2010 SPP/APR Data - Indicator 14</b>			
<b>APR Indicator</b>	<b>Valid and Reliable</b>	<b>Correct Calculation</b>	<b>Total</b>
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8a	1	1	2
8b	1	1	2
8c	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	1	1	2
13	1	1	2
	<b>Subtotal</b>		30
<b>APR Score Calculation</b>	<b>Timely Submission Points -</b> If the FFY 2010 APR was submitted on-time, place the number 5 in the cell on the right.		5
	<b>Grand Total - (Sum of subtotal and Timely Submission Points) =</b>		35

## FFY 2010 APR (Illinois)

618 Data - Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/2/11	1	1	1	1	4
Table 2 - Program Settings Due Date: 2/2/11	1	1	1	1	4
Table 3 - Exiting Due Date: 11/2/11	1	1	1	N/A	3
Table 4 - Dispute Resolution Due Date: 11/2/11	1	1	1	N/A	3
				Subtotal	14
618 Score Calculation				Grand Total (Subtotal X 2.5) =	35

Indicator #14 Calculation	
A. APR Grand Total	35.00
B. 618 Grand Total	35.00
C. APR Grand Total (A) + 618 Grand Total (B) =	70.00
Total NA in APR	0.00
Total NA in 618	0.00
Base	70.00
D. Subtotal (C divided by Base*) =	1.000
E. Indicator Score (Subtotal D x 100) =	100.0

\*Note any cell marked as N/A will decrease the denominator by 1 for APR and 2.5 for 618