

# Streamlining and Integrating Part C General Supervision Activities: Monitoring and Program Improvement



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A product of the General Supervision Priority Team



This document was developed as a result of the National Think Tank on “Streamlining and Integrating Part C General Supervision Activities: Monitoring and Program Improvement” that was hosted by NECTAC, in collaboration with the General Supervision Priority Team, Data Accountability Center (DAC) and the Regional Resource Center Program (RRCP), and participating states.

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# Priority Teams

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General Supervision

In April 2010, the National Early Childhood Technical Assistance Center (NECTAC), in collaboration with the General Supervision Priority Team, Data Accountability Center (DAC) and the Regional Resource Center Program (RRCPP), hosted a National Think Tank on “Streamlining and Integrating Part C General Supervision Activities: Monitoring and Program Improvement” in Albuquerque, New Mexico. Representatives from eight (8) states were invited to attend the Think Tank:

- Arizona
- Colorado
- District of Columbia
- Florida
- Idaho
- New Mexico
- New York
- South Carolina

The states were selected based upon regional representation, size, and where they were in the process of streamlining and integrating their Part C general supervision activities.

### **Purpose of National Think Tank**

The purpose of the “Streamlining and Integrating Part C General Supervision Activities: Monitoring and Program Improvement” Think Tank was to develop resources and materials (a tool kit) that will help states identify where and how monitoring and program improvement activities can be streamlined and better integrated to meet both state needs and national reporting requirements. Examples of strategies states can use to be more efficient while also maintaining the effectiveness of their general supervision system were also provided.

### **Background**

Annually, NECTAC conducts a needs assessment survey of state Part C and 619 programs to inform the development of a technical assistance (TA) plan for the year. As part of the survey, state respondents identify their highest need for TA, prioritize topics, and specific issues within each topic. Representatives from collaborating organizations (DAC, RRCPP) and the NECTAC Advisors assisted NECTAC in identifying appropriate TA activities based on their review and discussion of the needs assessment results.

For several years, Part C coordinators identified general supervision as their highest priority need of all early childhood topics. In July 2009, Part C identified “streamlining and integrating the various general supervision activities with the Annual Performance Report (APR), including using a data system/database for monitoring” as the greatest specific need within the topic of general supervision. Because it was such a high priority, the NECTAC TA Plan included several related TA activities around streamlining and integrating the general supervision activities with the APR. These included a preconference workshop and a session at the National Early Childhood Conference, a Think Tank to develop tools and products, and the dissemination of those products using a variety of dissemination strategies (webinars and sessions at other conferences).

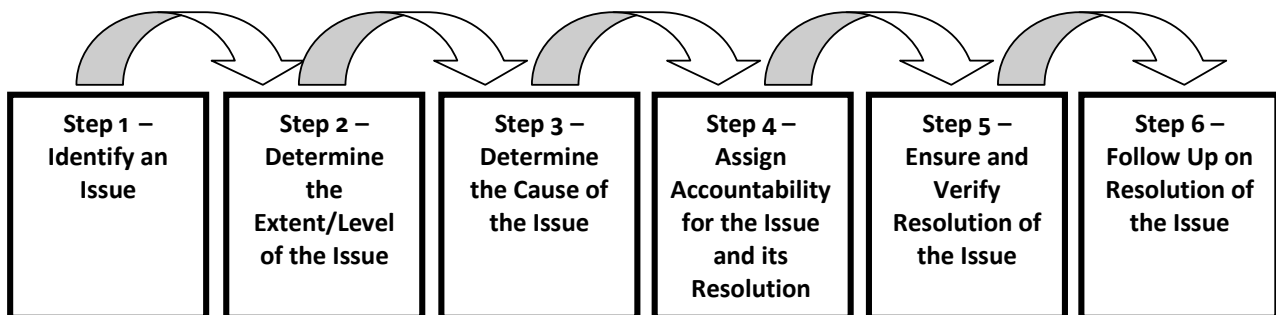
Although streamlining and integrating general supervision may be a high need for Part B as well as for Part C, the April 2010 National Think Tank focused only on Part C in response to the high need for TA

indicated by Part C in the NECTAC needs assessment survey. The Part C products and materials developed from the Think Tank can potentially serve as a foundation for developing resources specific to Part B. Recognizing that General Supervision encompasses more than monitoring and program improvement activities (e.g., fiscal components, complaints/hearings), other priority teams and specialty centers may have interest in developing additional tools/resources for those components.

**A Framework for Streamlining and Integrating Part C General Supervision Activities: Six Steps of Monitoring and Program Improvement**

The Think Tank used a framework for organizing the process of streamlining and integrating Part C General Supervision monitoring and program improvement activities around six (6) steps that describe what a general supervision system does. (See Table 1 below and document in Appendix A – *Six Steps of Monitoring and Program Improvement: A Framework for Streamlining and Integrating Part C General Supervision Activities.*) The six (6) steps framework, was conceptualized by Western Regional Resource Center (WRRRC) in July 2009 (See Appendix B - *Six Steps for Monitoring and Program Improvement*) to help states effectively operationalize the various components of general supervision.

**Table 1: Six Steps of General Supervision**



In using the six steps as the organizational framework for the Think Tank, the participants concurred that all six (6) steps are necessary to ensure that states are efficient and effective in identifying and resolving issues (including correcting noncompliance) for continuous, lasting improvement. Participants identified that the steps help to operationalize the interrelated functions of monitoring and program improvement activities and could serve as a foundation for states to improve, organize and redesign their activities.

In evaluating the six steps, the Think Tank offered information to further clarify the definitions established by WRRRC of the six (6) steps. The refined definitions are included in Table 2.

**Table 2: Six (6) Steps of the Framework Defined**

**Step 1: Identify an Issue**

- Use a variety of methods and activities including on-site monitoring, state database, self-assessment, complaints, etc. to identify both state and local level issues with performance and implementation of IDEA
- To be effective and manageable, the methods and activities to identify issues should:
  - be integrated with each other
  - not duplicate effort
  - respond to what is needed to meet requirements (State Performance Plan (SPP)/Annual Performance Report (APR), related requirements, state requirements) and support quality
  - limit the amount of data collected/analyzed
  - be based on the capacity of the state to carry out the activities
- For noncompliance, determine if verification of data is needed before determining if the issue is noncompliance and/or if noncompliance has been corrected prior to issuing written notification of a finding

**Step 2: Determine the Extent/Level of the Issue**

- Once an issue is identified, the state determines:
  - If it is noncompliance or if noncompliance is contributing to the issue
  - The level/extent of the noncompliance by using:
    - Percentages (e.g., ≥95%, 85-94%, 76-84%, ≤75%), or
    - Number of instances in proportion to the N (e.g., 1 out of 5, 1 out of 50)
  - As appropriate, consider other factors in determining the extent/level of the issue as appropriate:
    - Where and with whom the issue is occurring (one (1) or more service coordinators/providers; one (1) or more programs; regionally or statewide)
    - Historical or trend data (e.g., repeat offender)
    - Contextual factors (e.g., programs' demonstrated ability to correct prior noncompliance)
    - Number of issues/findings of noncompliance
- Consider the extent/level of noncompliance when it is determining what is required to ensure correction and/or issue resolution

**Step 3: Determine the Cause of the Issue**

- Actions related to determining the root cause of the issue should be related to what information/data is already available and what is known about the issue
- Other factors such as historical and trend data may also impact formality of actions needed to determine the root cause
- Analysis of the root cause(s) should be thoughtful and in sufficient detail to ensure that corrective actions/improvement efforts are meaningful and effective (change policies, procedures, practices, personnel development, administration, etc.)
- Overall, identifying root causes should ensure corrective actions are meaningful and effective to ensure that noncompliance can be verified as corrected as soon as possible, but in no case more than one year from identification

**Step 4: Assign Accountability for the Issue and Its Resolution**

- Use decisions on the level/extent and the root cause of the issue (Steps 2 and 3), including whether there is noncompliance, to determine:
  - At what level resolution needs to happen
  - Who needs to be responsible
  - What actions should be required
  - What data will be used to verify correction and how verification will occur
- For improvement, develop improvement strategies and correlate with SPP/APR as appropriate
- For correction of noncompliance, issue written finding notification (data/conclusion leading to finding of noncompliance, citation, requirement to correction as soon as possible but in no case later than one year from identification)

**Step 5: Ensure and Verify Resolution of the Issue**

- Improvement issues and those requiring system improvement may need to occur over several years
- New data should be reviewed to determine the effectiveness of the improvement strategies
- For noncompliance, the timeline for when correction must be verified (as soon as possible but in no case later than one year) begins on the date that the Lead Agency notifies the early intervention (EI) program in writing of its finding of noncompliance
- To demonstrate that noncompliance has been corrected, the state must:
  - **Prong 1** - Account for the correction of **all** child-specific instances of noncompliance (state or local agency can review a sample of the records with noncompliance to verify correction) **AND**
  - **Prong 2** - Determine whether each EI program with identified noncompliance is correctly implementing the specific regulatory requirements (achieved 100% compliance)

**Step 6: Follow Up on Resolution of the Issue**

- The state should have a system of incentives and enforcement actions in place
- If noncompliance is not corrected in a timely manner (within one year of identification), the state must have processes in place to continue to collect updated data to reflect 100% correction and that child-specific noncompliance has been corrected
- Written notification of correction of noncompliance must be provided to local early intervention programs
- Data on correction of noncompliance is used in making status determinations for local early intervention programs

## **Key State Challenges by the Six (6) Steps**

As part of the Think Tank agenda, the eight (8) participating states were asked to reflect on their state’s experiences in streamlining and integrating monitoring and program improvement activities and identify state challenges for each of the six (6) steps. Several overarching challenges impacting all steps were identified:

- Helping providers establish their own internal quality assurance processes and effectively analyze and use their data proactively
- Too many competing priorities including financing of the early intervention system
- Identifying new efficiencies to integrate and streamline general supervision components and activities
- Letting go of current and ineffective practices (what we are used to doing)

A summary of the key state challenges for each of the six (6) steps is included below.

**Table 3: State Challenges by Six (6) Steps of the Framework**

<b>Steps</b>	<b>State Challenges</b>
<b>Step 1: Identify an Issue</b>	Limited or no monitoring of fiscal accountability Some core state monitoring criteria not corresponding to SPP/APR indicators Collecting data on too many different “things” - not prioritizing what data to collect (not all of IDEA) Too many redundant components of general supervision system and methods used for monitoring High frequency of issues identified State data systems that are not real time and do not capture data on all indicators and priority areas
<b>Step 2: Determine the Extent/Level of the Issue</b>	Not having clear protocols to determine the extent/level of the issue Not paying due attention to “performance” issues
<b>Step 3: Determine the Cause of the Issue</b>	Not investigating the root cause Identifying the root cause(s) vs. acculturated excuses (such as personnel shortages) Insufficient state resources (including TA and incentives) to support local programs in determining root cause Early intervention personnel do not always have the skill set to analyze and drill down in data and then use data to develop effective CAPs
<b>Step 4: Assign Accountability for the Issue and Its Resolution</b>	Powerful interest groups, local municipalities and provider agencies reluctant to change No clear ownership of the issue and/or its cause Line of authority not clearly defined Issuing written notification of findings Determining resolution that is doable and ensures correction Not linking what is needed for “correction” with the level/extent of issue and root cause Developing focused, functional and measurable corrective action plans that result in correction of noncompliance
<b>Step 5: Ensure and Verify Resolution of the Issue</b>	Determining how much data is enough to verify correction Designing a system that is not overwhelming for providers (drowning in data) How to ensure correction since 100% compliance for 100% of the time is impossible
<b>Step 6: Follow Up on Resolution of the Issue</b>	Maintaining correction once focus is off indicator Using resolution results to guide state strategic plans and priorities Identifying appropriate sanctions/incentives Celebrating success in correcting noncompliance to stay in compliance

To address these challenges, the Think Tank participants identified available resources and several priority resources that need to be developed to support states in integrating and streamlining monitoring and program improvement activities. Development of three (3) new resources was initiated at the Think Tank, including:

1. *State Capacity and Staffing Related to Monitoring and Program Improvement* – This document includes a matrix and accompanying guidance for states to use in assessing their state capacity and staffing for carry out monitoring and program improvement activities and adjusting their activities to match available resources.
2. *Determining the Extent/Level of the Noncompliance and Its Resolution* – This document includes several examples that reflect how corrective actions and the amount of data needed to verify correction of noncompliance is selected based on the level or extent of the noncompliance.
3. *Guidance on Local Understanding and Use of Data* – This information focused on organizing information/training on assisting local programs in using data for improvement. This work has subsequently been incorporated into work that DAC is doing with several states.

Table 4 below incorporates links to the “State Capacity and Staffing” and “Extent/Level of Noncompliance” documents developed by the Think Tank participants along with other existing resources that support the implementation of each of the six (6) steps of general supervision and the integration and streamlining across these steps.

**Table 4: Resources for Part C Monitoring and Program Improvement by the Six (6) Steps**

Resource/Purpose	Source	Who Uses It
<b>Foundational/Overall System</b>		
<p><a href="#"><u><i>FAQ Regarding identification and Correction of Noncompliance and Reporting on Correction in the State Performance Plan (SPP)/Annual Performance Report (APR)</i></u></a>            This OSEP document provides OSEP responses to frequently asked question related to the identification and correction of noncompliance.</p>	OSEP	States
<p><a href="#"><u><i>09-02 Memorandum</i></u></a>            This OSEP memo provides clarification to states on the identification and correction of noncompliance and how OSEP determines evidence of correction into deciding if a state meets substantial compliance for the purpose of making determinations.</p>	OSEP	States
<p><a href="#"><u><i>OSEP Update on Identification and Correction of Noncompliance – Part C</i></u></a>            This OSEP PowerPoint provides updated information on the identification and correction of Noncompliance based on the 09-02 Memo and the FAQ on Identification and Correction of Noncompliance.</p>	OSEP	States
<p><a href="#"><u><i>Integrated System of General Supervision (Spider Web Activity and Instructions)</i></u></a>            This tool is designed to evaluate the integration of state general supervision activities.</p>	NCRRC	States

Resource/Purpose	Source	Who Uses It
<p><b><a href="#">The Wheel: A Tool for Developing an Annual Timetable for State General Supervision Systems</a></b></p> <p>This tool is to assist states in establishing and communicating timelines for completing general supervision activities throughout the year (includes an example for Parts B and C), integrating the various general supervision activities with the APR and other reporting requirements, and/or to define, describe or help evaluate the state’s general supervision system.</p>	NECTAC/ WRRC	States and EI programs
<p><b><a href="#">Colorado Calendar of State Activities</a></b></p> <p>This state tool is a color-coded monthly calendar for state level activities related to monitoring, training, etc.</p>	Colorado	States
<p><b><a href="#">Summary of Five States’ General Supervision Systems (NC, CT, WY, ID and NY)</a></b></p> <p>This document summarizes five states general supervision systems according to the six steps of monitoring.</p>	NECTAC/ WRRC	States
<p><b><a href="#">State Capacity and Staffing Related to Monitoring and Program Improvement Matrix and Instructions</a></b></p> <p>This document includes a matrix and accompanying guidance to assist states in assessing their state capacity and staffing for carry out monitoring and program improvement activities and adjusting their activities to match available resources.</p>	General Supervision Priority Team (DAC, RRCP, NECTAC)	States
<b>Step 1- Identify An Issue</b>		
<p><b>State Monitoring Indicator Matrices</b></p> <p>States have selected indicators for monitoring local early intervention (EI) programs and overall state performance. The monitoring indicators usually include some related requirements and/or quality measures in addition to APR indicators. The data source used to collect the data is included for each indicator. State tools include:</p> <ul style="list-style-type: none"> <li>• <a href="#">Alaska Monitoring Indicators</a></li> <li>• <a href="#">District of Columbia OSSE Part C Monitoring Tool</a></li> <li>• <a href="#">Wyoming Early Intervention Monitoring Manual – indicators and Measurements for Monitoring Regional Programs (Appendix A)</a></li> <li>• <a href="#">New Jersey Early Intervention System General Supervision Data Review Matrix</a></li> </ul>	Alaska, District of Columbia, Wyoming, New Jersey	States
<p><b><a href="#">Florida Self-Assessment Instructions and Quality Assurance Probes and Criteria for Measurement</a></b></p> <p>Florida uses a self-assessment process to monitor local early intervention programs and support local program improvement. The Probes and Criteria for Measurement identify what self-assessment items are required and how they will be measured. Electronic worksheets are provided for local programs to complete based upon the data sample selected by the state. The same Probes and Criteria for Measurement tool is also used with several local early intervention programs that are selected annually for a facilitated self-assessment. The facilitated self-assessment includes state and local program staff working together to jointly complete the self-assessment. Programs are selected for the facilitated self-assessment based upon performance or the need to complete on-site monitoring once every three years.</p>	Florida	States and EI programs



Resource/Purpose	Source	Who Uses It
<p><b><u><a href="#">Idaho Regional Annual Performance Report (Self-assessment)</a></u></b>            Idaho’s Regional APR (R-APR) is a self-assessment completed by regional programs on an annual basis and includes monitoring indicators, targets, data sources, instructions, and measurement. Some data in the R-APR is pre-populated from the database, while other data is collected through a regional record review/self-assessment process.</p>	Idaho	EI programs
<p><b><u><a href="#">New Mexico Annual Performance Report Template and Guidelines</a></u></b>            This template (and guidelines) records data previously collected in the state’s database to verify accuracy and collects data from EI programs that is not in the database. All indicators require analysis of data and improvement or maintenance activities. If performance is less than 100% for compliance indicators, EI programs are requested to conduct a root cause analysis and establish improvement activities to correct the noncompliance within one year of the APR.</p>	New Mexico	EI programs
<p><b><u><a href="#">New Mexico CBA/Routine Survey Manual</a></u></b>            This manual describes the tools/processes used during the onsite visit to 12 EI providers annually including: verification of local APR data; validation of database; billing and supporting documentation; and child record reviews of related requirements.</p>	New Mexico	States
<p><b><u><a href="#">Wyoming Early Intervention Monitoring Manual - Related Requirements and Root Cause Analysis Record Review (Appendix F)</a></u></b>            This record review tool is designed for use during onsite focused monitoring visits and is organized by APR and state selected local monitoring indicators. The state uses only portions of this record review tool for those indicators where the EI program’s performance is a concern. It incorporates items corresponding to the related requirements as well as items that help identify root causes of noncompliance or performance issues.</p>	Wyoming	States
<p><b><u><a href="#">Arizona Site Review Child File Data Sheet and Summary</a></u></b>            Arizona developed a self-assessment tool for local early intervention programs to collect data on monitoring indicators and related requirements that are not collected through other means, such as the state data system.</p>	Arizona	States and EI programs
<b>Step 2 – Determine the Extent/Level of the Issue</b>		
<p><b><u><a href="#">Determining the Extent and Level of the Noncompliance</a></u></b>            This document includes 2 example flow charts that link the extent and level of the noncompliance with a proportionate response for correction (Steps 2, 3, and 4). The flow charts diagram the relationship between a program’s level/extent of the issue with the actions that will be required of local programs (including corrective action plans or CAPS) to ensure correction of noncompliance/resolution of the issue and the amount of data that the state will use to verify resolution or correction.</p>	General Supervision Priority Team (NECTAC, DAC, RRCP)	States
<p><b><u><a href="#">Washington - Identifying Noncompliance, Root Cause and Corrective Action</a></u></b>            This flow chart and instructions outline the steps in the decision-making process for determining the level and extent of noncompliance and the relationship with root causes and the required corrective actions (including the amount of data needed for verifying correction) (Steps 2, 3 and 4).</p>	Washington	States
<p><b><u><a href="#">District of Columbia Part C Monitoring Tool</a></u></b>            This state’s monitoring tool incorporates the criteria in the right column for determining the corrective action based on the level of noncompliance.</p>	District of Columbia	States

Resource/Purpose	Source	Who Uses It
<b>Step 3 – Determine the Cause of the Issue</b>		
<p><b><u><a href="#">Local Contributing Factor Tool for SPP/APR Compliance Indicators C-1, C-7, C-8, C-9/B-15, B-11 and B-12</a></u></b></p> <p>This document provides ideas for the types of questions a local team would consider in identifying factors contributing to noncompliance for SPP/APR compliance indicators. Some questions are designed to determine adequacy of local agency/district management and oversight while others are geared for gathering information from service coordinators, providers and/or teachers and about actual practices. Data collected from this analysis should be used to identify contributing factors that relate to program infrastructure, policies and procedures, funding, training and technical assistance, supervision, data, personnel and provider practices. These factors, once identified, can lead to the development of meaningful strategies for correction in those areas contributing to the noncompliance.</p>	NECTAC, DAC, WRRC	States and EI programs
<p><b><u><a href="#">Local Contributing Factor Tool for SPP/APR Results Indicators C-2, C-4, C-5, C-6</a></u></b></p> <p>This document provides ideas for the types of questions a local team would consider in identifying factors contributing to Part C results indicators. Some questions are designed to determine adequacy of local agency/district management and oversight while others are geared for gathering information from service coordinators, providers and/or teachers and about actual practices. Data collected from this analysis should be used to identify contributing factors that relate to program infrastructure, policies and procedures, funding, training and technical assistance, supervision, data, personnel and provider practices. These factors, once identified, can lead to the development of meaningful strategies for improvement in those areas currently impacting performance.</p>	General Supervision Priority Team (NECTAC, DAC, RRCP)	States and EI programs
<p><b><u><a href="#">Florida Early Steps Root Cause Analysis: Periodic and Annual IFSP Reviews and Timely Services</a></u></b></p> <p>Florida developed Root Cause Analysis tools for local early intervention programs with long standing noncompliance with periodic and annual IFSP reviews and with timely services. Other early intervention programs can use the Root Cause Analysis tools in full or in part to identify local issues with these requirements.</p>	Florida	States and EI programs
<b>Step 4 – Assign Accountability for the Issue and It’s Resolution</b>		
<p><b>Sample Written Notification of Noncompliance</b></p> <p>States are required to provide written notification of noncompliance to local early intervention programs. Based on the level/extent of the noncompliance, some state’s findings letters require a CAP while others do not. Examples of findings letters include:</p> <ul style="list-style-type: none"> <li>• <u><a href="#">Arizona</a></u></li> <li>• <b>Florida - <u><a href="#">Transmitting Email</a></u> and <u><a href="#">Quality Assurance Report</a></u></b></li> </ul>	Arizona Florida	States

Resource/Purpose	Source	Who Uses It
<p><b>Corrective Action Plans/Improvement Plans</b> States have developed corrective action plan/improvement plan templates to ensure corrective of noncompliance and program improvement.</p> <ul style="list-style-type: none"> <li>• <a href="#">Wyoming</a></li> <li>• <a href="#">New Jersey (45 Day Timeline); (Transition Conference); (LEA/SEA Notification and Transition Plan)</a></li> <li>• <a href="#">Idaho</a></li> <li>• <a href="#">Florida</a> NOTE: The Florida continuous improvement plan template is used immediately following identification of noncompliance and following early intervention program’s notification of their Status Determinations.</li> </ul>	Wyoming New Jersey Idaho Florida	States and EI programs
<p><a href="#">Review Checklist: Corrective Action Plan/Improvement Plan</a> This document is designed for states and local programs to use in reviewing a CAP/IP to ensure that the plan is sufficient to make needed systems change and ensure improvement and/or correction.</p>	NCSEAM/ DAC	States and EI programs
<p><b>Colorado Dashboard Reports on Implementation of Plan of Corrections - Examples: <a href="#">Report 1</a> and <a href="#">Report 2</a></b> These state reports are printed monthly and shared with staff to track progress and allow intervention as needed. Also, the state is planning to use this report to do progress checks when a finding is not issued.</p>	Colorado	States
<p><a href="#">Florida Local Programs Determining Correction of Noncompliance through Data Review</a> These instructions provide guidance to local programs on what data fields should be selected to run updated data reports to determine correction of noncompliance related to transition conferences, Notification and 45 day timelines. These reports can also be used by local programs on an ongoing basis to determine their performance with these requirements throughout the year as a preventative measure.</p>	Florida	EI programs
<b>Step 5 – Ensure and Verify Resolution of the Issue</b>		
<p><b>Tracking Correction of Findings of Noncompliance</b> States have developed data bases and other tools to track when findings of noncompliance need to be corrected (within one year of identification) and actually are corrected.</p> <ul style="list-style-type: none"> <li>• <a href="#">Connecticut</a> (database)</li> <li>• <a href="#">Missouri</a> (database)</li> <li>• <a href="#">Washington Tracking Determinations and Correcting Findings of Noncompliance</a> (Excel Spread Sheet)</li> <li>• <a href="#">Florida Noncompliance Correction Tracking</a> (Excel Spread Sheets)</li> </ul>	Connecticut, Missouri, Washington, Florida	States
<b>Step 6 – Follow-up on Resolution of the Issue</b>		
<p><b>Local Determinations</b> OSEP has made available several resources to assist states in developing and implementing their local determination process.</p> <ul style="list-style-type: none"> <li>• <a href="#">Department’s Review and §616 Determination Criteria</a> - This OSEP document outlines §616 of IDEA requirements related to the U.S. Department of Education’s responsibility for reviewing states’ APR on an annual basis and making determinations.</li> <li>• <a href="#">How the Department Made Determinations under Sections 616(d) and 642 of the Individuals with Disabilities Education Act in 2012: Part C</a> - This OSEP document outlines how OSEP made Determination for states.</li> </ul>	OSEP	States

# **Appendix A**

## **Think Tank Visual**

## Appendix A

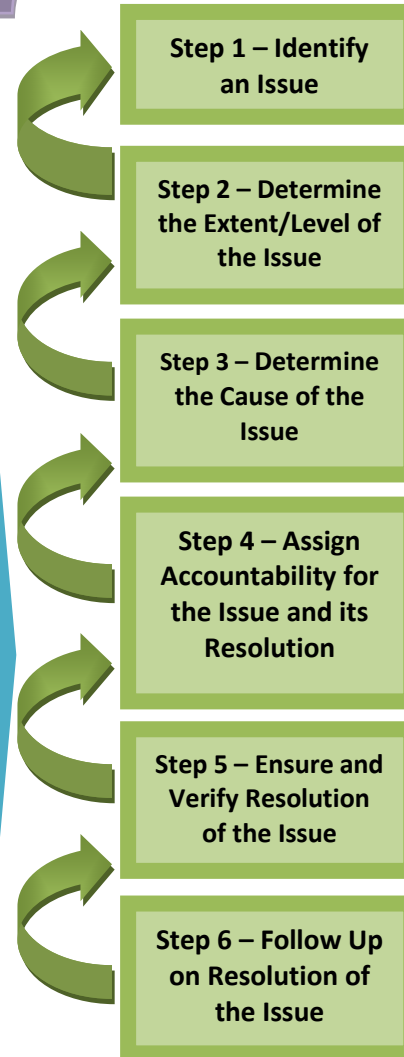
# Six Steps of Monitoring and Program Improvement – A Blueprint for Streamlining and Integrating Part C General Supervision Activities

**Integrated On-site/Off-site Monitoring Activities**

Record Reviews	Desk Audit
Interviews (Family/Provider)	Surveys (Family/Provider)
Other On-site Activities	Contract/Subgrant Management
Self Assessment	Complaints/Disputes

**Data on Process and Results**

Analysis and verification from **state data system** and all other on-/off-site sources that measure performance and compliance with IDEA requirements, **SPP/APR indicators** and state monitoring priorities/indicators.



**Corrective Action / Improvement Plans**

Address identified issues including causes and potential resolutions (infrastructure, supervision, personnel, resources, T & TA, etc.)

**Incentives/Rewards**

For improved performance/timely correction

**Targeted T & TA**

**Follow Up/ Verify Correction**

**Sanctions**

As necessary for uncorrected noncompliance.

**Reporting**

SPPAPR, Public Reporting, Local Determinations

**Appendix B**  
**Six Steps for Monitoring and**  
**Program Improvement**

## Appendix B

# Six Steps for Monitoring and Program Improvement

Over the past several years, new technical assistance has been made available to states and technical assistance (TA) providers on general supervision systems. The majority of that guidance has focused on the components of a general supervision system (i.e., the Big 8 Components of General Supervision, etc.) and the policies, procedures and practices that must be in place in order to provide general supervision and enforce the implementation of the Individuals with Disabilities Education Act (IDEA).

The Western Regional Resource Center (WRRC), however, based on the needs of several states and entities in its region, has developed guidance that moves to the next level. The WRRC has worked with states to move forward from focusing on what a general supervision system is to what a general supervision system does. This paradigm shift - from talking about the pieces of the general supervision puzzle to seeing the bigger picture that the puzzle reveals when those pieces are seamlessly put together - has been very helpful to states and programs.

This new framework for organizing and evaluating a general supervision is grounded in the requirements of IDEA as well as the critical elements of a general supervision system that OSEP set as part of its verification visit process. Those critical elements are that the system:

- identifies noncompliance in a timely manner using its different components;
- ensures correction of identified noncompliance in a timely manner;
- implements the dispute resolution requirements of IDEA;
- is reasonably designed to improve educational results and functional outcomes for all infants, toddlers and children with disabilities; and
- implements all requirements of IDEA, including those related to data collection, fiscal management, etc..

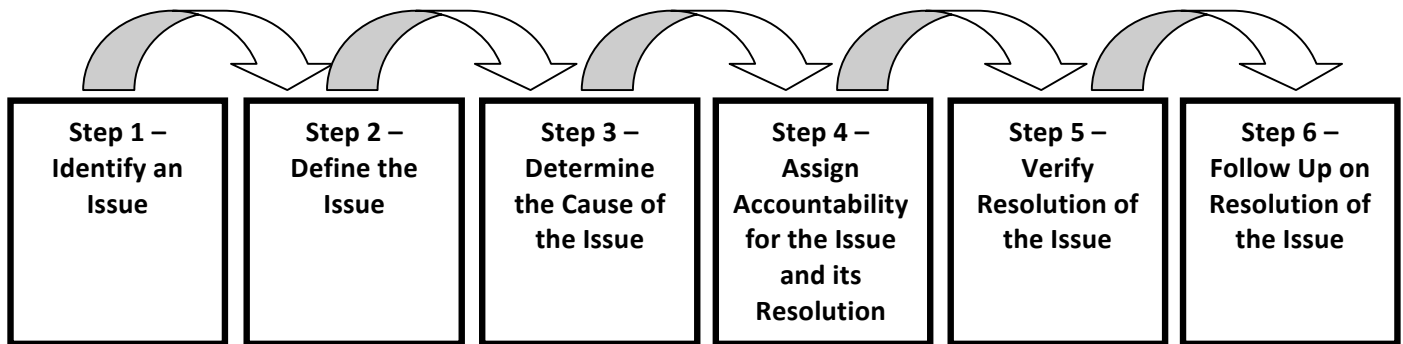
As set forth by OSEP, a general supervision system is intended to resolve all types of issues, not just to identify and correct noncompliance. States often lose sight of the other purposes due to the strong focus on compliance and meeting the requirements of IDEA. The framework used by WRRC sets up a discussion of how all issues are resolved whether they are related to performance or compliance, identified by parents or through a database, and whether they affect one or all children or infants and

toddlers in a state. The use of the word “issue” helps states to step back from focusing on finding and correcting noncompliance to analyze how all issues are dealt with and to organize their system so that the components work together to more effectively resolve all issues.

The framework is grounded in a firm foundation of capacity and knowledge of what a general supervision system is, enhanced by previous technical assistance provided by the WRRRC and other TA providers. This foundation includes the critical components of a general supervision system as well as the governance and structure of a state. Having mechanisms for communication, a common commitment to resolving issues, and a process for continuously evaluating and planning for improvement in place is essential prior to moving on to discussing and evaluating what the system does. In addition, prerequisite to discussing what the general supervision system does, a state must have an understanding of how the components of a general supervision system are interrelated.

Six steps are built on that foundation, as depicted in the graphic below. We believe that each of these steps is necessary for states to consider when using general supervision systems to resolve issues effectively, resulting in continuous, lasting improvement.

#### **Implementing a General Supervision System to Resolve Issues**





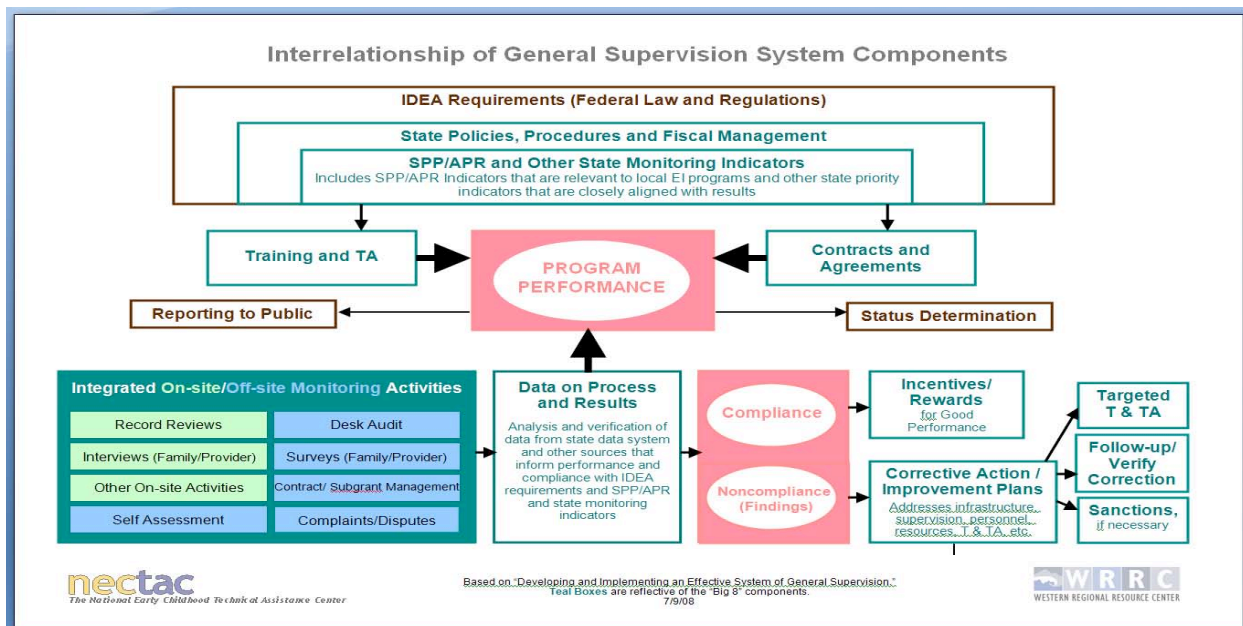
# Foundation – General Supervision System

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The following components should be in place: State Performance Plan/Annual Performance Reports; Policies and Procedures for Effective IDEA Implementation; Integrated Monitoring Activities; Fiscal Management System; Data System to Gather Data on Processes and Results; Strategies for Improvement, Corrective Actions, Incentives and Sanctions; Effective Dispute Resolution System; and Targeted Technical Assistance and Professional Development.

In addition, the following should be defined and in place: Mechanisms for Communication; Process for Evaluating and Planning for Improvement; and a Common Commitment to Resolving Issues.

In addition to having the necessary components in place, the state must also demonstrate an understanding of the interrelations of those components within the state. The WRRRC believes that, prior to using the six-steps, a state should define the interrelation of the component and, with the National Early Childhood Technical Assistance Center (NECTAC), developed a graphic representing interrelationships of the components to help states one way that the components work together.

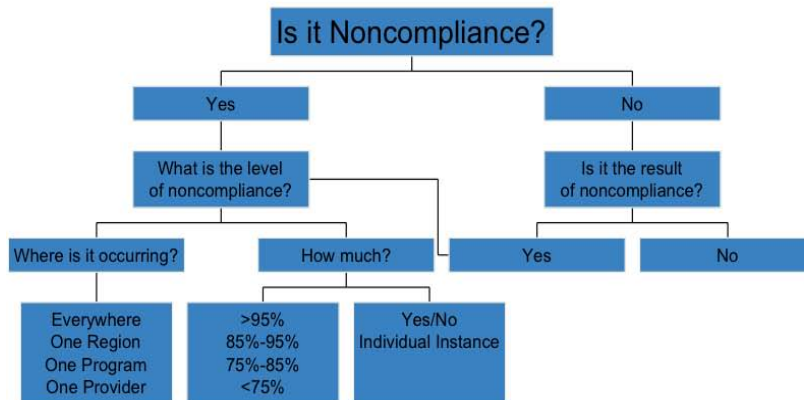


### Step 1 – Identify an Issue

After the foundation of the general supervision system has been established, issues related to performance, compliance, practices, procedures, etc. are identified using all components of the general supervision system as well as other sources. Issues are identified through routine processes and activities (data review, monitoring, dispute resolution, etc.) as well as through less formal processes.

### Step 2 – Define the Issue

When an issue is identified, the state should clearly define that issue based on the data or information used to identify the issue and any other related data or information. For compliance issues, the state must define whether the issue is noncompliance, whether it is the result of noncompliance and whether it could be causing noncompliance. It is important to consider the level of noncompliance and its possible effect on the resolution.



### Step 3 – Determine the Cause of the Issue

After the issue has been clearly defined, the next step is to conduct a root cause analysis to determine the cause of the issue in order to determine its resolution. This process may vary in formality based on the type of issue and whether the cause of the issue is already known. While determining the cause of the issue, it is important to also consider possible resolutions for the issue based on the cause.

#### **Step 4 – Assign Accountability for the Issue and its Resolution**

Accountability for each issue and its resolution must be assigned to an entity (a person, team, agency, etc.). The assignment of accountability should include expectations for resolution including a timeline. The required resolution should be based on how the issue was defined and the analysis conducted to determine the cause. An improvement or corrective action plan should be developed, as necessary, with clear strategies, objectives and responsibilities/resources. For noncompliance, a finding of noncompliance must be made and the resolution can vary based on the level of noncompliance as defined in Step 2. However, the resolution must include specific items defined by OSEP, including updated data demonstrating compliance and correction of individual instances of noncompliance, and the timeline for resolution must be within one year from the notification of the finding.

#### **Step 5 – Verify Resolution of the Issue**

For improvement issues and those requiring systemic changes, resolution of the issue may take place over a period of several years, requiring multiple steps of verification using longitudinal data. For compliance issues, the resolution (correction) must occur within one year of the finding of noncompliance and must be verified using updated data.

Regardless of the issue, in order to determine resolution and the effectiveness of the strategies employed, new data should be collected and analyzed following the implementation of the improvement or corrective action plan.

#### **Step 6 – Follow Up on Resolution of the Issue**

Mechanisms should be in place to follow up on resolution of issues at various times. States should have a process in place to provide incentives for resolution of issues as well as consequences when issues are not resolved. A system of sanctions and enforcement actions must be in place in advance to increase efficiency in correcting noncompliance when it is not resolved timely.

## Related Products and Tools

An internal workgroup at WRRRC has begun to develop a tool for states to use to assess the usefulness of their general supervision system in identifying and resolving issues. This tool is based on the six (6) steps process and also incorporates many of the questions from the critical element analysis guide developed by OSEP to assist in evaluating states’ general supervision systems as part of the verification visit process.

In addition to creating a needs assessment for states, WRRRC plans to use this framework to develop a menu of specific technical assistance activities that are available for states to assist in implementation of general supervision systems. The menu is to be developed in response to feedback from states that it was difficult to determine what assistance to ask for and a request that WRRRC describe more clearly what specific technical assistance is available.

The interrelation of the needs assessment and technical assistance menu will help WRRRC to provide technical assistance that is more grounded in state need and by being more focused, is more efficient. By using these methods for TA, the WRRRC hopes to effectively impact the implementation of state general supervision systems and thus the ability of states to meet the requirements of IDEA.

The following table represents the initial thinking of an internal workgroup. The WRRRC plans to involve stakeholders in collaboration to further develop the needs assessment and technical assistance menu including states that have found the six-step process to be helpful in evaluating and defining their general supervision systems.

General Supervision System Step and Related OSEP Questions	Needs Assessment	Technical Assistance Menu
<b>Foundation</b>	<ul style="list-style-type: none"> <li>• What are the components of the state’s general supervision system?</li> <li>• How does the state use the following mechanisms to identify and resolve issues?               <ul style="list-style-type: none"> <li>• Onsite monitoring</li> <li>• Offsite monitoring activities</li> </ul> </li> </ul>	WRRRC is prepared to provide technical assistance in the following areas: <ul style="list-style-type: none"> <li>• Defining the components of a state’s general supervision system.</li> <li>• Evaluating the effectiveness of the components of a general supervision system, the</li> </ul>

General Supervision System Step and Related OSEP Questions	Needs Assessment	Technical Assistance Menu
	<p>(self-assessment)</p> <ul style="list-style-type: none"> <li>• Database or other data collection tools (annual, periodically or continuous)</li> <li>• SPP/APR data and reporting (OSEP and public)</li> <li>• Local determinations</li> <li>• Dispute resolution system</li> <li>• Interagency agreements</li> <li>• Stakeholder input and collaboration including Parent Training and Information Center, State Education Advisory Panel , State Interagency Coordinating Council</li> <li>• Fiscal audits</li> <li>• Meetings/interviews with local administrators</li> <li>• Has the state evaluated the effectiveness of each of the components and applicable mechanisms?</li> <li>• Can the state define the interrelationships of the components? Has the state evaluated the efficiency of the interrelated system?</li> <li>• Does the state have improvement activities in place to increase the effectiveness of any mechanisms? If yes, what are they?</li> </ul>	<p>interrelationships of the components and the efficiency of the system.</p> <ul style="list-style-type: none"> <li>• Conducting an analysis of improvement plans/activities to determine any connections to each component.</li> </ul>
<p><b>Step 1 - Identify an Issue</b> Components for identifying issues (must focus on Part C and state requirements and results/performance indicators; may include quality practices)</p> <ul style="list-style-type: none"> <li>• Dispute resolution (formal and informal)</li> <li>• Onsite and offsite monitoring activities</li> <li>• APR data</li> <li>• Database data</li> </ul>	<ul style="list-style-type: none"> <li>• Which components of its general supervision system does the state utilize to gather data/information from its local programs?</li> <li>• On what measures/indicators is the state gathering data about all programs?</li> <li>• How does the state use the data/information it gathers from each mechanism? <ul style="list-style-type: none"> <li>• To make findings of noncompliance?</li> </ul> </li> </ul>	<p>WRRC is prepared to provide technical assistance in the following areas:</p> <ul style="list-style-type: none"> <li>• Data gathering procedures and practices including evaluation of data systems.</li> <li>• Data analysis to identify issues.</li> <li>• Facilitating the development of internal procedures for identifying issues.</li> </ul>

General Supervision System Step and Related OSEP Questions	Needs Assessment	Technical Assistance Menu
<ul style="list-style-type: none"> <li>• Fiscal audits</li> <li>• Other state measures or priorities</li> <li>• “Gut feelings”</li> </ul> <p>GS-1-A - What components of the State’s general supervision system are used to identify noncompliance?</p> <p>GS-1-G - How does the State use its other components (e.g., self-assessments, desk audits, local APR, due process hearing decisions, State complaint decisions) to identify noncompliance?</p> <p>GS-1-J - If providers of service are from different State agencies or different departments of the State agency or are under contract, how does the State ensure their compliance with Part C regulations?</p> <p>GS-3 – Dispute Resolution</p> <p>GS-5-G –L - Interagency Agreements</p>	<ul style="list-style-type: none"> <li>• To set priorities for: <ul style="list-style-type: none"> <li>• Focused monitoring</li> <li>• Technical assistance</li> <li>• Improvement planning?</li> </ul> </li> <li>• What are the states internal procedures for using these mechanisms to identify issues? <ul style="list-style-type: none"> <li>• Internal procedures for gathering/discussing/reporting issues?</li> <li>• Regular staff meetings to discuss?</li> <li>• Other internal communications?</li> </ul> </li> </ul>	
<p>Off-site vs. Onsite Monitoring to Identify Issues</p> <ul style="list-style-type: none"> <li>• Many monitoring activities can be done off-site as well as onsite</li> <li>• Consider what monitoring activities the state can do offsite to maximize resources versus what will be done onsite</li> </ul>	<ul style="list-style-type: none"> <li>• Given that onsite monitoring is resource intensive, what capacity does the state have for conducting onsite monitoring vs. carrying out monitoring activities off- site?</li> <li>• How can the state become more efficient with the use of its resources? Are there activities that can be carried out off-site that are currently done through onsite monitoring?</li> </ul>	<p>WRRC is prepared to provide technical assistance in the following areas:</p> <ul style="list-style-type: none"> <li>• Evaluation of current monitoring practices and activities.</li> <li>• Establishing monitoring protocol for on and/or off-site monitoring.</li> <li>• Development of monitoring tools including monitoring manuals, protocol, selection criteria, etc.</li> </ul>
<p>Local Self-Assessment</p> <ul style="list-style-type: none"> <li>• Determine frequency - annually by all, every few years by some, or when needed by few</li> <li>• Scope <ul style="list-style-type: none"> <li>• Limited - SPP/APR data, state selected</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• If a self-assessment is being or will be used, how does the state define its purpose? <ul style="list-style-type: none"> <li>• To collect APR indicator or other data not collected through its data system?</li> <li>• To monitor implementation of related requirements?</li> <li>• To focus on quality practices and</li> </ul> </li> </ul>	<p>WRRC is prepared to provide technical assistance in the following areas:</p> <ul style="list-style-type: none"> <li>• Developing and/or evaluating self-assessment tools.</li> <li>• Validation and/or verification of data collected through self-assessments.</li> </ul>

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<p>priority indicators, focused areas of need (related requirements for specific indicators)</p> <ul style="list-style-type: none"> <li>• Broad – comprehensive review of Part C requirements</li> <li>• Focus – compliance and/or quality practices</li> <li>• Activities - File reviews, fiscal audits, observations, other</li> </ul>	<p>services?</p> <ul style="list-style-type: none"> <li>• To focus on priorities areas when need arises?</li> <li>• In order to carry out the purpose of the self-assessment, how does the state define the following: <ul style="list-style-type: none"> <li>• The target audience responsible for completing the self-assessment?</li> <li>• The frequency that the self-assessment must be completed?</li> <li>• The activities (e.g., child record reviews, observations, review of other reports/documents) are needed to be included in the self-assessment?</li> </ul> </li> <li>• How does the state verify the accuracy of the data reported by local programs in the self-assessment?</li> </ul>					
<p>Onsite Visit</p> <ul style="list-style-type: none"> <li>• Onsite monitoring activities may include: <ul style="list-style-type: none"> <li>• Interviews with directors, staff and providers</li> <li>• Open meeting or focus group with parents</li> <li>• Review of records and/or written documentation</li> <li>• Observation</li> <li>• Analyses/verification of data</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• What is the purpose of the state’s onsite visit?</li> <li>• What activities does the state include or need to include in its’ onsite visit to achieve its purpose? <ul style="list-style-type: none"> <li>• Interviews with directors, staff and providers?</li> <li>• Open meeting or focus group with parents?</li> <li>• Review of records and/or written documentation?</li> <li>• Observation?</li> <li>• Analyses/verification of data?</li> </ul> </li> </ul>	<p>WRRC is prepared to provide technical assistance in the following areas:</p> <ul style="list-style-type: none"> <li>• Development of onsite monitoring protocol.</li> <li>• Development of tools to use during onsite monitoring.</li> </ul>				
<p><b>22</b> Cyclical vs. Focused Onsite Visit</p> <table border="1" data-bbox="191 1583 560 1871"> <thead> <tr> <th data-bbox="191 1583 370 1619">Cyclical</th> <th data-bbox="376 1583 560 1619">Focused</th> </tr> </thead> <tbody> <tr> <td data-bbox="191 1627 370 1871"> <ul style="list-style-type: none"> <li>• Regularly scheduled regardless of need</li> <li>• Usually consistent review</li> </ul> </td> <td data-bbox="376 1627 560 1871"> <ul style="list-style-type: none"> <li>• Selected based on need (rank ordering or other desk audit review) –</li> </ul> </td> </tr> </tbody> </table>	Cyclical	Focused	<ul style="list-style-type: none"> <li>• Regularly scheduled regardless of need</li> <li>• Usually consistent review</li> </ul>	<ul style="list-style-type: none"> <li>• Selected based on need (rank ordering or other desk audit review) –</li> </ul>	<ul style="list-style-type: none"> <li>• How often does the state need to conduct the onsite visit to programs to achieve its purpose (e.g., regularly scheduled, individualized, combination)?</li> <li>• Does the state’s resources and capacity align with the state’s onsite monitoring process (e.g., number of site visits annually, what information is gathered through the site visit)?</li> </ul>	
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<ul style="list-style-type: none"> <li>• Regularly scheduled regardless of need</li> <li>• Usually consistent review</li> </ul>	<ul style="list-style-type: none"> <li>• Selected based on need (rank ordering or other desk audit review) –</li> </ul>					

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<table border="1" data-bbox="191 304 565 766"> <tr> <td data-bbox="191 304 370 766">           across all sites            • Identify issues         </td> <td data-bbox="376 304 565 766">           can include random site selection            • Individualized review based on areas of need            • Determine root cause of issues, test hypotheses         </td> </tr> </table> <p>GS-1-D - (If applicable) What is the State's monitoring cycle?          GS-1-E - (If applicable) How are local programs selected for focused monitoring?          GS-1-F - How does the State choose its areas for focused monitoring?</p>	across all sites • Identify issues	can include random site selection • Individualized review based on areas of need • Determine root cause of issues, test hypotheses	<ul style="list-style-type: none"> <li>• If the state uses a cyclical monitoring process, what strategies does the state use to conduct root cause analysis of issues?</li> <li>• If the state is using or wants to implement focused onsite visits, how will programs be selected (e.g., rank ordered, determination level, other) for onsite visits?</li> </ul>	
across all sites • Identify issues	can include random site selection • Individualized review based on areas of need • Determine root cause of issues, test hypotheses			
<p><b>24</b> Using the SPP/APR to Identify Issues</p> <ul style="list-style-type: none"> <li>• Compliance indicators - &lt; 100%</li> <li>• Performance indicators - slippage, not meeting targets</li> </ul>	<ul style="list-style-type: none"> <li>• How does the state use data for the SPP/APR compliance and performance indicators to identify issues?</li> <li>• Does the state identify findings of noncompliance for SPP/APR compliance indicators?</li> </ul>			
<p><b>26</b> Monitoring Data and the SPP/APR</p> <ul style="list-style-type: none"> <li>• Database data vs. monitoring data collection</li> <li>• Coordination of APR data collection and monitoring data</li> <li>• Findings have to be made based on data collected through either or both methods</li> </ul> <p>GS-1-C - How does the State use its database to inform monitoring priorities (i.e., districts, areas for focused monitoring, policies, etc.)?</p>	<ul style="list-style-type: none"> <li>• Does the state use monitoring data or database data for SPP/APR compliance indicators?</li> <li>• If the state uses monitoring data, does the state's database collect data for some or all of the SPP/APR indicators? If so, can the state streamline its process, reduce duplication and/or maximize resources by using its database to report performance on these SPP/APR indicators? What barriers exist in making this feasible?</li> <li>• Does the state's database collect sufficient data (e.g., reasons for</li> </ul>			



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	<p>noncompliance including exceptional family circumstances, extent/level of the noncompliance) to report in the APR or does the state need to collect additional information from local programs?</p> <ul style="list-style-type: none"> <li>• How does the state verify the accuracy of the data in the database?</li> </ul>	
<p><b>27/28</b> From OSEP on Databases</p> <ul style="list-style-type: none"> <li>• If the lead agency (LA) receives data through its database that show noncompliance, the LA must: <ul style="list-style-type: none"> <li>• Make a finding; and</li> <li>• Require correction as soon as possible, and in no case later than one year after the LA’s notification.</li> </ul> </li> <li>• An LA may identify one or more points in time during the SPP/APR reporting period when it will review compliance data from the database and identify noncompliance.</li> <li>• In making compliance decisions, the LA should then review all the data it has received since the last time the LA examined data from the database and made compliance decisions.</li> <li>• A LA may determine whether it will examine all data in the database or a statewide representative sample.</li> </ul>	<ul style="list-style-type: none"> <li>• If the database is used to report on SPP/APR indicators, does the state have a process in place to identify issues and findings of noncompliance for local programs? If so, does the state have an efficient process in place for issuing written notification of a finding requiring correction as soon as possible but no later than one year following notification?</li> <li>• Does the state’s database collect point in time data or aggregate data?</li> <li>• How often does the state pulls its database to identify noncompliance?</li> <li>• How much data does the state review (e.g., representative sample or all data)?</li> </ul>	

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GS-1-B - (If applicable) How does the State use its database to identify noncompliance? GS-1-C - How does the State use its database to inform monitoring priorities (i.e., districts, areas for focused monitoring, policies, etc.)?		