



NEW MEXICO

Family Infant
Toddler Program

FIT Annual Performance Report (APR)

FY 2011 Guidelines

(Including Audit Tool-worksheet
and data collection methods)



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Key Points:

- An electronic APR template (figure 1) is provided for agency use in recording current data, analysis of data, target setting and activities to meet targets. Many of the current data fields are pre-populated with FIT KIDS data. This template summarizes information for all indicators, and when completed is submitted to the FIT Program. The guidelines follow the format of this electronic template.
- There are different methods required to obtain data for each indicator. These guidelines will instruct providers on the correct data collection method for every indicator.
- Agency audits pertain to indicators #1, #8a & #8c, & #14.
 - Audit Tool-Worksheets (figure 2) for hands on use while auditing must be completed.

Provider Agency: «Provider_Name»

Annual Performance Report for FY 2011

Indicator 1. Children and families receive all services on their IFSP in a timely manner (within 30 days).

Measurement: Percent of children / families who receive services on their IFSP within 30 calendar days of the IFSP.

Baseline / current data - Fiscal Year 2011 (July 01st 2010 - June 30th 2011):
 Number of children and families who received all services on their IFSP in a timely manner (within 30 days of IFSP) _____ divided by _____ equals _____ %
 sample size of _____ compliance of _____ %

Analysis of baseline / current data:
 Target for FY 11 was 100%. This target was met? YES NO.
 Provide an analysis of the progress made toward the target as well as barriers/challenges experienced in meeting target.

Target(s) - Fiscal Year 2012 (July 01st 2011 - June 30th 2012):
 This is a compliance indicator. Therefore the target for FY 12 is 100%

Planned activities to meet or maintain target(s): If current data is less than 100%, improvement activities must clearly demonstrate methodology for reaching 100% within 1 year from date of this APR submission.

	Improvement (or Maintenance) activities <i>Note: Incorporate any existing Plan of Correction activities from Focused Monitoring or Community Based Assessment related to this indicator</i>	Timeliness	Resources / Technical Assistance / training needed
Policy & Procedures			
Training & Technical Assistance			
Quality Assurance			
Infrastructural Staffing			
Other			

FIT Program Annual Performance Report for FY 11 Page 1

Figure 1: APR Template

Timely Delivery of Service Audit Tool -Worksheet

Agency: _____ Reviewer: _____ Child's Name: _____
 Date of Initial or Annual IFSP in FY 11: _____ Service Coordinator for this Child/Family: _____

Children and families receive all services on their IFSP in a timely manner (within 30 days) (For use with APR Indicator 1)			Did service on the initial or annual IFSP begin within 30 days of IFSP?		Indicate below the reason service delivery was delayed.	
A. List all services all on IFSP, including any services that were added to the IFSP via revisions / amendments <i>(revise consultation, revise service coordination, eval & assess, and non-FIT services and services provided less frequently than once a month)</i>	B. Service Start Date	C. Date Service Delivered	D. Yes <input type="checkbox"/> No <input type="checkbox"/>	E. If no, record actual number of days before service was delivered below and see column F right.	F	
			<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> Agency-Insufficient Staff Agency-Other Agency-Staff medical Agency-Staff Schedule Agency-Staff Shortage Other Other-CAPTA 	<ul style="list-style-type: none"> Family-Choice Family-Medical Family-Other Family-Schedule Family-Unavailable Other-Agency Not SC Other-Weather
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
Did all services on IFSP begin within 30 days of date of IFSP or revision/amendment? (To respond with a "yes" all answers in check boxes for columns D, must be yes)			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, record reason for delay	

Do not submit information for the APR on this form. This form is to be copied and used to audit files, then retained at the agency for DOH auditing purposes. However, all information must be summarized and transferred to the Timely Delivery of Service Summary Form in the excel workbook to be submitted electronically with the APR.
 FIT Annual Performance Report (APR) FY 2011 Guidelines (Revised July 2011)

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Figure 2: Timely Delivery of Services Audit Tool Worksheet

- Information from these Audit Tools will be transferred onto the provided Audit Summary Sheets (*figure 3*), which calculate percentage of compliance automatically. These Summary Sheets in an Excel format will be submitted with the completed APR template.

The screenshot shows an Excel spreadsheet titled "Timely Delivery of Service Summary Sheet". It is designed for tracking service delivery for children with Individualized Family Service Plans (IFSPs). The main data area consists of rows for individual children, with columns for their name, the date of their IFSP, and a grid of checkboxes to indicate whether specific services were delivered on time. Services tracked include Speech, Occupational, Physical, and Family-Medical. A summary box at the bottom of the sheet provides a calculated compliance percentage, which is shown as 95.24%.

Figure 3: Timely Delivery of Services Audit Summary Tool

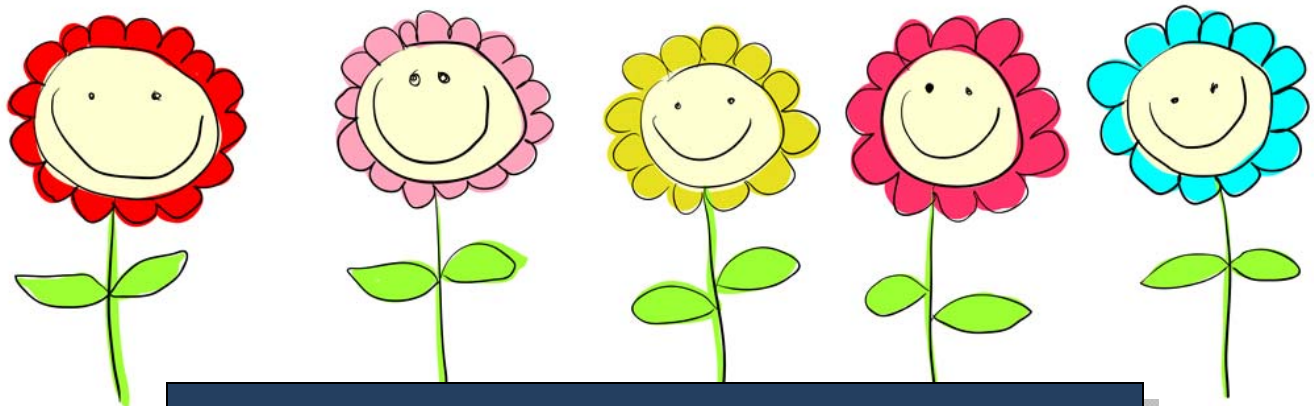
- Indicators have been numbered to match the Office of Special Education Program’s (OSEP) indicators. Several indicators are skipped in this reporting, as they will be reported at a State level. Providers will respond only to Indicators 1, 2, 3, 4, 5, 6, 7, 8 (a & c) & 14.
- At this time, Indicators 3 & 4 measurements will relate only to compliance in the collection of the data and not the results of the data itself.
- OSEP considers Indicators 1, 7, 8 & 14 to be “compliance indicators.” This means that providers are expected to perform at 100% compliance. If compliance is not currently at 100%, providers must clearly indicate their methodology for reaching 100% within one year from the date of this APR submission. Targets for FY 12 must be set at 100%. Compliance indicators are noted both in the guidelines and in the APR Template for FY 11.
- For Indicator 2, which is not designated as “compliance indicator”, these guidelines indicate the requirements for setting “rigorous targets.”
- Any activities from an open Plan of Correction from a Focused Monitoring or Community Based Assessment must be incorporated into the provider’s planned activities section of the relevant indicator.

Changes for FY 11 APR

- Far more emphasis is placed on analysis and improvement activities than ever before. If either analysis or improvement activities are inadequate, APRs will be returned to provider agencies for urgent correction and resubmission. In these guidelines, each section specifically discusses requirements for the analysis and planned activities to meet targets.
- Indicator 1 Audit Summary Sheet (excel format) now requires agencies to list the date that all applicable services were initially provided. (This is an OSEP requirement) For example, if a child had Special Instruction, PT and SLP listed on his IFSP, agencies would record the date on the worksheet showing when each service was initially provided. If the child initially

received Special Instruction on 1-5-11, PT on 1-10-11 and SLP on 1-13-11, the agency would report 1-13-11 on the Audit Summary sheet as the “Date all applicable services were initially delivered.”

- Indicator 8b data (LEA notifications) will not be gathered from this APR. Data will be gathered for this indicator separately.
- The APR will be due from providers on **September 15, 2011** and must be submitted electronically to the FTP website. Hard copies and pdf. documents **will not** be accepted.



For additional assistance in understanding and completing the FY 2011 APR (particularly surrounding data collection), please view the online flash presentation of FIT FY 11 APR Guidelines at www.fitprogram.org

Indicator 1. Children and families receive all services on their IFSP in a timely manner (within 30 days)

Measurement:

Percent of children / families who receive services on their IFSP within 30 calendar days of the start date listed on the IFSP.

Baseline / current data:

Prior to reporting current data in the APR, it will be necessary for providers to complete an audit according to the following guidelines:

Using the required FIT Program *Timely Delivery of Services Audit tool –Worksheet* (see page 19), the provider agency will audit a random sample (generated by the FIT Program) of child records with an active IFSP in FY 11. This completed audit tool must be retained onsite for at least one year for DOH auditing purposes.

The population from which the random sample is taken is:
Children with an active IFSP in FY11 (July 01, 2010 – June 30, 2011)

NOTE: The sample used for Indicator 1 is the same sample that will be used for Indicator 14

The audit shall:

- Determine whether ALL early intervention services listed on the child’s IFSP, including those added at a later date, were delivered within 30 days of **the service start date** on the IFSP with the following exceptions:
 - Providers should not count consultation, service coordination, evaluation & assessment services, respite, or non-FIT services that may be listed on the IFSP, such as child care, Early Head Start, etc.
- If service delivery exceeds 30 days, the number of days before service delivery occurred must be recorded on the audit tool. This information is required to validate that services were eventually delivered, even if they were not timely. This information will also help you with your analysis.
- When services are delayed beyond 30 days, providers must record the reason on the audit tool.

Summary Sheet: Provider agencies must transfer summarized data from the *Timely Delivery of Services Audit Tool Worksheet* to the *Timely Delivery of Services Summary Sheet* in the provided Excel workbook developed by the FIT Program. (Open the Excel workbook called “FY 11 APR Audit Summary Sheets” and click on the tab at the bottom called “Timely Service Delivery.”) **The Summary Sheet will automatically calculate raw numbers and percentage of compliance. It will also adjust any family/inclement weather reasons (see page 19) for delay toward compliance.**

When the summary sheet has been completed, transfer the calculated totals from the summary sheet to the APR template in the section for baseline/current data.

Analysis of baseline / current data:

- State whether the FY 2011 target was met.
- Provide an analysis of the progress made toward the target, as well as barriers/challenges experienced in meeting target.
- If agency received a Focused Monitoring or Community Based Assessment from the FIT Program and findings were made related to this indicator during FY 2011, explain the impact of the resulting improvement activities on the agency's current performance.
- If progress has been made since agency's FY 10 performance, explain the factors contributing to this.
- If agency performance has slipped from FY 10 performance, provide a detailed explanation of the causes and be certain to include improvement activities (in the "planned activities to meet target" section) to address these causes.
- If agency performance has reached or been maintained at 100%, please explain how agency has achieved this exemplary level of performance.
- Further analysis of baseline / current data may include looking at a variety of factors that may be contributing to the results. A "root analysis" form, sent as a separate document, can be used to assist in a thorough analysis and appropriate improvement strategies.

Target(s):

This is considered a compliance indicator by OSEP; therefore the target to be achieved in Fiscal Year 2012 (July 1st 2011 – June 30th 2012) for this indicator is 100%.

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets. If agency received a Focused Monitoring or Community Based Assessment from the FIT Program during FY 2011, ongoing improvement activities from the plan of correction (such as a change in how agency conducts QA procedures) must be included in the planned activities.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Improvement activities must address issues discussed in the analysis. Depending on the current compliance and the previous analysis, it may not be necessary to complete each category. Or, multiple steps in each category may be necessary.

If current compliance is less than 100%, the improvement activities must clearly demonstrate methodology for reaching 100% within 1 year from date of submission.

Incorporate any existing Plan of Correction activities from Focused Monitoring or Community Based Assessment related to this indicator.

Indicator 2. Children and families receive early intervention in natural environments

Measurement:

Percent of children and families who primarily receive services in the home or community-based settings.

Baseline / current data:

The level of performance for this indicator has already been calculated by the FIT Program and is recorded in each providers' APR narrative template

Analysis of baseline / current data:

State whether the FY 2011 target was met. Provide an analysis of the progress made toward the target, as well as barriers/challenges experienced in meeting target.

Further analysis of baseline / current data should include looking at a variety of factors that may be contributing to the results. Analysis may include looking at the data by county, race /ethnicity, eligibility category, child age.

Target(s):

Establish a target to be achieved in Fiscal Year 2012 (July 01 2011 – June 30th 2012) for this indicator. Use the following established minimum requirements when developing targets.

Rigorous Target

Baseline/current data	Target must indicate:
<50% compliance	Improvement over current data by at least 25%
>51%<70% compliance	Improvement over current data by at least 15%
>71%<80% compliance	Improvement over current data by at least 10%
>81%<90% compliance	Improvement over current data by at least 5%

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedures
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Improvement activities must address issues discussed in the analysis. Depending on the current compliance and the previous analysis, it may not be necessary to complete each category. Or, multiple steps in each category may be necessary

Incorporate any existing Plan of Correction activities from Focused Monitoring or Community Based Assessment related to this indicator.

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.

Measurement:

Percent of infants and toddlers who received services for at least 6 months and exited the program during the fiscal year who had entry and exit Child Outcomes Data collected and recorded in FIT-KIDS.

Baseline / current data:

The level of performance for this indicator has already been calculated by the FIT Program and is recorded in each providers' APR narrative template

Analysis of baseline / current data:

Provide an analysis of the barriers/challenges experienced in meeting the requirements of this indicator.

Further analysis of baseline / current data should include looking at a variety of factors that may be contributing to the results. Analysis may include looking at the data by service coordinator, child's eligibility category, location of child's residence, reasons for exits from services, etc.

Target(s):

The FIT Program requires that providers collect 100% of data required; therefore the target to be achieved in Fiscal Year 2012 (July 1st 2011 – June 30th 2012) for this indicator is 100%.

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Improvement activities must address issues discussed in the analysis. Depending on the current compliance and the previous analysis, it may not be necessary to complete each category. Or, multiple steps in each category may be necessary

Incorporate any existing Plan of Correction activities from Community Based Assessment related to this indicator.

Indicator 4. Percent of families participating in Part C who report that early intervention services have helped their families (a) know their rights, (b) effectively communicate their children's needs, and (c) help their children develop and learn.

Measurement:

Percent of families sampled who responded to the Family Outcomes Survey.

Baseline / current data:

Please refer the baseline information provided to you by the FIT Program.

Analysis of baseline / current data:

Provide an analysis of the barriers/challenges experienced in meeting the requirements of this indicator.

Further analysis of baseline / current data should include looking at a variety of factors that may be contributing to the results. Analysis may include looking at the data by service coordinator, child's eligibility category, location of child's residence, reasons for exits from services, etc.

Target(s):

The FIT Program has established a target of a minimum of **20% return rate** from surveys.

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Improvement activities must address issues discussed in the analysis. Depending on the current compliance and the previous analysis, it may not be necessary to complete each category. Or, multiple steps in each category may be necessary

Indicator 5. Percent of infants and toddlers birth to age 1 and their families served with IFSPs

Measurement:

Percent of infants and toddlers **birth to age 1** with IFSPs for each county served

Baseline / current data:

The level of performance for this indicator has already been calculated by the FIT Program and is recorded in each providers' APR narrative template

Analysis of baseline / current data:

State whether the FY 2011 target was met. Provide an analysis of the progress made toward the target, as well as barriers/challenges experienced in meeting target.

Further analysis of baseline / current data should include looking at a variety of factors that may be contributing to the results. Analysis may include looking at the data by county, race /ethnicity, eligibility category, child age etc.

Target(s):

Establish a target to be achieved in Fiscal Year 2012 (July 1st 2011 – June 30th 2012) for each county served. **Note: this target should be made in collaboration with other FIT provider agencies in counties served by more than one provider.**

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets. Note: This indicator must involve collaboration with other FIT provider agencies in counties served by more than one provider.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Indicator 6. Percent of infants and toddlers birth to age 3 and their families served with IFSPs

Measurement:

Percent of infants and toddlers **birth to age 3** with IFSPs for each county served

Baseline / current data:

The level of performance for this indicator has already been calculated by the FIT Program and is recorded in each provider's APR narrative template.

Analysis of baseline / current data:

State whether the FY 2011 target was met. Provide an analysis of the progress made toward the target, as well as barriers/challenges experienced in meeting target.

Further analysis of baseline / current data should include looking at a variety of factors that may be contributing to the results. Analysis may include looking at the data by county, race /ethnicity, eligibility category, child age etc.

Target(s):

Establish a target to be achieved in Fiscal Year 2012 (July 1st 2011 – June 30th 2012) for each county served. **Note: this target should be made in collaboration with other FIT provider agencies in counties served by more than one provider.**

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets. Note: this indicator must involve collaboration with other FIT provider agencies in counties served by more than one provider.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

If planned activities are the same as for Indicator #5, simply refer reader to #5.

Indicator 7. Initial IFSPs meetings are conducted within 45 days

Measurement:

Percent of initial IFSPs held within 45 days of receipt of the referral

Baseline / current data:

Based on data from FIT-KIDS, the level of compliance for this indicator has already been calculated by the FIT Program and is recorded in each provider's APR narrative template

Analysis of baseline / current data:

- State whether the FY 2011 target was met.
- Provide an analysis of the progress made toward the target, as well as barriers/challenges experienced in meeting target.
- If agency received a Focused Monitoring or Community Based Assessment from the FIT Program and findings were made related to this indicator during FY 2011, explain the impact of the resulting improvement activities on the agency's current performance.
- If progress has been made since agency's FY 10 performance, explain the factors contributing to this.
- If agency performance has slipped from FY 10 performance, provide a detailed explanation of the causes and be certain to include improvement activities (in the "planned activities to meet target" section) to address these causes.
- If agency performance has reached or been maintained at 100%, please explain how agency has achieved this exemplary level of performance.

Further analysis of baseline / current data should include looking at a variety of factors that may be contributing to the results. Analysis may include looking at the data by county, race /ethnicity, eligibility category, child age, etc. as well as internal management issues that may be effecting compliance in this area such as staff training, policies and procedures, quality assurance, etc. A "root analysis" form, sent as a separate document, can be used to assist in a thorough analysis and appropriate improvement strategies.

Analysis should also include the prevalence of exceptional family circumstances or inclement weather that was documented in the child's record that contributed to the 45 day timeline not being met.

The provider may also want to analyze other factors related to meeting the 45 day timeline such "related to CAPTA", "staff shortage" etc. However these factors are not seen as exceptional circumstances for exceeding the 45 day timeline.

Target(s):

This is considered a compliance indicator by OSEP; therefore the target to be achieved in Fiscal Year 2012 (July 01 2011 – June 30th 2012) for this indicator is 100%.

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets.

If current compliance is less than 100%, the improvement activities must clearly demonstrate methodology for reaching 100% within 1 year from date of submission.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Improvement activities must address issues discussed in the analysis. Depending on the current compliance and the previous analysis, it may not be necessary to complete each category. Or, multiple steps in each category may be necessary.

Incorporate any existing Plan of Correction activities from Focused Monitoring or Community Based Assessment related to this indicator.

Indicator 8. Children and families receive timely transition planning to support their child's transition to preschool and / or other appropriate community settings

Measurement:

- A. Percent of IFSPs with transition steps and services.
- C. Percent of transition conferences held with the family and appropriate receiving agency personnel at least 90 days prior to the child's third birthday.

Baseline / current data:

Prior to reporting current data information in the APR, it will be necessary for providers to complete an Audit according to the following guidelines: The sample will be generated by the FIT Program and will be derived from the population of:

Children who turned 3 in FY10 (July 01, 2010 – June 30, 2011)

Using the required *FIT Program Transition Audit Tool – Worksheet* found on page 21 of this document, the provider agency will audit / review all applicable child records. The audit will determine whether IFSPs for these children have transition steps and services listed, i.e. a transition plan is in place. This tool/worksheet must be retained on-site for DOH auditing purposes.

1. **For Indicator 8A**, the audit will determine whether there is documentation of a transition plan with steps and services. Record the information on the worksheet before moving on to Step 2 of the audit.
2. **For Indicator 8C**, the audit will determine whether there is documentation of a transition conference that was held with the family and appropriate receiving agency personnel at least 90 days prior to the child's third birthday.

If the transition conference was not held at least 90 days prior to the child's third birthday, the provider must include the reason for the delay.

If the transition conference was held and the receiving agency did not show up for the meeting this can count as being held (even though the meeting in reality would need to be rescheduled).

Summary Sheet: Provider agencies must transfer data for both 8A and 8C from the *Transition Audit Tool- Worksheet* to the *Transition Summary Sheet* in the provided Excel workbook developed by the FIT Program

The Summary Sheet will automatically calculate raw numbers and percentage of compliance. It will also adjust any family/inclement weather reasons (see page 23) for delay toward compliance.

Analysis of baseline / current data:

- State whether the FY 2011 target was met.
- Provide an analysis of the progress made toward the target, as well as barriers/challenges experienced in meeting target.

- If agency received a Focused Monitoring or Community Based Assessment from the FIT Program and findings were made related to this indicator during FY 2011, explain the impact of the resulting improvement activities on the agency's current performance.
- If progress has been made since agency's FY 10 performance, explain the factors contributing to this.
- If agency performance has slipped from FY 10 performance, provide a detailed explanation of the causes and be certain to include improvement activities (in the "planned activities to meet target" section) to address these causes.
- If agency performance has reached or been maintained at 100%, please explain how agency has achieved this exemplary level of performance.

Further analysis of baseline / current data may include looking at a variety of factors that may be contributing to the results. A "root analysis" form, sent as a separate document, can be used to assist in a thorough analysis and appropriate improvement strategies.

Further analysis of baseline / current data should include looking at a variety of factors that may be contributing to the results. Analysis may include looking at the data by county, race /ethnicity, eligibility category, child age, etc. A "root analysis" form, sent as a separate document, can be used to assist in a thorough analysis and appropriate improvement strategies.

Target(s):

This is considered a compliance indicator by OSEP; therefore the target to be achieved in Fiscal Year 2012 (July 1st 2011 – June 30th 2012) for both A & B of this indicator is 100%.

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Improvement activities must address issues discussed in the analysis. Depending on the current compliance and the previous analysis, it may not be necessary to complete each category. Or, multiple steps in each category may be necessary.

If current compliance is less than 100%, the improvement activities must clearly demonstrate methodology for reaching 100% within 1 year from date of submission.

Incorporate any existing Plan of Correction activities from Focused Monitoring or Community Based Assessment related to this indicator.

<p>Note: Indicators 9 thru 13 will be reported at the State level</p>
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Indicator 14. Data reported in the FIT database is timely and accurate

Measurement:

Percent of data entered into the FIT Database that is accurate using the FIT Database validation tool.

Baseline / current data:

Prior to reporting current data on the APR, it will be necessary for providers to complete an Audit according to the following guidelines:

Using required FIT Program *Data Validation Audit Tool*, the provider agency will audit / review a random sample (**Use the same sample used for Indicator 1**) of child records with an active IFSP in FY 11. The audit will determine whether the data fields entered into the FIT database match those in the child record. This audit tool should be retained at the agency site for DOH auditing purposes.

The population from which the random sample is taken is:
Children with an active IFSP in FY 11 (July 01, 2010 – June 30, 2011)

It is suggested that the Child Summary Report from FIT KIDS be used with the *Data Validation Audit Tool* to reduce the amount of searching through the database for information on the child. The worksheet indicates the information that can be obtained from the Child Summary Report and the information that must be reviewed by entering the child's record in FIT KIDS. The purpose of this audit is to determine if the correct data was entered into FIT-KIDS, as this report includes all the relevant data fields for the child. Complete a separate *Data Validation Audit Tool* for each child in the sample.

Summary Sheet: Provider agencies must transfer and summarize data from the *Data Validation Audit Tool* to the *Data Validation Summary Sheet* in the provided Excel workbook developed by the FIT Program.

In addition to reporting the percentage of compliance in each area on the APR, be certain to include raw numbers (the number in your sample and the number for which there was compliance). When information is completed for each child in the sample, these figures will be calculated automatically on the audit tool and must be transferred to the APR document itself in the baseline/current data section.

Analysis of baseline / current data:

State whether the FY 2011 target was met. Provide an analysis of the progress made toward the target, as well as barriers/challenges experienced in meeting target.

Further analysis of the processes and procedures used in data entry may help in determining why certain data is entered incorrectly.

Target(s):

This is considered a compliance indicator by OSEP; therefore the target to be achieved in Fiscal Year 2012 (July 1st 2011 – June 30th 2012) for this indicator is 100%.

Planned activities to meet target(s):

Describe the improvement activities; timelines; and resources, technical assistance and training needed to achieve the above targets.

In an effort to assist providers in considering improvement methods, activities are divided into the following categories:

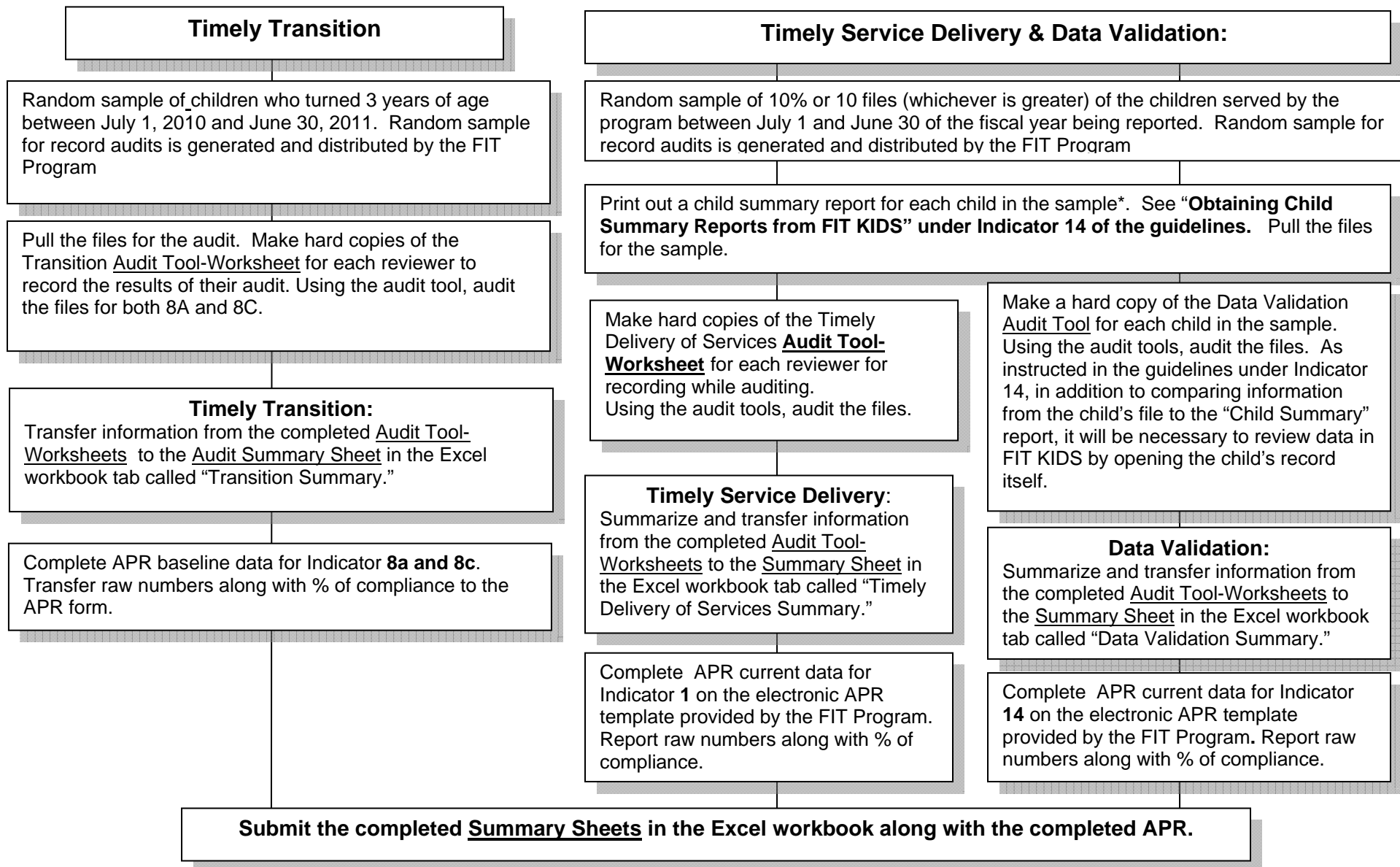
- Policy and Procedure
- Training and Technical Assistance
- Quality Assurance
- Infrastructure/Staffing
- Other

Improvement activities must address issues discussed in the analysis. Depending on the current compliance and the previous analysis, it may not be necessary to complete each category. Or, multiple steps in each category may be necessary.

If current compliance is less than 100%, the improvement activities must clearly demonstrate methodology for reaching 100% within 1 year from date of submission.

Incorporate any existing Plan of Correction activities from Focused Monitoring or Community Based Assessment related to this indicator.

Flow Chart for Auditing



Timely Delivery of Service Audit Tool -Worksheet

Agency: _____ Reviewer: _____ Child's Name: _____

Date of Initial or Annual IFSP in FY 11: _____ Service Coordinator for this Child/Family: _____

Children and families receive all services on their IFSP in a timely manner (within 30 days) (For use with APR Indicator 1).			Did service on the initial or annual IFSP begin within 30 days of IFSP?		F. Indicate below the reason service delivery was delayed.
A. List all services all on IFSP, including any services that were added to the IFSP via revisions / amendments <i>(except consultation, respite, service coordination, eval & assess, and non-FIT services and services provided less frequently than once a month)</i>	B. Service Start Date	C. Date Service Delivered	D. Yes <input type="checkbox"/>	E. No <input checked="" type="checkbox"/> (if no, record actual number of days before service was delivered below and see column at right).	<ul style="list-style-type: none"> • Agency-Insufficient Info. • Agency-Insufficient Rscs. • Agency-Other • Agency-Staff medical • Agency-Staff Schedule • Agency-Staff Shortage • Other • Other-CAPTA
			<input type="checkbox"/>	<input type="checkbox"/> _____	
			<input type="checkbox"/>	<input type="checkbox"/> _____	
			<input type="checkbox"/>	<input type="checkbox"/> _____	
			<input type="checkbox"/>	<input type="checkbox"/> _____	
			<input type="checkbox"/>	<input type="checkbox"/> _____	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/> _____	
			<input type="checkbox"/>	<input type="checkbox"/> _____	
Did <u>all</u> services on IFSP begin within 30 days of date of IFSP or revision/amendment? (to respond with a "yes" all answers in check boxes for columns D must be yes)			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, record reason for delay

Do not submit information for the APR on this form. This form is to be copied and used to audit files, then retained at the agency for DOH auditing purposes. **However, all information must be summarized and transferred to the Timely Delivery of Service Summary Form in the excel workbook to be submitted electronically with the APR.**
 FIT Annual Performance Report (APR) FY 2011 Guidelines (Revised July 2011)

Transition Audit Tool-Worksheet Instructions and Example

Examples:

Gina turned 3 on April 18, 2011. She had a transition plan with steps and services. Also, in the child's record there was documentation of a 90 transition conference with her family and the appropriate receiving agency personnel present at least 90 days prior to her third birthday.

Pierre's third birthday was on October 21, 2010. There was no transition plan in place, but there was documentation on file that a 90 day conference was held with the appropriate personnel two months prior to his third birthday. Pierre had been hospitalized and his family was unable to meet with FIT before that date.

Frank and his family have had transition planning documented with steps and services, but no documentation of a conference taking place. It appears that this was an oversight on the part of the agency.

Transition Audit Tool -Worksheet Children and families receive timely transition planning to support their child's transition to preschool and/or other appropriate community settings. (For use with APR Indicator 8).		A. Transition Plan: IFSP has transition steps and services in place			C. Transition Conference: Documentation of a transition conference held with family and appropriate receiving agency personnel at least 90 days prior to the child's third birthday		
Child's Name	Date of Child's 3rd Birthday	<u>Yes</u>	<u>No</u>	Date 90 Day Transition Conference Held	<u>Yes</u>	<u>No</u> If no, see column on right:	If No, record reason for delay
Gina Tres	4-18-11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1-7-11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pierre Troi	10-21-10	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8-20-10	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Family-Medical
Frank Tre'	5-15-11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	none	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Agency-Other
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

Do not submit information for the APR on this form. This form is to be copied and used to audit files. **All information must be transferred to the Transition Summary Form in the excel workbook to be submitted electronically with the APR.**

Transition Audit Tool-Worksheet Children and families receive timely transition planning to support their child's transition to preschool and/or other appropriate community settings. (For use with APR Indicator 8).		A. Transition Plan: IFSP has transition steps and services in place			C. Transition Conference: Documentation of a transition conference held with family and appropriate receiving agency personnel at least 90 days prior to the child's third birthday		
Child's Name	Date of Child's 3rd Birthday	<u>Yes</u>	<u>No</u>	Date 90 day Transition Conference Held	<u>Yes</u>	<u>No</u> If no, see column on right:	If No, record reason for delay
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

Do not submit information for the APR on this form. This tool is to be copied and used to audit files. All information must be transferred to the Transition Summary Form in the Excel workbook to be submitted electronically with the APR.

Data Validation Audit Tool-Worksheet

Data reported is timely and accurate
For use with Indicator 14

Reviewer: _____

This FIT-KIDS Data Validation Audit tool was completed during a Provider Annual Performance Report (APR)

Please compare the data found on the FIT-KIDS **Child Summary Report** and in FIT-KIDS Child Records with the information that you find in the agency's written records or with information obtained through parent and staff interviews. Please check the appropriate box to indicate if the information on the FIT Database report matches your findings. Please complete a separate form for each child reviewed. Thank you!

Child Name: _____

	FIT Database Information from Child Information Report	Data matches	Data does not match	
Can be found on child summary sheet	Child's DOB	<input type="checkbox"/>	<input type="checkbox"/>	
	Child's race	<input type="checkbox"/>	<input type="checkbox"/>	
	Date of referral	<input type="checkbox"/>	<input type="checkbox"/>	
	Eligibility category	<input type="checkbox"/>	<input type="checkbox"/>	
	Current IFSP start date	<input type="checkbox"/>	<input type="checkbox"/>	
	Current IFSP end date	<input type="checkbox"/>	<input type="checkbox"/>	
	Primary location of services on IFSP	<input type="checkbox"/>	<input type="checkbox"/>	
The following areas are not listed on the child summary sheet. In FIT KIDS, search for the child and obtain the information from the following pages/tabs.		Data matches	Data does not match	N/A
On Enrollment Page	Exit / termination date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Reason for exiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ON IFSP Page:	Transition conference date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Issues:				

Definitions of Reasons for Delays: Applicable to Indicators 1, 7 and 8c.

Reason	Definition
• Agency-Insufficient Information	Delay due to agency not having information such as address or phone number in order to contact the family.
• Agency-Insufficient Resources	Delay due to agency having a shortage of resources such as equipment, vehicles, funding to complete activities
• Agency-Other	Delay due to agency reasons other than those listed here.
• Agency-Staff medical	Delay due to agency staff on sick leave.
• Agency-Staff Schedule	Delay due to agency staff being unable to change their schedule to meet the timelines.
• Agency-Staff Shortage	Delay due to agency lacking staff to complete activities
• Family-Choice*	Delay due to family choosing to extend the timeline.
• Family-Medical*	Delay due to the child or parent being sick / in hospital.
• Family-Other*	Delay due to family reasons other than those above
• Family-Schedule*	Delay due to the family schedule not accommodating the activities being completed.
• Family-Unavailable*	Delay due to the family not keeping appointment or being out of town or otherwise unavailable.
• Other	Delay due to a reason not listed here.
• Other-Agency Not SC*	Delay in not responsibility of agency as they are not providing the service coordination for this family/child.
• Other-CAPTA	Delay due to challenges related to a CAPTA referral and the challenges of the child welfare system.
• Other-Weather*	Delay due to inclement weather, e.g. snow, ice, mud, flood, etc.

*These delays are considered acceptable exceptions for not meeting timelines and will not count against compliance on applicable indicators.