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**Early Intervention Colorado**  
*for Infants, Toddlers & Families*

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Early Intervention Colorado  
General Supervision and  
Monitoring Procedures

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**COLORADO**

**Office of Early Childhood**

Division of Community & Family Support

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## **I. OVERVIEW OF THE EARLY INTERVENTION COLORADO GENERAL SUPERVISION AND MONITORING SYSTEM**

Part C of the Individuals with Disabilities Education Act (IDEA) requires that each state have a system of general supervision that monitors the implementation of early intervention (EI) services by the state and local programs.

The Colorado Department of Human Services (CDHS), is the lead agency under Part C of IDEA and administers the EI program in Colorado, known as Early Intervention Colorado (EI Colorado) Program. The CDHS contracts with 20 Community Centered Boards (CCBs) to implement EI services at the local level. The CDHS monitors all CCBs in a variety of ways: focused monitoring; annual desk audits of data captured in the Early Intervention Data System data system; annual fiscal audits; dispute resolution; and training and technical assistance.

The following General Supervision and Monitoring Procedures have been developed in partnership with the Colorado Interagency Coordinating Council (CICC) with technical assistance from Mountain Plains Regional Resource Center (MPRRC), the Early Childhood Technical Assistance (ECTA) and a private consultant.

The EI Colorado General Supervision and Monitoring system consists of nine components:

1. Rules, Policies and Procedures
2. State Performance Plan and Strategic Planning
3. Annual Performance Report
4. Local Program Performance Profiles
5. Data Collection and Verification
6. Focused Monitoring
7. Fiscal Management
8. Dispute Resolution
9. Training and Technical Assistance

This document includes a description of the components and how each supports the General Supervision and Monitoring system in Colorado.

## II. GENERAL SUPERVISION AND MONITORING COMPONENTS

### 1. Rules, Policies and Procedures

The CDHS develops policies, rules, procedures and communication briefs that support and provide clarification of state and federal statutes to ensure effective implementation of EI services statewide at the local level.

- The *Early Intervention Colorado State Plan* encompasses policies and procedures regarding the Federal Part C of IDEA regulations (34 C.F.R. Part 303), the Colorado Revised Statutes, Title 27, Article 10.5, Part 7 and other applicable state and federal regulations related to EI Services.
- The *Early Intervention Colorado State Plan* is reviewed annually by the EI Colorado staff and CICC and revised as needed.
- Any revisions made to policies in the *Early Intervention Colorado State Plan* or state rules are made available for specified public review and comment periods.
- In addition to the *Early Intervention Colorado State Plan*, the CDHS issues communication briefs when further clarification to policies, rules or procedures is needed to ensure effective implementation.
- Rules, policies and procedures are distributed statewide to all CCBs, the CICC and other key stakeholders.
- These documents are also available to the public on the EI Colorado website at [www.eicolorado.org](http://www.eicolorado.org).

### 2. The *Early Intervention Colorado State Performance Plan*

The CDHS, in collaboration with the CICC, develops and revises as needed, a State Performance Plan (SPP) that spans a time period specified by the Federal Office of Special Education Programs (OSEP). The SPP addresses 11 federally-required Indicators (Appendix A), sets annual targets and details improvement strategies to meet those targets.

- Once final revisions have been made by the CDHS, the SPP is submitted to the OSEP on or before the first of February.
- The SPP Improvement Activities establish the actions that the CDHS takes to meet the annual targets. Improvement activities are reviewed annually with the CICC, contractors who provide training and technical assistance and other key stakeholders to determine if revisions are needed.
- The SPP is distributed to stakeholders and is posted on the EI Colorado website at [www.eicolorado.org](http://www.eicolorado.org) as soon as possible after the annual submission to the OSEP in February each year.
- The CICC establishes Special Purpose Committees within the CICC to work on SPP priority areas when needed.

### 3. The *Early Intervention Colorado Annual Performance Report*

Each year the CDHS submits to the OSEP an Annual Performance Report (APR) on or before the first of February. The APR addresses the 11 Indicators that are described in the SPP. The APR functions as a report on the progress or slippage in meeting the requirements for the statewide EI Colorado program based on performance in the previous fiscal year. The APR also documents progress on improvement activities and reports on timely correction of local programs.

- For each Indicator the CDHS completes the following:
  - Current data and performance against annual targets;
  - Analysis of current data;
  - Discussion of improvement activities completed to meet targets;

- Explanation of progress or slippage compared to the previous APR performance;
- Status of noncompliance identified in previous APR; and
- Revisions, if any, to targets, improvement activities, timelines and resources
- Data are generated from the following sources:
  - Desk audits of data collected through Early Intervention Data System;
  - Data collected through the EI Provider Database;
  - Data collected through the annual Family Outcomes Survey;
  - Reports of dispute resolution; and
  - Status of timely correction of noncompliance.
- The CICC is involved in the review of the overall document prior to submission to the OSEP.
- The APR is posted on the EI Colorado website at [www.eicolorado.org](http://www.eicolorado.org) and distributed to stakeholders soon after submission to the OSEP in February each year.
- Colorado receives an annual state status determination from the OSEP (Appendix B) based on the APR performance in meeting the requirements of the compliance Indicators. The categories are: “Meets Requirements”; “Needs Assistance”; “Needs Intervention”; and “Needs Substantial Intervention”.

#### **4. Local Early Intervention Program Performance Profiles**

Annually, the CDHS conducts a desk audit and measures the compliance and performance of each CCB on Indicators 1-8 of the SPP and publicly reports this information on an individual “Early Intervention Program Performance Profile”.

- For Indicators 1-8, the Department uses the *Early Intervention Program Performance Profile* to report the performance of each CCB on the following:
  - Current data;
  - Current data performance in relation to state targets and CCBs of similar size using percentage measurements;
  - Ranking of CCB performance in comparison to other CCBs of similar size; and
  - Description of whether the CCB met the target, made progress or slipped.
- The CCB *Early Intervention Program Performance Profile* also includes:
  - The status determination;
  - Demographic information about the CCB;
  - The geographic area that is covered by the CCB; and
  - Contact information for the CCB.
- A statement is provided by the CDHS regarding timely correction of noncompliance, timely submission of fiscal audits, completion of local interagency operating agreements and timely submission of valid and reliable data.
- CCBs are given the opportunity to provide a statement regarding their performance during the previous year.
- Data are generated from the following sources:
  - Early Intervention Data System;
  - Child and family outcomes data;

- “Table 1 Report of Children Receiving Early Intervention Services in Accordance with Part C”; and
- “Table 2 Report of Program Setting Where Early Intervention Services are Provided to Children with Disabilities and Their Families in Accordance with Part C”.
- The OSEP requires the CDHS to enforce IDEA by making status determinations annually on the performance of each CCB EI Program using the same four categories that the OSEP uses in making the state status determination and consider the following:
  - Performance on compliance Indicators;
  - Whether data submitted by the CCB EI programs are valid, reliable and timely;
  - Uncorrected noncompliance; and
  - Any audit findings.
- In addition, the CDHS also considers:
  - Progress toward performance Indicator targets;
  - Timely submission of fiscal audits; and
  - Completion of local interagency operating agreements.
- The criteria used to establish status determinations are described in the *Local Program Status Determinations Criteria* (Appendix C).
- A CCB’s status determination indicates the level of technical assistance and/or corrective action that is required for the local program.
- The CCB *Early Intervention Program Performance Profiles* are posted on the EI Colorado website at [www.eicolorado.org](http://www.eicolorado.org) and distributed to stakeholders each spring.

## 5. Data Collection and Verification

The Early Intervention Data System is an online database and billing system that allows real time reporting at the local and state level. The CDHS uses the Early Intervention Data System to gather data for federal and state reporting (Appendix D), monitoring of local programs, billing for direct services and for a variety of management functions. Desk audits are conducted offsite to analyze progress or slippage on key Indicators, monitor compliance for federal, state and local reporting and inform monitoring activities.

- The Early Intervention Data System includes demographic, Individualized Family Service Plan (IFSP) data, allowing a wide array of performance and management reports to be generated at the state and local level. The data system also includes direct service expenditure information for state and federal funding resources. EI Colorado staff conducts data verification during onsite CCB monitoring to check the validity and reliability of data entered into the Early Intervention Data System.
- Data reports are run annually to inform the APR.
- EI Colorado staff reviews the APR data to:
  - Determine if a finding of noncompliance should be issued to a CCB;
  - Verify whether data demonstrate noncompliance, and then issue a finding if data demonstrate noncompliance; or
  - Verify that the CCB has corrected any noncompliance identified in the desk audit, in which case a finding of noncompliance would not be issued.
- EI Colorado staff use data reports to inform decisions about focused monitoring activities.
- Reports are generated prior to onsite visits for data verification purposes and ad hoc reports are run throughout the year as needed.

- Reports are generated through the Early Intervention Data System for the federally required Section 618 data tables and are submitted to meet the April and November deadlines. These data are also published on the EI Colorado website at [www.eicolorado.org](http://www.eicolorado.org), as required.
- Child count data for each CCB informs the fiscal allocation for state and federal funds.
- EI Colorado staff generates data reports that look at trends across a number of data elements for a number of years. Trend reports include performance on Indicators as well as other factors, such as number of referrals and referral sources, age at referral, exit reasons, etc.
- Data for reporting child outcomes are collected through the EI Colorado Provider Database.
- Data for reporting family outcomes are collected through the annual Family Outcomes Survey.

## 6. Focused Monitoring

Focused monitoring may occur when there are patterns of statewide issues related to noncompliance, poor statewide or local performance on specific priority areas or if the CDHS has a need to investigate a complaint. Focused monitoring occurs to determine the specific reasons for the noncompliance. Investigation in this manner allows the CDHS to tailor technical assistance to meet the specific needs of local programs as well as accelerate the process for timely correction of noncompliance.

- A priority area is determined by the CDHS annually depending on the results of APR data, new procedures being implemented or specific concerns raised by stakeholders or staff.
- If there are no concerns about specific programs, the monitoring schedule is chosen to represent a cross-section of programs based on size, region of the state and program structure.
- A focused monitoring visit typically lasts one to two days and may include interviews with administrators, staff, parents and community partners, as well as review of child records, policies and procedures and other pertinent documents (Appendix E).
- As a result of the focused monitoring, technical assistance is provided and the results of the monitoring are reviewed to:
  - Determine if a finding of noncompliance should be issued to a CCB;
  - Verify whether data demonstrate noncompliance, and then issue a finding if data demonstrate noncompliance; or
  - Verify that the CCB has corrected any noncompliance identified during the monitoring, in which case a finding of noncompliance would not be issued.
- A Plan of Correction (POC) may be developed following the monitoring in accordance with the *Early Intervention Monitoring Protocols*, if warranted. The POC has prescribed actions that must occur within specified timelines (Appendix F).
- A CCB receives a written focused monitoring report that includes the POC, if applicable.
- Specific data reporting requirements, including frequency of data submissions, are outlined in the POC.
- Data is submitted until 100% compliance is reached and verified.
- If after six months a CCB has not corrected noncompliance, additional data reporting may be initiated.
- Once 100% compliance is reached and verified, the CCB is sent a letter releasing it from the finding of noncompliance and closing the POC.

## **7. Fiscal Management**

EI Colorado staff works with the CICC to promote interagency funding of EI services that meet federal and state requirements and ensure that eligible infants and toddlers and their families benefit from a comprehensive, coordinated EI system.

- EI Colorado staff prepares the annual application and budget for the OSEP and ensures proper accounting of funds expended under the Federal Part C grant.
- EI Colorado staff prepares an annual budget and the allocation formula for State General Funds.
- The CDHS has statutory authority to ensure financial and service provision.
- EI Colorado staff ensures that Federal Part C Funds are obligated and liquidated within the allowable timeframe and for appropriate activities.
- The CDHS has annual contracts in place with the 20 CCBs as the local EI program administrators. The *Fiscal Management and Accountability Procedures* document is provided to the CCBs and posted on the website at [www.eicolorado.org](http://www.eicolorado.org) to provide guidance for funding utilization.
- CCBs are required to have an audit of annual financial statements to ensure that they are billing appropriately for services rendered.
- Periodically, EI Colorado staff conducts utilization surveys to monitor expenditures for direct services to ensure that the funding hierarchy is being followed and that Federal Part C Funds are used as payor of last resort.
- CCBs receiving a focused monitoring also have a review of records conducted to ensure that the funding hierarchy is being followed and allowable services are being provided and paid for in accordance with state and federal policies and procedures.
- EI Colorado staff works with the CICC to assure that an Interagency Agreement is in place to ensure that the appropriate state agency is responsible for funding specific services and activities as described in the *EI Colorado State Plan*.
- Service coordination, evaluation and assessment, development of the IFSP and resolution of disputes are provided at no cost to families.
- No fees are charged to families whose children receive EI services designated on an IFSP.
- The coordinated system of payment for Early Intervention Services pursuant to C.R.S. 27-105-701 mandates that certain private health insurance plans, also known as qualifying plans, fund EI Services. The use of insurance through qualifying plans cannot affect a child's annual or lifetime plan benefit and no co pay or deductible is levied on the family for the provision of EI Services by their insurance provider.

## **8. Dispute Resolution**

An array of dispute resolution options is available for families including complaint procedures, mediation and due process hearing procedures . Trends in complaints and due process hearings are analyzed to determine the need for system changes and improvements. Each CCB is required to keep a log of informal and formal complaints received by their organization.

- The "EI Colorado State Plan" describes the policies and procedures that are followed during dispute resolution.
- Complaints are investigated within 60 days and due process hearings are conducted within 30 days of receipt.
- If a complaint is substantiated, or if a hearing officer rules against a CCB EI program, a finding is issued to the CCB. The CCB must correct the action for the particular child and family in the dispute, as well as for any other children in the program to prevent the noncompliance from occurring again. A POC may be issued in addition to a finding.



- The Department contracts with The Legal Center for People with Disabilities and Older People (Legal Center) to provide training for CCBs on dispute resolution and instruction for surrogate parents and hearing and mediation officers.
- All parents are provided with the “Notice of Child and Family Rights and Procedural Safeguards” brochure that includes dispute resolution options when the family receives prior written notice of the determination of eligibility or ineligibility, and initiation of, or changes to, EI Services.
- Mediation is made available at any time to parents who submit a complaint or request a due process hearing.
- Annually, EI Colorado staff conducts a review of any dispute resolution activities to determine any trends that require a system change or other improvement activities. These trends are reported to the CICC for recommendations regarding follow-up strategies.

## **9. Training and Technical Assistance**

The Department publishes and distributes rules, policies and procedures. Statewide training is conducted and technical assistance documents are distributed in order to clarify and reinforce requirements under IDEA Part C and State EI rules. The ultimate goal of all training and technical assistance activities is to promote recommended and promising practices in meeting the needs of infants and toddlers who have developmental delays or disabilities and their families.

- The Department promulgates rules as necessary to ensure alignment with the Federal and State statutes.
- EI Colorado staff review, with input from the CICC and the Comprehensive System of Personnel Development (CSPD) Committee, and revise if necessary, the “Early Intervention Service Definitions and Personnel Standards”.
- EI Colorado staff, the CICC and the CSPD Committee review the annual “Comprehensive System of Personnel Development Plan” to ensure that training needs are being met through statewide initiatives and interagency collaborative efforts.
- EI Colorado staff produces technical assistance documents to address aspects of the EI process and to promote effective and evidence-based EI practices. Current technical assistance documents are posted on the EI Colorado website at [www.eicolorado.org](http://www.eicolorado.org).
- The Department contracts with university programs, parent organizations and private consultants to provide training and technical assistance to CCBs, providers and families.
- Self-assessment practices (Appendix G) are encouraged to enable local programs to monitor their performance and timely identify training and technical assistance needs.
- Training and technical assistance staff and contractors review data and monitoring reports to inform the content of the training materials and identification of specific programs that need assistance.
- Technical assistance conference calls are provided each month to accompany the launch of new policies and procedures.
- All service coordinators and local EI program administrators are required to attend the statewide Service Coordination Core Training and IFSP Training. Families, providers and interagency partners are also encouraged to attend.

**Appendix A:  
State Performance Plan  
Compliance and Performance Indicators**

**Indicator:**

1. Percent of infants and toddlers with IFSPs who receive the EI services on their IFSPs in a timely manner – within 28 days.
2. Percent of infants and toddlers with IFSPs who primarily receive EI services in the home or programs for typically developing children.
3. Percent of infants and toddlers with IFSPs who demonstrate improved:
  - A. Positive social-emotional skills;
  - B. Acquisition and use of knowledge and skills; and
  - C. Use of appropriate behaviors to meet their needs.
4. Percent of families participating in Part C who report that EI services have helped the family:
  - A. Know their rights;
  - B. Effectively communicate their children's needs; and
  - C. Help their children develop and learn.
5. Percent of infants and toddlers birth to 1 with IFSPs.
6. Percent of infants and toddlers birth to 3 with IFSPs.
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.
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 the Local Education Agency (LEA), also known as Administrative Units in Colorado, if the child is potentially eligible for Part B; and
  - C. Transition conference, if the child is potentially eligible for Part B.
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.
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.
11. Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.
12. Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (not applicable in Colorado, at this time).
13. Percent of mediations held that resulted in mediation agreements.
14. State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

*Indicators 1-8 are used to report on State and local CCB EI performance. Indicators 9-14 are used only to report State performance in the APR. Indicators 1, 7 and 8A, 8B and 8C are Compliance Indicators. Indicators 2, 3, 5 and 6 are Performance Indicators.*

## Appendix B: STATE STATUS DETERMINATION

### **Introduction:**

As required by sections 616(b)(1)(A) and 642 of the Individuals with Disabilities Education Act (IDEA), each State must have in place a State Performance Plan (SPP) that evaluates the State's efforts to implement the requirements and purposes of Parts B and C of the IDEA, and describes how the State will improve its implementation. Section 616(b)(2) requires that the State report annually to the Secretary on its performance under the State performance plans for Parts B and C of the IDEA. Specifically, the State must report, in its Annual Performance Report (APR), on its progress in meeting the measurable and rigorous targets it established in its SPP.

Section 616(d) requires that the federal Office of Special Education Programs (OSEP) review the APR each year. Based on the information provided in the State's APR, information obtained through monitoring visits, and any other public information, the OSEP will determine if the State: Meets Requirements; Needs Assistance; Needs Intervention; or Needs Substantial Intervention. In making these determinations and in deciding upon appropriate enforcement actions, the OSEP will consider all information available to the OSEP at the time of the determination, including the history, nature and length of time of any reported noncompliance, and any evidence of correction. For example, a State may report data in its Federal fiscal year (FFY) APR that indicates that noncompliance was identified in one or more indicators during or prior to the FFY reporting period. If the State also provides quantitative and qualitative data demonstrating that the State timely corrects identified noncompliance in the indicator, the OSEP will consider the State to be in substantial compliance regarding that indicator.

States that do not meet one or more of the State's performance targets identified in their SPP should closely examine the improvement activities identified in the SPP and the State's implementation of those activities, and consider whether the State needs to change those activities or adjust its implementation of those activities. States may want to monitor the IDEA related requirements identified by the OSEP under each performance indicator in locations in the State that have contributed to the State's inability to meet its performance targets. Failure to meet performance targets may result in focused monitoring, requests for additional data or information regarding related requirements, or other actions by the OSEP.

### I. Meets Requirements

Factors the Department will consider in determining whether a State meets the requirements and the purposes of IDEA, include the following:

- The State demonstrates substantial compliance on all compliance indicators, which can include, as appropriate, a demonstration through quantitative and qualitative data that the State timely corrects identified noncompliance for indicators that are not 'new' or where noncompliance was previously identified by the OSEP, and, for 'new' indicators for which noncompliance was not previously identified by the Department, that the State has improvement activities to timely correct identified noncompliance.
- All indicators, including performance indicators, have valid and reliable data as required by the SPP/APR (actual target data, baseline data, etc.).
- The State demonstrates that it timely corrects noncompliance identified by the OSEP through monitoring or other means.

### II. Needs Assistance

Factors the OSEP will consider in determining whether a State needs assistance in implementing the requirements of IDEA include the following:

- The State does not demonstrate substantial compliance on one or more of the compliance indicators. Evidence related to substantial compliance can include, as appropriate, a

demonstration through quantitative and qualitative data that the State timely corrects identified noncompliance for indicators that are not 'new' or where noncompliance was previously identified by the OSEP, and, for 'new' indicators for which noncompliance was not previously identified by the OSEP, that the State has improvement activities to timely correct identified noncompliance.

- One or more indicators, including performance indicators, do not have valid and reliable data as required by the SPP/APR (actual target data, baseline data, etc.).
- The State does not demonstrate that it timely corrects any noncompliance identified by the OSEP through monitoring or other means.

If the OSEP determines, for two consecutive years, that the State needs assistance, the OSEP shall take one or more of the following enforcement actions, consistent with section 616(e)(1):

- Advise the State of available sources of technical assistance.
- Direct the use of State-level funds under section 611(e) on area(s) in which the State needs assistance.
- Identify the State as a high-risk grantee and impose special conditions on the State's grant.

### III. Needs Intervention

Factors the OSEP will consider in determining whether a State needs intervention in implementing the requirements of IDEA include the following:

- The State does not demonstrate substantial compliance on one or more of the compliance indicators and has not made significant progress in correcting noncompliance previously identified by the OSEP on those indicators. Evidence related to substantial compliance can include, as appropriate, a demonstration through quantitative and qualitative data that the State timely corrects identified noncompliance for indicators that are not 'new' or where noncompliance was previously identified by the OSEP, and, for 'new' indicators for which noncompliance was not previously identified by the OSEP, that the State has improvement activities to timely correct identified noncompliance.
- One or more indicators, including performance indicators, are missing valid and reliable data as required by the SPP/APR (actual target data, baseline data, etc.), and the State has not made significant progress in correcting previously identified data problems.
- The State does not demonstrate that it corrects noncompliance identified by the OSEP through monitoring or other means, and has not made significant progress in correcting that noncompliance.

If, the OSEP determines, for three consecutive years that the State needs intervention, the OSEP may take any of the actions described under needs assistance and shall take one or more of the following enforcement actions, consistent with section 616(e)(2):

- Require the State to prepare a corrective action plan or improvement plan, if the OSEP determines that the State should be able to correct the problem within 1 year.
- Require the State to enter into a compliance agreement, if the OSEP has reason to believe that the State cannot correct the problem within 1 year.
- Withhold a percentage of the State's funds under section 611(e), for each year of the determination.
- Seek to recover funds.
- Withhold any further payments to the State.
- Refer the matter for appropriate enforcement action.

#### IV. Needs Substantial Intervention

If the OSEP determines, at any time, that a State needs substantial intervention in implementing the requirements of this part or that there is a substantial failure to comply with any condition of a State lead agency's or local EI agency's eligibility under this part, the OSEP will designate the State as in need of substantial intervention. Among the factors that the OSEP will consider are:

- The failure to substantially comply significantly affects the core requirements of the program, such as the delivery of services to children with disabilities or State exercise of general supervision; and/or
- The State has informed the OSEP that it is unwilling to comply.

If the OSEP determines, at any time, that the State needs substantial intervention, the OSEP shall take one or more of the following enforcement actions, consistent with section 616(e)(3) and provide an opportunity for a hearing:

- Recover funds.
- Withhold any further payments to the State.
- Refer the case to the Office of the Inspector General.
- Refer the matter for appropriate enforcement action

Note that under section 616(g), the OSEP may at any time utilize any authority under the General Education Provisions Act to monitor and enforce the requirements of IDEA, regardless of the determination of the State's status under section 616(d).

## **Appendix C: Local Early Intervention Public Reports and Program Status Determinations**

### Overview

The Office of Special Education Programs (OSEP) requires that each year the Colorado Department of Human Services (CDHS), Office of Early Childhood (OEC), Division of Community and Family Support (DCFS) measure the compliance and performance of each Community Centered Board (CCB) on Indicators 1-8 of the State Performance Plan (SPP). This annual public report for each CCB functions as a measure of the progress or slippage in meeting the requirements for the local early intervention system based on performance in the previous fiscal year.

Annually, the CDHS conducts a desk audit and measures the compliance and performance of each CCB on Indicators 1-8 of the SPP and publicly reports this information on an individual *Early Intervention Program Performance Profile*.

- For Indicators 1-8, the CDHS uses the *Early Intervention Program Performance Profile* to report the performance of each CCB on the following:
  - Current data;
  - Current data performance in relation to State targets and CCBs of similar size using percentage measurements;
  - Ranking of CCB performance in comparison to other CCBs of similar size; and
  - Description of whether the CCB met the target or made progress or slipped.
- The CCB *Early Intervention Program Performance Profile* also includes:
  - The status determination;
  - Demographic information about the CCB;
  - The geographic area that is covered by the CCB; and
  - Contact information for the CCB.
- A statement is provided by the CDHS regarding timely correction of noncompliance, timely submission of fiscal audits, completion of local interagency operating agreements and timely submission of valid and reliable data.
- CCBs are given the opportunity to provide a statement regarding their performance during the previous year.
- Data are generated from the following sources:
  - Early Intervention Data System;
  - Child and family outcomes data;
  - “Table 1 Report of Children Receiving Early Intervention Services in Accordance with Part C”; and
  - “Table 2 Report of Program Setting Where Early Intervention Services are Provided to Children with Disabilities and Their Families in Accordance with Part C”.
- The OSEP requires the CDHS to enforce IDEA by making status determinations annually on the performance of each CCB EI Program using the same four categories that the OSEP uses in making the State status determination and consider the following:
  - Performance on compliance Indicators;
  - Whether data submitted by the CCB EI Programs are valid, reliable and timely;
  - Uncorrected noncompliance from other sources; and

- Any audit findings.
- In addition, the CDHS also considers:
  - Progress in meeting performance Indicators;
  - Timely submission of fiscal audits; and
  - Completion of local interagency operating agreements.
- A CCB's status determination indicates the level of technical assistance and/or corrective action that is required for the local program.
- The CCB *Early Intervention Program Performance Profiles* are posted on the EI Colorado website at [www.eicolorado.org](http://www.eicolorado.org) and distributed to the stakeholders each spring.

**Status Determination Categories:**

I. Meets Requirements

A CCB EI program demonstrates substantial compliance on the selected criteria.

II. Needs Assistance

A CCB EI program does not demonstrate substantial compliance on one or more of the selected criteria. One or more of the following enforcement actions may be taken if the program remains at this status determination for two consecutive years:

- The CCB will be advised of available sources of technical assistance to address areas on which the EI program needs assistance; and/or
- Conditions may be imposed on the use of funds.

III. Needs Intervention

A CCB EI program exhibits noncompliance in multiple areas on the selected criteria. If the EI program has remained at this status determination level for three consecutive years, sanctions may include:

- Requiring the CCB to participate in technical assistance, self-assessment and training activities;
- More frequent desk and/or onsite monitoring; or
- Withholding, in whole or in part, further payments to the program.

IV. Needs Substantial Intervention

A CCB EI program exhibits repeated noncompliance in multiple areas on the selected criteria and has failed to substantially comply with requirements or has informed the lead agency that it is unwilling to comply. Sanctions may include:

- Required staff training;
- Withholding of funds; or
- Other enforcement actions or cancellation of contract for EI services.

INCENTIVES	HIERARCHY OF SANCTIONS
<ul style="list-style-type: none"> <li>• Wide distribution of local <i>Early Intervention Program Performance Profile</i> to stakeholders, families, and general public</li> <li>• High level commendation to CCBs who meet requirements</li> <li>• Public recognition through the media</li> <li>• Less frequent onsite monitoring by the CDHS staff and more autonomous correction planning</li> </ul>	<ul style="list-style-type: none"> <li>• Optional training, technical assistance and use of self-assessment</li> <li>• POC</li> <li>• Required training, technical assistance and self-assessment</li> <li>• Focused monitoring</li> <li>• Frequent desk audits</li> <li>• More frequent onsite monitoring</li> <li>• Financial penalties when absolutely necessary</li> <li>• Revoking contract, when absolutely necessary and in accordance with CDHS rules</li> </ul>

DETERMINATION SCORE	DETERMINATION CATEGORY
No compliance Indicator <90% and 25-35 points*	Meets Requirements
No more than one Indicator <80% and 21-35 points*	Needs Assistance
Two or more Indicators <80% or one or more Indicator <60% or 15-20 points*	Needs Intervention
<15 points*	Needs Substantial Intervention



<b>*POINT CRITERIA</b>	
<b>State Performance Plan Indicators 1-8</b>	<p><i>Local performance on Indicators 1-8.</i></p> <p><b>Indicator 1*</b>: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner – 28 days.</p> <p><b>Indicator 2**</b>: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.</p> <p><b>Indicator 3**</b>: Percent of infants and toddlers with IFSPs who demonstrate improved:</p> <ul style="list-style-type: none"> <li>A. Positive social-emotional skills (including social relationships);</li> <li>B. Acquisition and use of knowledge and skills (including early language/communication); and</li> <li>C. Use of appropriate behaviors to meet their needs.</li> </ul> <p><b>Indicator 4**</b>: Percent of families participating in Part C who report that early intervention services have helped the family:</p> <ul style="list-style-type: none"> <li>A. Know their rights;</li> <li>B. Effectively communicate their children’s needs; and</li> <li>C. Help their children develop and learn.</li> </ul> <p><b>Indicator 5**</b>: Percent of infants and toddlers birth to 1 with IFSPs.</p> <p><b>Indicator 6**</b>: Percent of infants and toddlers birth to 3 with IFSPs.</p> <p><b>Indicator 7*</b>: Percent of eligible 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.</p> <p><b>Indicator 8*</b>: Percent of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:</p> <ul style="list-style-type: none"> <li>A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nin months, prior to the toddler’s third birthday;</li> <li>B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s thrid birthday for toddlers potentially eligible for Part B preschool services; and</li> <li>C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nin months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.</li> </ul> <p><i>*Compliance Indicators</i>  <i>**Performance Indicators</i></p>
<b>Timely Correction of Noncompliance</b>	<i>10 point scale that measures level of substantial correction of noncompliance</i>
<b>Valid and Reliable Data</b>	<i>10 point scale that measures validity and reliability of required data fields</i>
<b>Timely Submission of Data</b>	<i>5 point scale that measures timely submission for required</i>
<b>Dispute Resolutions</b>	<i>4 point scale that measures no request for dispute resolutions and/or unfounded complaints or dispute with a finding against the local program</i>
<b>Fiscal Accountability</b>	<i>3 point scale that measures timely and accurate submission of required fiscal data</i>
<b>Interagency Operating</b>	<i>3 point scale that measures the completion of required interagency</i>

## **Appendix D: Data Collection and Desk Audits Schedule**

### August 1

- Purpose: Collect data to determine compliance toward Indicators 1, 7 and 8 A, B and C and issue findings of noncompliance when warranted. Reported in the “Annual Performance Report” (APR) and used for local program status determination. Exit data collected for submission to Federal Office of Special Education Programs (OSEP) in Table 3.
- Data set: July 1 – June 30
- Data source: Early Intervention Data System.

### August 1

- Purpose: Child outcomes data; report to the OSEP for Indicator 3 and local program status determination and APR.
- Data set: July 1 – June 30
- Data source: EI Colorado Provider Database

### November 1

- Purpose: Data count of children with active Individualized Family Service Plan (IFSP) on October 1, including race of child and primary location of early intervention (EI) services, reported to the OSEP in Tables 1 (Child count/race) and 2 (primary location of EI services) on February 1.
- Data set: October 1 point-in-time
- Data source: Early Intervention Data System.

Edit checks are made available to CCBs by EI Colorado to identify required missing and incomplete data in the Early Intervention Data System system.

CCB-specific data is reviewed to determine if progress is being made toward timely correction on a plan of correction (POC).

CCBs are expected to run data reports regularly for self-assessment and data verification purposes.

Data may be reviewed prior to, or during, a site visit for data verification purposes.

## **Appendix E: Focused Monitoring Protocol**

### **1. Agency Notification**

Early Intervention Colorado (EI Colorado) staff contacts a representative of the Community Centered Board (CCB) several weeks in advance of when a focused monitoring and/or data verification visit is to be scheduled. EI Colorado proposes a date for the visit. If the date is not viable for the CCB due to absence of key staff, planned conferences, etc. EI Colorado staff works with the CCB to find a mutually agreeable date for the visit. The final decision for the date of the visit is made by the EI Colorado staff. An entrance conference and a tentative date for the exit conference are scheduled with the CCB in advance to allow for maximum participation of CCB staff.

At the time of the initial contact, the CCB is asked to identify an individual at the administrative level to work with EI Colorado staff during the visit. Generally this is the Early Intervention Director, but may also be an assistant director or other administrative level staff. The EI Colorado General Supervision and Data Manager works with this individual to determine specific scheduling requirements, such as location of meeting rooms and scheduling of staff time.

Monitoring and/or data verification visits may also be conducted with little or no advance notice. Such a visit may occur, for example, when EI Colorado staff believe that giving advance notice may substantially impact findings, or when there have been complaints concerning the fiscal administration or due process for children served.

### **2. Focused Monitoring and Data Verification Methodology**

#### Record Review

A sampling of files of children receiving Early Intervention (EI) Services is selected by EI Colorado and the local program. The sample is reflective of children in the CCB service area, including demographic diversity. Some additional information may also be requested from the CCB to assist in the sample selection. In general, the sample consists of 10% of children receiving EI Services, at minimum 5%. For a smaller CCB, a larger percentage may need to be selected in order to make decisions on findings and for a very large CCB the sample may be smaller. Generally, the child record sample is not greater than 30 children and:

- Is balanced for factors such as geographic location, gender, primary language spoken and types of supports and services being received. The sample includes children recently found eligible for services, children transitioning out of services and children with significant medical issues;
- Includes some children receiving Targeted Case Management (TCM) through Medicaid; and
- May be adjusted during the onsite visit at the discretion of the team members conducting the visit.

### Monitoring/Verification Team

The team conducting onsite focused monitoring or data verification of an EI Program is made up of EI Colorado staff and may include additional recruited team members, depending on the intensity of the monitoring.

In selecting a team:

- Consideration is given to the integrity of the survey, the balance of the team (representation from various areas) and the dynamics between members of the team and the CCB;
- The size of the team varies and depends on the size of the CCB EI Program and the geographic area to be covered;
- All team members who are not EI Colorado staff members are asked to sign a confidentiality agreement prior to starting the monitoring or data verification visit;
- Staff from other CCB EI Programs may be included as team members to provide orientation to the process in preparation for upcoming onsite monitoring or data verification of their own programs; and
- Staff from the CCB being visited may be included to provide technical assistance in program supervision or implementation.

Colorado Interagency Coordinating Council (CICC) members, Local Interagency Coordinating Council (LICC) members, parents and other stakeholders recruited for the team may participate in a variety of ways:

- The entrance and/or exit conference;
- Review of files and completion of checklists;
- Parent interviews;
- Staff interviews;
- Onsite technical assistance activities;
- Telephone or written surveys; and
- Required Plan of Correction (POC) activities.

### Focused Monitoring and Data Verification Activities

The following scheduled events occur for each monitoring/verification visit:

- Prior to the start of any onsite monitoring visit the General Supervision and Data Manager provides orientation and training to volunteer team members, as needed, on the organization of the visit, the tools and checklists being used and requirements for program administration and EI service provision. All team members are generally assigned to review program records. Team members may also be asked to assist with reviews of specific practices of the CCB such as child count data requirements, documentation of complaints, public awareness and outreach materials and practices, etc.; however, EI Colorado staff maintains overall responsibility for these areas.
- The General Supervision and Data Manager conducts an entrance conference on the first day of the visit. The purpose of the conference is to:
  - Communicate the purpose and scope of the visit;
  - Introduce the team members to the CCB staff;
  - Review the file sample and add/change names in the sample due to specific circumstances;
  - Identify key CCB staff for reviewing other documentation; and
  - Answer any questions from CCB staff and monitoring team members.

- Subsequent to the entrance conference, the team members begin the review of the individual records of the children included in the sample. An “EI Services Focused Monitoring Checklist” may be used for this purpose.
- Interviews with CCB administration and EI staff are conducted as needed to obtain additional information to identify compliance with requirements. Generally, interviews are held with the EI Director, Case Management Director, Program Managers and a sampling of service coordinators.
- Administrative records are reviewed as necessary to ascertain CCB compliance with EI Colorado requirements. This includes:
  - Administrative reviews of trends and patterns of child count data. Such a review should also compare data reported to the Department;
  - Agency records of complaints and disputes; and
  - Reports of family satisfaction.
- Prior to the exit conference, the General Supervision and Data Manager convenes a team meeting to review the findings of individual verification team members and to identify the strengths and problems of administrative and programmatic practices.
- The General Supervision and Data Manager conducts an exit conference with assistance of monitoring team members. The exit conference is generally attended by the EI Director, Case Management Director, Program Managers, service coordinators, EI staff, and others selected by the program director. The purpose of the exit conference is to:
  - Review the purpose of the verification visit and the methods used to conduct the visit;
  - Thank all team members and CCB staff involved in the verification visit;
  - Communicate the preliminary findings of the verification visit;
  - Answer any questions from CCB administration or staff; and
  - Provide information concerning the timelines for the survey report and if a POC will be needed.
- A pre-exit conference may be held with the Executive Director and/or Program Director at the discretion of the team leader. Generally, this occurs if EI Colorado staff believes the Executive Director is not aware of some of the issues identified as problematic at the time of the monitoring or verification visit.
- The General Supervision and Data Manager collects all checklists, team member notes, and agency documents obtained as part of the verification process.

#### Onsite Technical Assistance

EI Colorado staff provide onsite technical assistance throughout the monitoring/verification visit, as needed and appropriate. Team members from other agencies are encouraged to share information concerning practices, procedures and other information they have found to work well at their agency. If as a result of the verification visit, the need for additional technical assistance is identified, the General Supervision and Data Manager assists the agency in identifying resources.

## Reporting

The General Supervision and Data Manager provides the CCB with a written report of the monitoring/verification visit along with a letter of conveyance within 45 working days of completion of the visit. The report consists of a narrative summary of overall findings, including strengths and areas for improvements, identification of team members and information about the monitoring/verification visit process. The CCB is responsible for distributing the report to appropriate EI system partners. If noncompliance is identified, a notification of finding(s) of noncompliance and a POC will accompany the report with specific requirements for data reporting and CCB activities that will be required to bring the CCB into compliance. The report is posted on the Early Intervention Colorado website.

### **3. Plans of Correction and Follow Up**

#### Disposition of POCs

If a POC is issued to a CCB as a result of noncompliance identified during an onsite monitoring/data verification visit, the CCB has specific data reporting requirements which are submitted to the EI Colorado office on a monthly basis. Other CCB-specific activities may be required dependent upon the individual circumstances of the noncompliance. Data submissions and required activities are tracked until noncompliance is corrected at which time the CCB is notified that compliance has been achieved and the POC has been closed. The POC is posted on the website until noncompliance has been corrected and the POC is closed.

#### Determining and Conducting Follow-up

The General Supervision and Data Manager determines if additional follow-up is needed when there are pervasive and/or serious problems that require the close monitoring of an agency's progress in implementing its POC. If this is the case, additional EI Colorado staff may be enlisted to provide technical assistance to the CCB throughout the duration of the POC and until noncompliance is corrected and verified. Methods used to conduct follow-up include:

- **Additional Document Review:** The General Supervision and Data Manager may request copies of key documents that help determine whether the CCB is correcting the cited deficiencies.
- **Progress Reports:** The General Supervision and Data Manager may request that the CCB provides periodic (e.g., monthly, quarterly, etc.) written reports on its progress in implementing the agency's POC.
- **Onsite Monitoring Review:** The General Supervision and Data Manager and, where needed, additional EI Colorado staff members may re-visit the CCB to review agency records and records of children receiving EI Services and interview staff to determine if the CCB has made adequate progress in implementing its POC.
- After the determination has been made that noncompliance has been corrected and verified, the General Supervision and Data Manager notifies the CCB in writing that it is released from the finding and the POC is closed.

### **4. Documentation and Record Keeping**

Onsite monitoring reports, POCs, and correspondence regarding the monitoring are maintained in an official file at the EI Colorado office. A separate file of all other information such as completed checklists, interview forms, etc. is maintained for three (3) years.

**Appendix F:**  
**SAMPLE Plan of Correction Template**

**EARLY INTERVENTION COLORADO  
PLAN OF CORRECTION**

The attached Plan of Correction (POC) is required due to identified areas of noncompliance. The POC is to be submitted to Amanda Sutton, Early Intervention Colorado (EI Colorado) General Supervision and Data Manager.

<b>Agency Name</b>	.
<b>Agency Contact</b>	.
<b>Date of Notification</b>	.
<b>Date POC Due to EI Colorado</b>	.
<b>Date to Timely Correct</b>	.

*The date to timely correct shall be as soon as possible, but no longer than one year from the date the Community Centered Board was notified.*

I do hereby attest that the attached Plan of Correction represents our agency's commitment to timely correct the identified areas of deficiency.

\_\_\_\_\_  
Signature of CCB Executive Director

Date

\_\_\_\_\_  
Signature of Authorized EI Colorado Staff

Date

**INDICATOR 7**

“... service coordination means the activities carried out by a service coordinator to assist and enable a child eligible under this part and the child’s family to receive the rights, procedural safeguards, and services that are authorized to be provided under the State’s early intervention program”. (34 C.F.R. 303.23(a))

**Corrective Actions:** All noncompliance must be corrected in accordance with the evidence of change statements provided below.

Findings	Agency activity to correct problem	Specific Bench Marks
<ul style="list-style-type: none"><li><i>Failure to implement service coordination responsibilities.</i></li></ul>	<u>Required by EI Colorado:</u>	Send child-specific report to EI Colorado as described in the Required Evidence of Change.

**Indicator – Required Evidence of Change –**

1. Document the following information for all children for whom an activity occurred and a required prior written notice should have been provided to the family and send a report in Excel format to the EI Colorado:
  - Name of Child



- *Early intervention activity that occurred (eligibility determination, initial IFSP, annual IFSP, transition conference, etc.)*
- *Date early intervention activity occurred*
- *Date prior written notice was sent to family*
- *Where applicable, explanation of why notice did not occur within the required 10 days*
- *Where applicable, explanation of why notice did not occur and actions taken as a result*

**CCB:**

**Baseline data for Indicator is XX% (based on Date of file review)**

The required targets for compliance are:

- **100% compliance by (Date)**
- **No new evidence of systemic noncompliance**
- **Evidence of sustainability**

## Appendix G: Local Program Self-Assessment

Each CCB is encouraged to self-assess the agency's policies and practices against the policies, procedures and Agency Letters for Early Intervention (EI) programs as part of a process of continuous quality improvement. Examples of self-assessment processes may include:

- Compliance - The agency, with the assistance of its local partners, reviews its policies and procedures to identify areas of compliance/non-compliance with EI requirements.
- Child Data Integrity and Program Outcomes - In this process the agency compares the data reported to EI Colorado to the source documentation in the child's file to determine the extent to which the reported data is backed up by written documentation (e.g., timeliness of Individualized Family Service Plan (IFSP) development, completion of multidisciplinary assessments, etc.).
- IFSP Quality Review - The CCB staff, with the assistance of its local partners, reviews IFSPs for quality.
- Parent Satisfaction - Although EI Colorado collects some specific satisfaction data for reporting purposes, all local EI programs are encouraged to conduct regular reviews and analysis of parent satisfaction data. Such data should include measures of satisfaction with service coordination as well as EI Services.

## Appendix H: Definitions

Complete Data – Data that is submitted with no missing data points.

Desk Audit – Reports generated from the Early Intervention Data System that allow Early Intervention Colorado (EI Colorado) staff to conduct an analysis of data offsite.

Finding – A written conclusion that includes the citation of the regulation or requirement and a description of the quantitative and/or qualitative data supporting a decision of noncompliance with that regulation or requirement.

General Supervision – A range of activities and functions used by the EI Colorado program at the Colorado Department of Human Services (Department) to ensure that Early Intervention (EI) Services are carried out as prescribed in the federal and state statutes and regulations.

Incentive – An action taken by the Department to publicly recognize or reward Community Centered Boards (CCBs) who consistently achieve compliance in meeting requirements under federal and state regulations.

Sanction – An enforceable action taken by the Department for those CCBs who show persistent deficiencies in meeting the requirements of federal and state regulations.

Section 618 Data - Data that states are required to collect and report that measure results for children and families served through state Part C programs. These data include: Child Count; Program Settings; Exit Reasons; and Dispute Resolution.

Timely Correction – Noncompliance that is corrected and verified as soon as possible, but no later than one year from the written notification to the CCB of the noncompliance.

Timely Data – All required data reports are submitted on or before the mandatory due dates.

Valid and Reliable Data – Data provided are from the correct time period, are consistent with other child count data, if applicable, and are error free and consistent with like data from other sources such as record reviews.