

STATE OF COLORADO



Colorado Department of Human Services

people who help people

OFFICE OF ADULT, DISABILITY, AND REHABILITATION SERVICES

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Bill Ritter
Governor

Karen L. Beye
Executive Director

June 7, 2007

Duane Roy
Executive Director
Southern Colorado Developmental Services
P. O. Box 781
Trinidad, CO 81082

Dear Duane,

The purpose of this correspondence is to provide you with a written report of the results of the Division for Developmental Disabilities (DDD) survey conducted March 26-27, 2007 of the Early Intervention program, which includes early intervention services, federal requirements under Part C of Individuals with Disabilities Education Act (IDEA) and service coordination provided by Southern Colorado Developmental Services. Christy Scott (DDD), along with other DDD staff, conducted the survey utilizing a pilot survey tool.

As noted in the survey report, many strengths in the CCB's provision of early intervention services were identified. CCB practices met many of the requirements, although some compliance issues were identified and require submission of a plan of correction.

Please find with this correspondence the survey narrative report and the statement of areas of non-compliance. A plan of correction is due by July 9, 2007 to DDD for the areas of non-compliance.

Thank you and your staff for the time and assistance offered during this process. Should you or your staff have any questions please call me at (303) 866-7270 or email christy.scott@state.co.us.

Sincerely,

Christy Scott
Early Childhood Connections
Program Quality and Data Coordinator

cc: ECC file
Attachment

SOUTHERN COLORADO DEVELOPMENTAL DISABILITIES SERVICES
EARLY INTERVENTION PROGRAM SURVEY
March 26-27, 2007

OVERVIEW

Southern Colorado Developmental Disabilities Services (SCDDS) is located in Trinidad, Colorado and serves Huerfano and Las Animas Counties. At the time of the survey 13 children were enrolled in early intervention services. During the entrance conference, SCDDS provided early intervention files for review.

The survey team consisted of two team members, both from the Division for Developmental Disabilities (DDD). The survey process included record review of early intervention and case management files for 10 children; 5 children actively enrolled in early intervention and service coordination, 3 children who had transitioned out of early intervention services and 2 referrals in the process for eligibility determination. "Program Quality Standards for On-Site Surveys" for Early Intervention Programs were applied. Additionally, surveys were sent to members of the Local Interagency Coordinating Council (LICC) electronically to garner feedback prior to the survey. The surveyor(s) reviewed the federal Part C child count database to verify data integrity and interviewed staff.

An exit conference was held by telephone on April 25, 2007 with the Community Support Services Director and Children's Program Manager.

PUBLIC PARTNERSHIPS

In general, SCDDS is commended for its efforts in implementing a system of early intervention supports and services. Collaborative relationships exist with many community early intervention partners, such as the local BOCES, health department and physicians offices.

The Children's Program Manager took over responsibility for the early intervention program in May 2006 with very little opportunity for training by a mentor with experience in the early intervention system and Part C requirements. The Children's Program Manager also fills the role of Part C Coordinator and service coordinator for families enrolled in early intervention. DDD understands the economic and practical reasons for this situation, however, SCDDS must still request of waiver of DDD rule 16.410.D which requires the separation of case management services from the delivery of services.

- o Public Awareness – SCDDS utilizes state generated materials to promote physician and community awareness. Personal visits are made to local physician's offices. Radio announcements are broadcast regularly to inform families about early intervention services. Occasionally, articles are published in local publications. A website is under construction and is expected to be completed by the end of July.
- o Child Find – SCDDS has a good, collaborative relationship with the Child Find coordinator of the local school district. Typically, Child Find will receive the referral and in turn make the referral to SCDDS; however, families are not referred to SCDDS until eligibility is established. This procedure has the potential for inaccurate data being reported by SCDDS if the school district does not inform SCDDS of all children who are referred. The Child Find team conducts the multidisciplinary assessment to determine eligibility and attends and participates in the development of the initial IFSP, which occurs in two meetings.
- o Local Interagency Coordinating Council (LICC) – The LICC meets bi-monthly, however, the Part C Coordinator has not been actively involved in these meetings and the makeup of the group does not meet the minimum criteria for membership.

SERVICES TO CHILDREN AND FAMILIES

Overall, families are receiving services in a timely, family-centered manner.

- o Eligibility – Most evaluations were conducted in time to complete an Individualized Family Service Plan (IFSP) within the 45-day timeline. Hearing and vision screens were completed in the majority of cases.
- o Individualized Family Service Plans - IFSPs were completed for every child and family with required participants; however, it was clear that the service coordinator had not had any formal training on how to write a plan of action with family-driven outcomes and priorities. Outcomes were neither functional nor measurable. Conversely, periodic reviews were very well-written and timely. At times, funding was utilized for allowable services that were not documented on the IFSP (therapy ball, transportation).

Pursuant to 16.242.C “The development and implementation of an Individualized Plan for each eligible person, as set forth herein, is a condition of funding by the Department for services and supports. The Department shall disallow payments to community centered boards, or service agencies under direct contract with the Department, in the amount of funds provided for the eligible person for whom the Individualized Plan has not been developed and implemented for the period of time until an Individualized Plan is developed and implemented.”

- o Services – Children were receiving early intervention services yet many were provided in a setting other than the child’s natural environment in an attempt to follow the funding hierarchy. Evidence was found in files that early intervention funds were being used for respite services that were not individualized, documented on IFSPs and were not an appropriate use of state or federal early intervention dollars.
- o Service Coordination - While IFSP development was a weakness, the quality of service coordination delivered to families was excellent. Consistent and frequent contact was made with families to inform them of activities in the community and to gather feedback on their satisfaction with services. Family files were detailed and contained copies of informational documents and individualized resources that had been sent to the family. Families were informed of statewide activities and organizations (PEAK Parent Center, family leadership trainings, public hearings) and online resources.
- o Transition – Transition plans were timely and written for every child, even those not eligible for Part B services. It appeared that appropriate participants attended, but signatures were missing from one plan. Transition plans contained action steps and specific details about what services would be available to the child and family.
- o Procedural Safeguards – It was reported that Welcome Packets are given to families upon the first visit that the service coordinator does with the family, but there was not evidence in the files that they are discussed prior to that time indicating that the family begins the eligibility process with no knowledge or understanding of their rights. IFSPs did not have the family’s initials on the procedural safeguards section.

DOCUMENTATION AND DATA

- o File Reviews – The files reviewed were complete and very detailed (other than issues discussed above). Every interaction with families was documented.
- o Data Analysis and Integrity – A review of the Part C database showed that data is entered regularly and accurately. Data submission to the State has been timely.
- o Results Matter – Ongoing assessment has been implemented and documentation of assessments were found in files. Information available from Results Matter has not yet been integrated into the planning and IFSP review process, as it is in its early stages of development.

GENERAL SUMMARY AND RECOMMENDATIONS

In general, families enrolled in early intervention services through Southern Colorado Developmental Disabilities Services receive high quality individualized service coordination and adequate direct early intervention services. The level of knowledge regarding the appropriate utilization of state and federal funding is questionable and additional training and technical assistance is warranted.

PLAN OF CORRECTION

Areas of non-compliance identified in this report require a response in the form of a Plan of Correction (POC) from the agency. These are noted in the attached POC document.

To the extent that the Local Interagency Coordinating Council may have an impact on the identified items of non-compliance, SCDDS should discuss its plan of action to resolve these issues with the LICC. Technical assistance is available to help with the planning process. Please call the state Community Coordinator, Colleen Head at 303-866-7262 if you would like support in these areas.

Additionally, there were several areas identified during the survey that, while they do not require a plan of correction, they do warrant urgent attention on the part of Southern Colorado Developmental Disabilities Services in order to see improvement.

- o The service coordinator's skills in IFSP development need to improve. She attended the required core competencies training in May 2006 but had not been employed long enough in the early intervention system to be able to absorb, and therefore effectively implement, the practices taught in the training. She was not provided with adequate mentorship, and therefore did not have the opportunity to shadow a service coordinator or get feedback or training on IFSP development. The service coordinator must attend the next state IFSP training. *Note: The service coordinator did attend the IFSP training that was conducted on April 2. Subsequent file reviews will confirm improvement in this area.*
- o The Children's Program Manager/Part C Coordinator/service coordinator does not have a clear understanding of state and federal regulations, including funding utilization. The Children's Program Manager must arrange to meet with a member of the state Early Childhood Connections team for one-on-one technical assistance.
- o Regulations for the Division for Developmental Disabilities (2 CCR 503-1) 16.410.D requires that . . . "Case management services shall be a direct responsibility of the executive level of the community centered board or regional center organization, and are separate from the delivery of services and supports unless otherwise approved by the Department." Please send to DDD the policy that SCDDS has that ensure that such safeguards are in place or request with sufficient justification for a waiver of rule 16.410.D.
- o Families must be provided with a service coordinator within 3 business days of referral. This ensures that families are given their procedural safeguards and receive support during the eligibility process. Families are entitled to procedural safeguards from the time of referral, not time of eligibility. An agreement must be reached with the local BOCES to either refer families to SCDDS as soon as they know of them, or the BOCES will agree to provide initial service coordination to families, including the discussion and assurance of families' procedural safeguards under IDEA Part C. Changes to this procedure will also ensure a more accurate count of children who are referred for early intervention services.
- o SCDDS is strongly encouraged to complete development of its website in order to be in compliance with providing families with access to the federally required central directory.

Technical assistance is available to help with these additional recommendations. Please call the state Community Coordinator, Colleen Head at 303-866-7262 if you would like support in these areas.

FINANCIAL PLAN OF CORRECTION

Southern Colorado Developmental Disabilities Services must reverse any inappropriate use of early intervention funding. *Note: SCDDS had corrected the inappropriate use of early intervention funding immediately following the survey. The year-end audit of financial expenditures will be reviewed to confirm this.*

The Plan of Correction is due to Christy Scott by July 9, 2007.

Department of Human Services/Division For Developmental Disabilities
Non-Compliance and Plan of Correction

Community Centered Board <u>Southern Colorado Developmental Disabilities Services</u>	<u>Early Intervention Services</u>	Date of Survey <u>March 26-27, 2007</u>
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Summary Statement of Non-Compliance	Agency's Plan of Correction	Completion Date
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STANDARD

B2. The CCB ensures eligibility determination and initial IFSP completion within 45 calendar days. CFR 303.321

Two out of six files reviewed showed that multidisciplinary evaluations were not completed in time for the development of an initial IFSP within 45 days of referral.

Two out of five files reviewed did not have both hearing and vision screenings as part of the multidisciplinary evaluation.

Compliance is required to be 100%.

B3. The CCB ensures families have received written information on their procedural safeguards in their native language and are knowledgeable of these. CFR 303.400

Six out of six files reviewed showed that written information about procedural safeguards was not provided to the family prior to the IFSP meeting.

One file did not show releases signed by the family in their primary language.

B2. Coordinator shall work closely with Child Find and other team members to schedule IFSPs to immediately follow multi disciplinary evaluations.

Coordinator will take full responsibility to ensure follow up vision and hearing testing is completed in a timely manner if not done so during initial evaluation. Coordinator will utilize Las Animas Department of Health or family's physician when possible.

B3. Written information on procedural safeguards will become a part of the initial meeting and information 'packet' in the family's primary language.

Coordinator will ensure that documentation via parent/guardian signature is obtained to reflect review of same.

Ongoing

Ongoing

Department of Human Services/Division For Developmental Disabilities
Non-Compliance and Plan of Correction

Community Centered Board <u>Southern Colorado Developmental Disabilities Services</u>	<u>Early Intervention Services</u>	Date of Survey <u>March 26-27, 2007</u>
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Summary Statement of Non-Compliance	Agency's Plan of Correction	Completion Date
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B6. The CCB ensures that early intervention services are provided in natural environments (e.g., the home, child care centers, or other community settings) to the maximum extent appropriate to the needs of the child. CFR303.12

Two out of six files reviewed showed that early intervention services were not provided in the child's natural environment, nor was there a justification entered into the IFSP to support use of other settings.

B10. The CCB ensures that the local education agency is notified of every child potentially eligible for preschool-age services and that transition planning takes place no less than 90 days prior to a child's third birthday. CFR 303.148

One out of three files reviewed showed that transition planning did not take place 90 days prior to the child's third birthday.

Compliance is required to be 100%.

Case management services shall be a direct responsibility of the executive level of the community centered board or regional center organization, and are separate from the delivery of services and supports unless otherwise approved by the Department. 16.410.D

The Children's Program Manager fills the role of Part C Coordinator and service coordinator for families enrolled in early intervention.

B6. Parents of the two children referenced preferred to have services provided in the office setting however since survey, coordinator has explained importance of natural environments and families have elected to remain in the program and have services provided in natural environment setting, ie; the family home.

B10. Following survey, Coordinator implemented computer program, 'Microsoft Outlook' as a tickler file to remind of upcoming transitional time frames. This has been working well and she will continue to utilize.

As is true with other small Community Center Boards in rural areas, SCDDS staff find it necessary to wear multiple hats. A request for waiver of 16.410.D shall be submitted to Colleen Head. Justification for request is due to:
 1) Services are contracted with providers outside the agency and not provided by SCDDS staff.
 2) To avoid the appearance of a conflict of interest in regard to approval of expenditures or services; Director of Community Support Services makes final approval for all expenditures to EI program.

April '07
And ongoing

April '07
And ongoing

Ongoing with deadline for waiver request by August 31, 2007.

Department of Human Services/Division For Developmental Disabilities
Non-Compliance and Plan of Correction

Community Centered Board		Date of Survey
<u>Southern Colorado Developmental Disabilities Services</u>	<u>Early Intervention Services</u>	<u>March 26-27, 2007</u>

Summary Statement of Non-Compliance	Agency's Plan of Correction	Completion Date
<p>The development and implementation of an Individualized Plan for each eligible person, as set forth herein, is a condition of funding by the Department for services and supports. The Department shall disallow payments to community centered boards, or service agencies under direct contract with the Department, in the amount of funds provided for the eligible person for whom the Individualized Plan has not been developed and implemented for the period of time until an Individualized Plan is developed and implemented. 16.242.C</p> <p>Three incidences were discovered where SCDDS inappropriately used state and/or federal funds for non allowable services (i.e., respite care services were funded without adequate justification).</p>	<p>The three incidences referenced have been resolved in that adequate justification for funding has been documented in files.</p> <p>Coordinator has attended additional training in IFSP development.</p> <p>Coordinator is tentatively scheduled to shadow more experienced coordinators from another CCB.</p> <p>While writing IFSP, all services will be clearly stated.</p>	<p>April '07</p> <p>May '07</p> <p>By August 31,2007</p> <p>Ongoing</p>