

Table of Contents

Overview	5
Demographics.....	5
Data Infrastructure	8
1. Do all of your local EIS programs use a centralized data system at the state level?	8
2. Is the centralized data system web-based or a desktop application?	8
3. If you have a centralized statewide data system, who developed and who maintains the system? Check all that apply.	9
4. How frequently do you have access to updated local data at the state level?	9
5. How does child-level data and other program data get entered into your data system?	10
6. How are data reported by local programs to the state lead agency? Check all that apply.....	10
7. What is the approval process that prioritizes changes in your data system? Check all that apply.....	11
8. Do you have a standing line item in your budget for data system maintenance (small fixes)?.....	12
9. Do you have a standing line item in your budget for data system enhancements (new functionality)?	13
10. Does your state data system have a unique identifier for the following? Check all that apply.....	13
11. Has your state ever linked any individual child data for children receiving Part C services to data on the personnel who work with those children?.....	14
12. Does your data system provide electronic notifications/reminders (e.g., transition date, IFSP update due, etc.) to EIS personnel for Part C activities?.....	14
13. Are you using information (e.g., service frequency, duration, and provider authorized on the IFSP) in your state data system to issue payment or link to a system that does?.....	15
14. Is fiscal information contained in your data system(s) used to bill the following fund sources?	16
15. Is there an electronic interface between your data system and the following fund sources?	16

16. What type of reporting capability does your data system have? Check all that apply.	17
17. What type of reports does your data system or separate reporting application have?	18
18. What types of users can view or run reports? Check all that apply.....	18
Data Collection: What Data is Collected.....	20
19. Which staff at the local level enter data in the centralized statewide data system? Check all that apply.....	20
20. Does your state have at least one data system that contains data on individual members of the early intervention workforce?.....	20
21. What kind of data do you collect/maintain related to the early intervention workforce? Check all that apply.....	21
22. Do you collect/maintain/have access to quality rating or performance data (e.g., QRIS, certification) in your Part C state data system for individual EIS workforce members and/or local early intervention agencies?.....	22
23. Does your EIS data system include the following components of a child's record? Check all that apply.....	22
24. Which of the following statements best describes the relationship among the child level data elements that your state lead agency collects for children receiving Part C early intervention?.....	24
25. Can the local program print the IFSP from the state data system? Check all that apply.	25
26. Does your data system include the following data elements?.....	26
27. Do you use your data system to share any data electronically with the 619 program regardless of method? Check all that apply.....	27
28. Can you link electronically Part C and 619 Preschool Special Education data to complete Exiting Report (Old Table 3)?.....	27
Data Security: How is data protected and shared?.....	28
29. If your state has a unique identifier for infants and toddlers with disabilities, what is the basis for the identifier?.....	28
30. Please select the best description of how child-level data for Part C links to child-level data from other programs. Select one response for each row.....	28

31. If your state links the child-level Part C data to other statewide data systems (e.g., other early learning data systems, K-12 data systems, workforce data systems), what security challenges did you face in linking these data systems?	30
32. With which of the following systems do you have a common identifier for children receiving Part C services? Check all that apply.	31
33. What method does your state utilize to define data sharing between/among different agencies serving infants and toddlers receiving services under Part C? Check all that apply.....	31
34. Do you utilize portable electronic devices (e.g., mobile phones, iPads etc.) for transmitting data (e.g., evaluation and assessment, IFSP) from the field to a central data system?	32
35. Do you use electronic devices to collect parental permissions during procedural safeguard moments or to collect service delivery confirmations?.....	33
36. Which secure means of transmitting data to and from the local program, region or provider to the state centralized data system do you use? Check all that apply.....	33
Data Validation: How the system ensures valid and reliable data.....	34
37. What tools and procedures are in place to verify the validity of data that the state receives from local programs? Check all that apply.....	34
Data Analyses: How data are used and analyzed.....	35
38. How is your state using quantitative data about infants and toddlers with disabilities beyond APR reporting? Check all that apply.....	35
39. Which of the following methods are you using to collect data for the APR indicators or 618 data tables? Check all that apply.....	35
40. Do you provide other reports or data to stakeholders beyond the 618 data tables and the required state APR indicators?	37
41. In the last two years, has your state lead agency used data from your state system(s) for children receiving Part C services in any of the following ways? Check all that apply.....	39
42. I can get my Part C state data analyzed in a timely manner for recurring data needs (e.g., APR, annual report to governor or legislator).....	40
43. I can get my Part C state data analyzed in a timely manner when I have a new request (i.e., non-recurring such as an ad hoc request from the legislature or media).....	41
Staffing	41
44. What kind of staff perform the following functions for your Part C data system? Check all that apply.....	41

45. Does your Part C data manager interact with data managers for other early childhood programs (e.g., child care, Head Start, etc.)?	42
46. Does your state have a data governance body whose scope of responsibility includes data on children and families receiving Part C services? (This governance body's scope of responsibility can be broader than Part C data.)	42
47. Does your state have a formal or informal group with representatives responsible for defining, validating, analyzing, and using data for early childhood programs?.....	43
48. If you answered yes, does your Part C data manager participate?.....	43
Data Enhancements	43
49. Are you planning on developing a new data system in the next two years?.....	43
50. Do you plan to make major enhancements to your data system in the next two years?.....	43
51. If you are planning to make major enhancements, please specify what enhancements you plan to make. Check all that apply.....	44
Survey Responses by Lead Agency and Eligibility.....	46
Infrastructure	46
Data Collection	56
Data Security.....	62
Data Analyses.....	68
Staffing	73
Data Enhancements	76

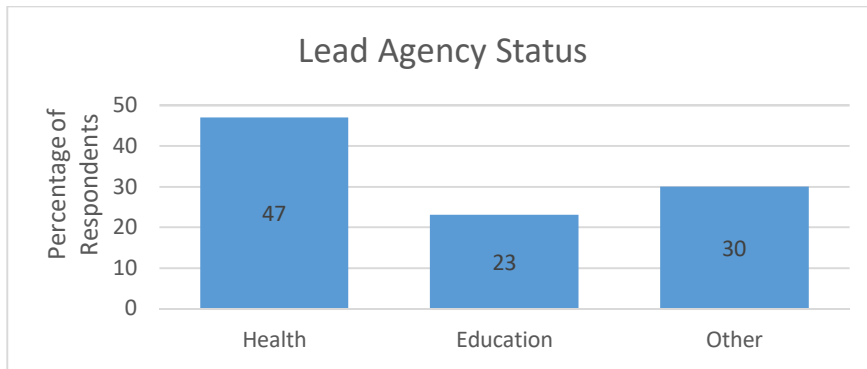
Overview

ITCA conducted the first comprehensive survey of the status of state Part C data systems in 2012. The Data Committee spent significant time identifying core components of a data system and the specific questions about each component that would be incorporated into the survey. For several months the questions were developed, analyzed and revised to ensure that the information that was being collected would provide a comprehensive picture of the current capacity of the data systems. The questions in this survey were designed to identify the infrastructure of Part C data systems, how data are collected and utilized, how data integrity is established and the level of staffing available to support data systems. Forty-nine states and jurisdictions completed the survey.

In 2015, the Data Committee made the decision to update the findings from the survey in order to identify changes in state data systems and the functionality supporting state efforts to ensure high-quality data systems. With the support of staff from the DaSy Center, the survey questions were reviewed, clarified and expanded to reflect current thinking. The questions were designed to identify: data system infrastructure; data collection and analyses; data security and validation; staffing and enhancements. The survey (see Attachment A) was distributed to all states and jurisdictions in September and responses were collected through the end of November. Forty-seven states and jurisdictions responded to the survey. DaSy staff conducted the processing of the data. The analysis process that was used is described in Attachment B.

Demographics

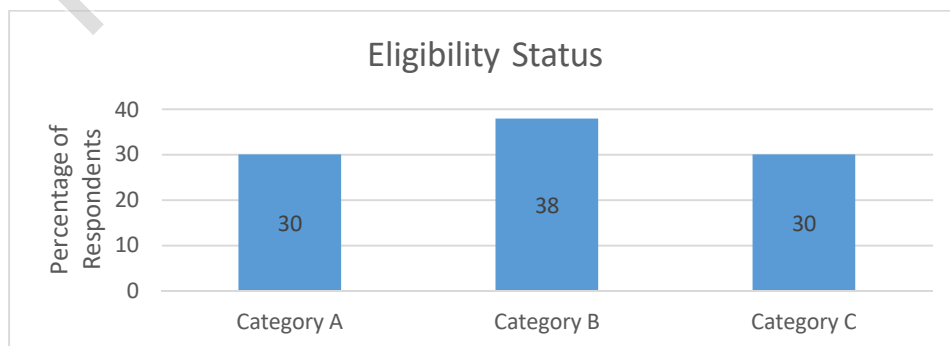
Forty-seven states and jurisdictions (hereafter referred to as “states”) completed the survey and were asked to identify their lead agency. Twenty-two states identified Health as the lead agency; eleven states identified Education as the lead agency; and fourteen states identified “Other” as the lead agency.



States were also asked to identify the eligibility category that most closely aligns with their eligibility criteria. The categories are as follows:

- Category A: At Risk, Any Delay, 15% delay in one or more domains, Atypical development, Significant Delay, 1 standard deviation in 1 domain, 20% delay in one or more domains, 20% delay in two or more domains, 22% in one or more domains, 25% delay in one or more domains;
- Category B: 25% delay in two or more domains, 30% delay in one or more domains, 1.3 standard deviations in two domains, 1.5 standard deviations in one or more domains, 33% delay in one domain; and
- Category C: 33% delay in two or more domains, 40% delay in one domain, 50% delay in one domain, 1.5 standard deviations in two or more domains, 1.75 standard deviations in one domain, 2 standard deviations in one domain, 2 standard deviations in two or more domains.

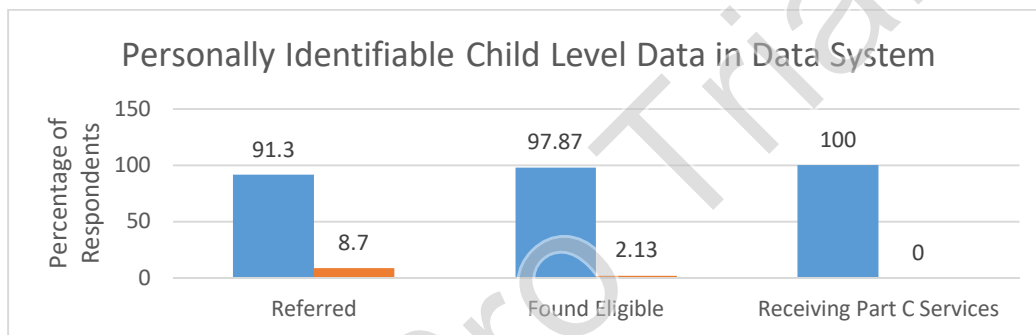
Forty-six states responded to this question. Fourteen states selected Category A, eighteen states selected Category B, and 14 states selected Category C.



The following is the final question that was asked in the opening demographic section.

Does your state Part C program have at least one electronic data system that contains personally identifiable child level data for all or nearly all individual children and families who are referred, found eligible and receiving Part C services?

All forty-seven states responded to this question. Their responses are recorded in the chart below. Forty-two states have an electronic data system that captures referred data. Forty-six states have a system that contains data on eligibility and all 47 states have an electronic data system that contains personally identifiable child level information for children receiving Part C services.



Data Infrastructure

The data infrastructure questions related to the design, hardware/software. Costs and development of the data system.

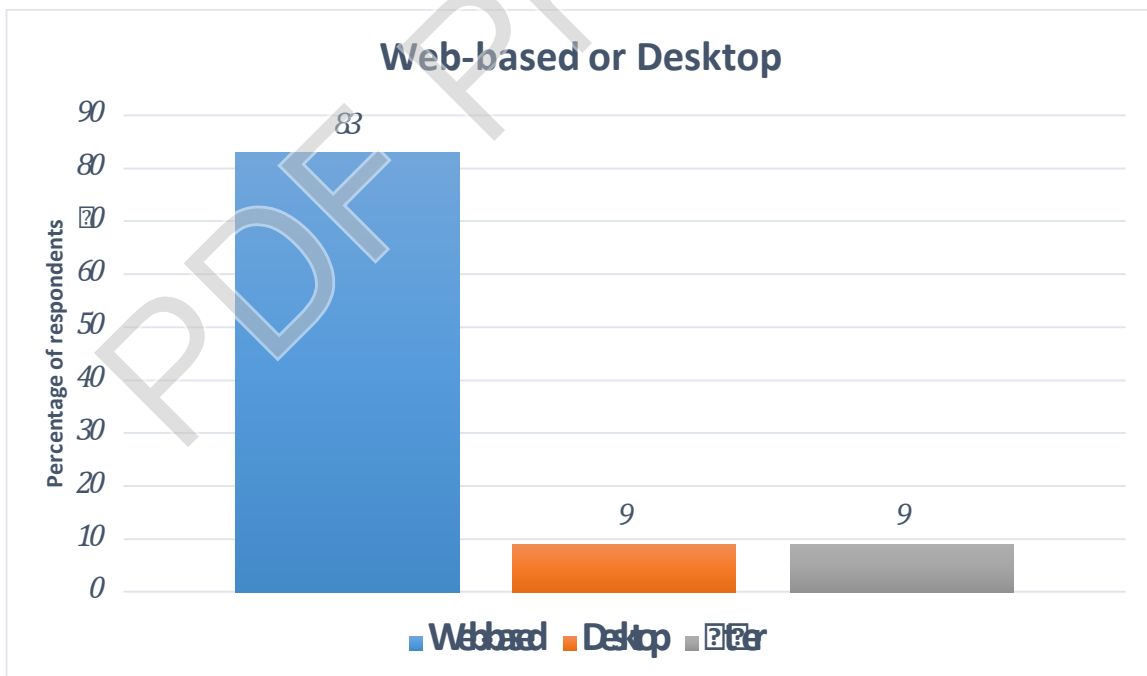
1. Do all of your local EIS programs use a centralized data system at the state level?

Forty-six states responded to this question. All forty-six states indicated that they use a centralized system at the state level.

2. Is the centralized data system web-based or a desktop application?

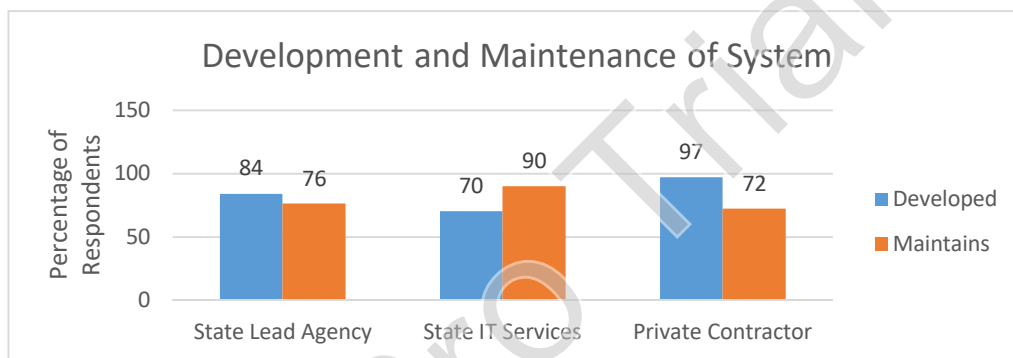
Forty-six states responded to this question. Thirty-eight states have a web-based system and four states have a desktop application. An additional four states selected other and responded as follows:

- *We have two systems, one web-based and one desktop;*
- *Web-access to system but not true 'web-based';*
- *Both, data entry is desktop, claims submission is web-based & EDI; and*
- *Some parts are web-based, some are desktop.*



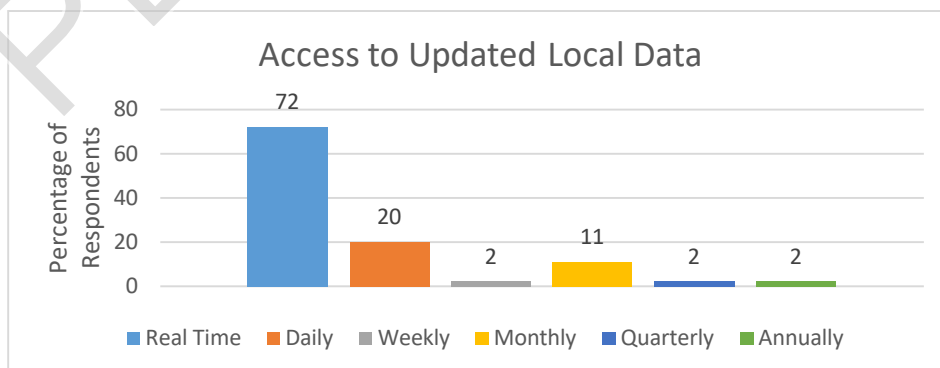
3. If you have a centralized statewide data system, who developed and who maintains the system? Check all that apply.

Forty-six states responded to this question. Because states could check all that apply, the percentages will exceed 100% indicating some combination. Twenty-one states indicated that the state lead agency developed the data system and nineteen states indicated that the state lead agency maintains the data system. Fourteen states indicated that the state's IT services developed the data system and eighteen states indicated that IT services also maintains the data system. Twenty-eight states indicated the use of a private contractor to develop the system and twenty-one states use a private contractor to maintain the data system.

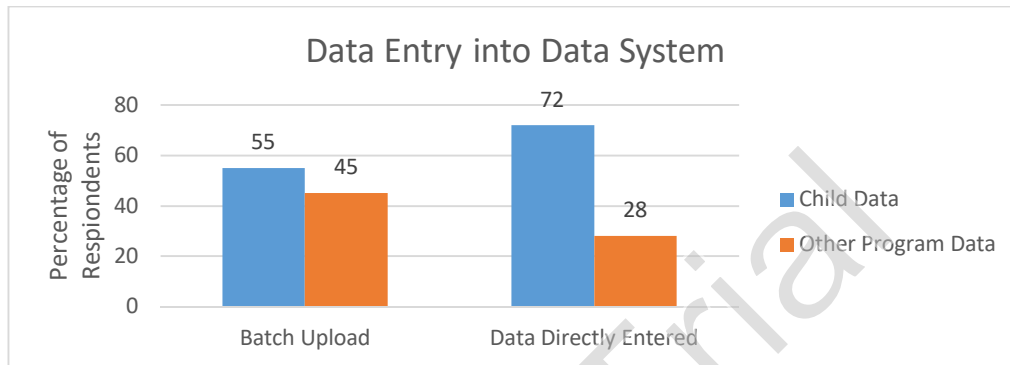


4. How frequently do you have access to updated local data at the state level?

Forty-six states responded to this question. Thirty-three states have real time data. Nine states indicated they have daily updated local data. One state indicated it has weekly access to updated local data. Five states have monthly access, one state has quarterly access and an additional state indicated they have annual access to updated local data.

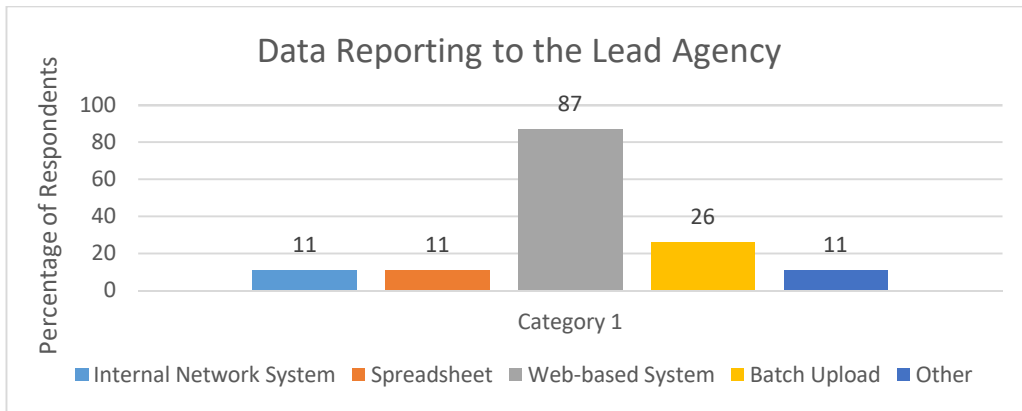


5. How does child-level data and other program data get entered into your data system?
Forty-five states responded to this question. Forty-three states indicated they do some form of direct data entry. Thirty-one states directly entered child data while twelve states directly entered other program data. Eleven states use batch upload with six states indicated they did a batch upload of child data, while five states used batch upload for other program data.



6. How are data reported by local programs to the state lead agency? Check all that apply.
Forty-six states responded to this question. Total percentages will exceed 100% as states could choose all that applied. Forty states indicated that a web-based system is used. Five states reported that an internal network system is used while an additional five indicated the use of spreadsheets. Twelve states use a batch upload process and five states chose other with the following explanation:

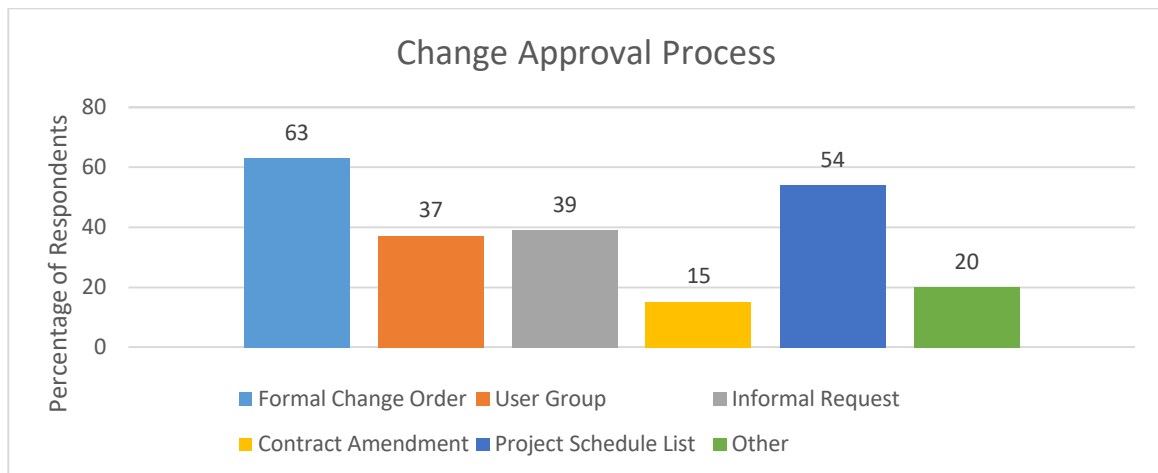
- *Some data needed for the APR are collected by spreadsheet or other forms (child outcomes, family outcomes, cleaning of compliance data/reasons for delay;*
- *Some data obtained through annual self-assessment;*
- *State queries the web-based system directly to get local data;*
- *Surveys and other methods for data elements not currently included in online data system; and*
- *E-mail transmission.*



7. What is the approval process that prioritizes changes in your data system? Check all that apply.

Forty-six states responded to this question. Total percentages will exceed 100% as states could choose all that applied. Twenty-nine states indicated that a formal change order is used. Twenty-five states use a project schedule list. Eighteen states use an informal request and seventeen states have a user group. Nine states checked other and provided the following comments:

- *Changes can only be submitted via the state lead agency with input from users and admin;*
- *Changes must be federally required;*
- *Data team manages changes;*
- *Helpdesk tickets;*
- *ITP KIDS Scrum team;*
- *Weekly meetings with ITS and systems integrator contractor are used to prioritize systems changes;*
- *Discussion with EIP staff and developer;*
- *Financial availability; and*
- *Requests from local level prioritized with state obligations and available funds.*



8. Do you have a standing line item in your budget for data system maintenance (small fixes)?

Forty-five states responded to this question. Thirty-three states indicated they have a standing line item. Twelve states indicated they have no line item for this and gave the following responses when asked how they maintain the data system:

- *General budgeted amount;*
- *Lead Agency IT staff;*
- *Maintenance fee in the contract;*
- *Restricted ability to make federal/state required changes;*
- *System shared by multiple programs but it is at WIC expense;*
- *The program has access to a data analyst who is able to make modifications to the data system;*
- *Umbrella agency has budget;*
- *Use internal staff and contractor;*
- *Using unspent carry-forward funds (unspent funds at the end of the year);*
- *We try to tap into IT funds at HHS;*
- *We use Part C funds for this and we have an expenditure plan; we do not have a separate budget line in the state budget; and*
- *Yearly subcontract.*

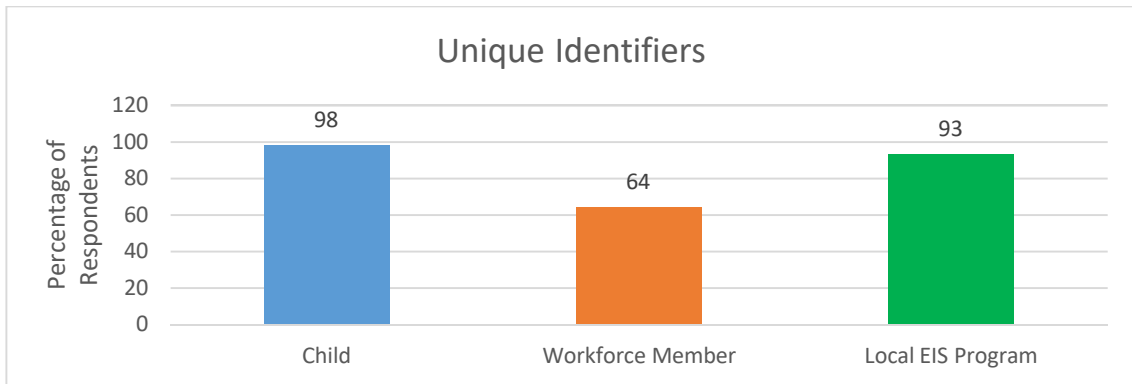
9. Do you have a standing line item in your budget for data system enhancements (new functionality)?

Forty-six states responded to this question. Twenty-eight states responded that they had a line item for system enhancements. Eighteen states have no standing line item and their responses of how they enhance their system follow:

- *Formal request;*
- *General budgeted item;*
- *In the past we used ARRA funds;*
- *Increase cost and PO amount;*
- *Lead Agency IT staff;*
- *Modify contract as necessary;*
- *Pending response to new bid which includes ability to pay for additional enhancements;*
- *Same process as maintenance;*
- *System shared by multiple programs but it is at WIC expense;*
- *System shared by multiple programs but it is at WIC expense;*
- *Through a contract amendment or separate sole source contract as funding is made available;*
- *Umbrella agency has budget;*
- *Use internal staff and contractor;*
- *Using carry-forward funds (unspent funds at the end of the fiscal year);*
- *Yearly subcontract; and*
- *Same line item as the maintain line.*

10. Does your state data system have a unique identifier for the following? Check all that apply.

Forty-six states responded to this question. Forty-five states report they have a unique identified for the child. Twenty-nine states have a unique identifier number for the workforce members and forty-three states have unique identifiers for the local EIS Programs.

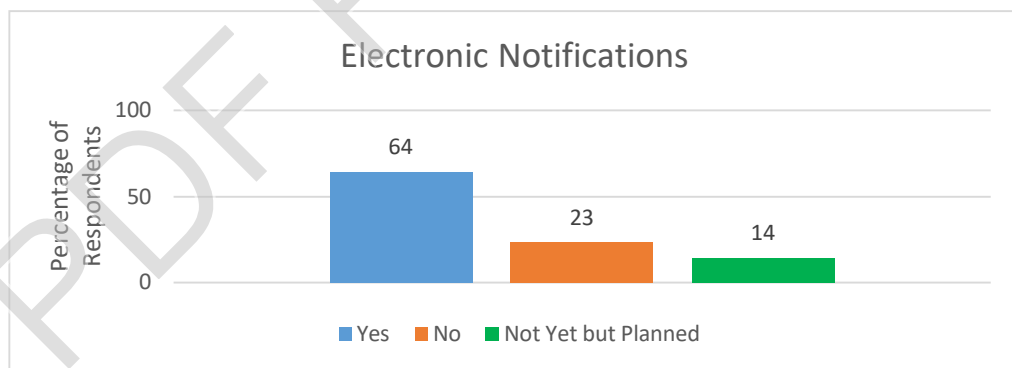


11. Has your state ever linked any individual child data for children receiving Part C services to data on the personnel who work with those children?

Forty-six states responded to this question. Twenty-three states indicated they have linked individual child data with personnel working with the child.

12. Does your data system provide electronic notifications/reminders (e.g., transition date, IFSP update due, etc.) to EIS personnel for Part C activities?

Forty-four states responded to this question. Twenty-eight states responded yes and six states indicated not yet, but planned.

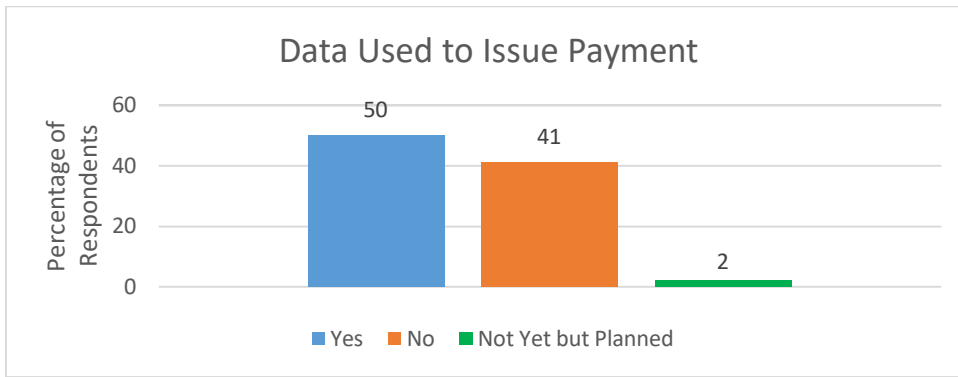


The states who do provide electronic notifications/reminders were asked to describe the type of notifications. Their answers are captured below:

- *Reports can be run by certain users to generate some of this (e.g., lapsing IFSPs);*
- *Email alerts, drop-down lists, announcements;*

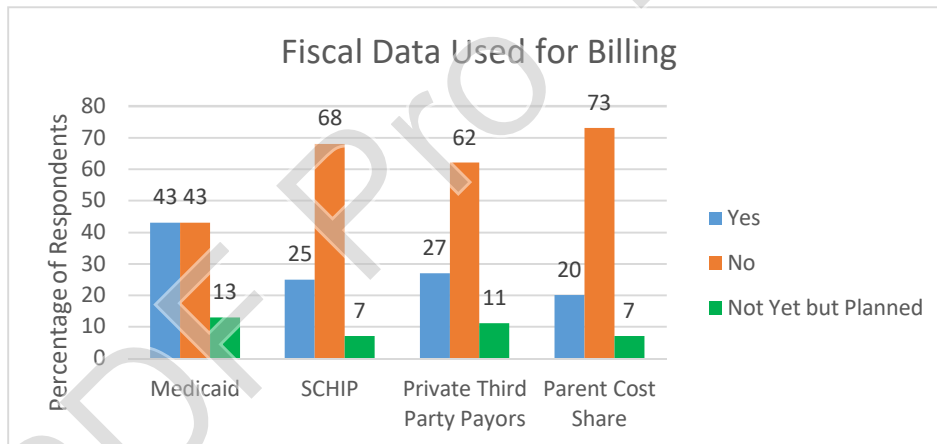
- *Email reminders to personnel for upcoming meetings, canceled meetings, FCP payments due and EA report due. Web-based system has Home Page with short-cuts to reminders for upcoming meetings, progress notes due, etc.*
- *Milestone reports and pop-ups;*
- *Not at state but at some local level;*
- *Provide ongoing reports but no notifications or reminders;*
- *Reports*
- *Reports of activities due can be run by the program;*
- *SEA receives transition notification to be sent to LEAs, 6 month and annual review;*
- *Tasks, deadlines, child transfer “in”, messaging, team member changes, staff setting personal notifications;*
- *Transitioning to a new system with visual and email notifications;*
- *Dashboards;*
- *Meetings, plans due;*
- *The system provides searches for transition timelines: nearing 45 days, nearing end of IFSP, referrals awaiting IFSP etc.;*
- *Timeline notifications (IFSP due, transition); and*
- *Timelines but had to shut it off because of coding issues.*

13. Are you using information (e.g., service frequency, duration, and provider authorized on the IFSP) in your state data system to issue payment or link to a system that does? *Forty-six states responded to this question. Twenty-three states indicated they were using information to issue payment of link to a system that does. Nineteen states responded in the negative. An additional four states that they were not currently doing so but then plan to do so in the future.*



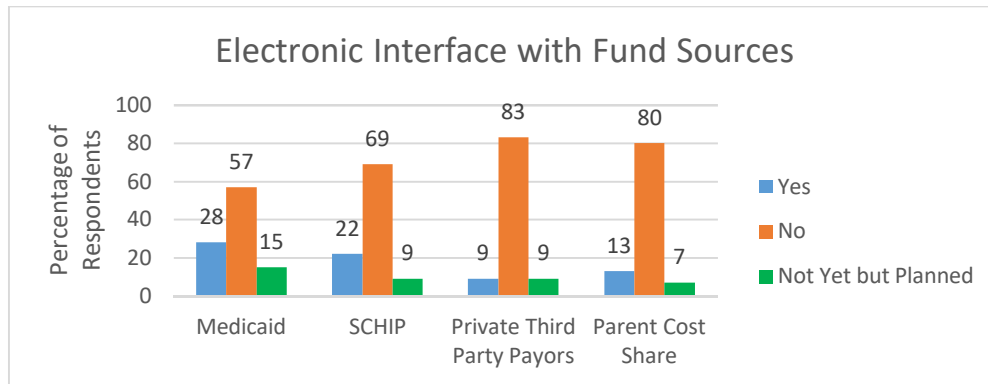
14. Is fiscal information contained in your data system(s) used to bill the following fund sources?

Forty-six states responded to this question. Twenty states indicated that fiscal information was used to bill Medicaid. Eleven states use fiscal information in the data system was used to bill SCHIP. Twelve states use the fiscal information to bill private third party payors and nine use the fiscal information in their data system to bill parent cost share.



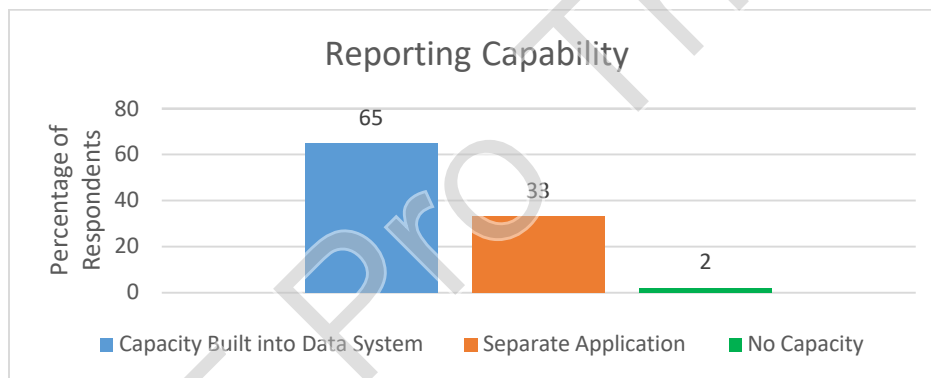
15. Is there an electronic interface between your data system and the following fund sources?

Forty-six states responded to this question. Thirteen states indicated they have an electronic interface with Medicaid. Ten states have an electronic interface with SCHIP. Four states have an electronic interface with private third party payors and an additional four have an electronic interface for parent cost share.



16. What type of reporting capability does your data system have? Check all that apply.

Forty-six states responded to this question. Thirty states reported that the reporting capacity is built into the data system. Fifteen states reported that reporting capability is a separate application. One state had no capacity.

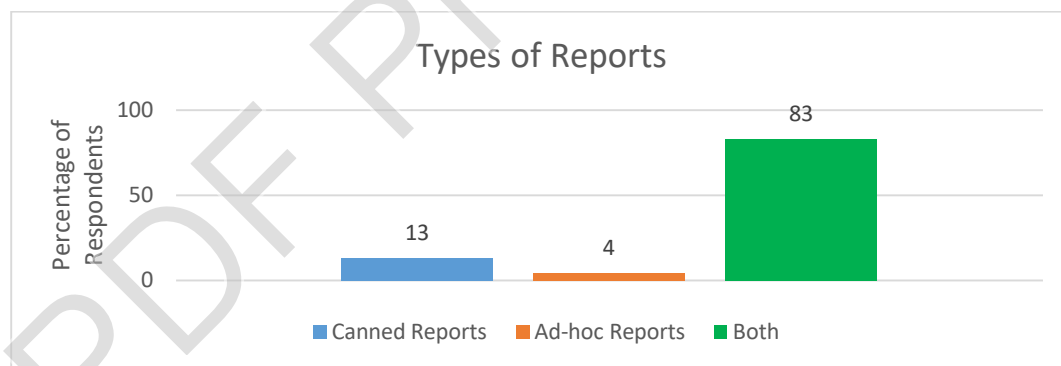


There was a formatting problem with the question that limited states to a single response. The comments about the platform for separate application/process provide additional information about state capability:

- *Both NTEIS and the State Fiscal Agent interface have reporting capabilities;*
- *Both direct and separate;*
- *Cannot check more than one in this question. Also would check Separate Application/process. Platform is Crystal Reports and SQL;*
- *Cognos;*
- *SQL Reporting;*
- *SQL Server;*

- *SQL and Access dB;*
- *Separate application “Logi Analytics” connects to SQL Server;*
- *State collects data and reports through federal portal;*
- *Survey did not allow two check marks, canned reports and downloads are available for adhoc reporting;*
- *Survey will not let you choose more than one. We have capability directly built in and we have a separate data warehouse application as well;*
- *Windows, SQL Server;*
- *You cannot check all that apply;*
- *The question would not let me select more than one. But in addition to built in reporting, we have a separate back up that we can run other reporting from; and*
- *We also utilize crystal reports.*

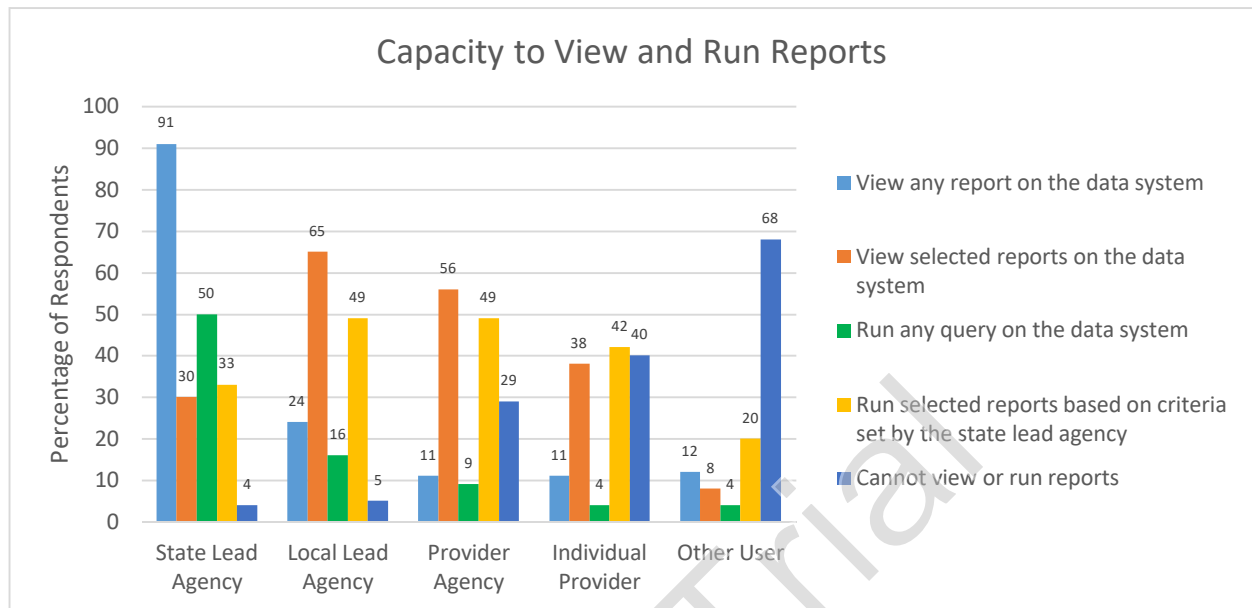
17. What type of reports does your data system or separate reporting application have?
Forty-six states responded to this question. Thirty-eight states have both canned and ad-hoc reports. Six states have canned reports only and two states use ad-hoc reports only.



18. What types of users can view or run reports? Check all that apply.

Forty-six states responded to this question. Forty-two states indicated that the lead agency can view any report on the data system. Twenty-four states indicated that local lead agencies could view selected reports and twenty-five states indicated that provider agencies could also view selected reports. Seventeen states indicated that individual providers could view selected reports. Twenty-two states reported that provider agencies

could run selected reports based on criteria set by the lead agency and seventeen states allow individual providers to run selected reports.



Other users for reports included:

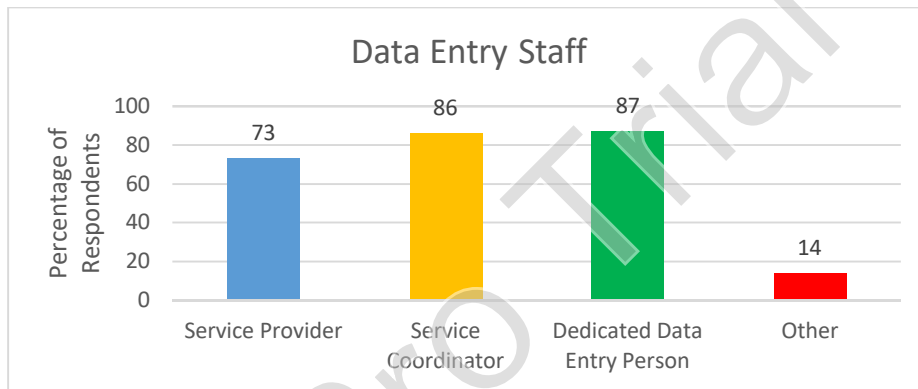
- *Contractor for Central Finance Office = View any report and Run any query. Part B staff notification report = Run selected report based on criteria set by state lead agency;*
- *This table is not clear as to our situation. Individual users of the system can run any standard report in the system. Not all individual providers are users of the system. Provider agency staff can run any standard report, but only for the children served by their agency. State level staff run reports for the entire state;*
- *There are no provider reports in NYEIS; however providers have many reports through the State Fiscal Agent related to billing/claiming/reimbursement;*
- *Data entry and individual provider access controlled at the local level;*
- *Data reports automated with EHDI, Indian Health and CPS;*
- *EHDI has access to files for children who are deaf and hard of hearing;*
- *Reports tied to security level access;*
- *Reports/views depend on user role security established;*
- *Signatory agencies: Dept. of Public Health, Dept. of Human Services, Child Health Specialty Clinics at the University of Iowa;*

- *Users may only access their own data, cannot see statewide; and*
- *State viewer (other users).*

Data Collection: What Data is Collected

19. Which staff at the local level enter data in the centralized statewide data system? Check all that apply.

Forty-four states responded to this question. Thirty-nine states identified a dedicated data entry person. Thirty-eight states identified service coordinators and thirty-two states identified the service provider.



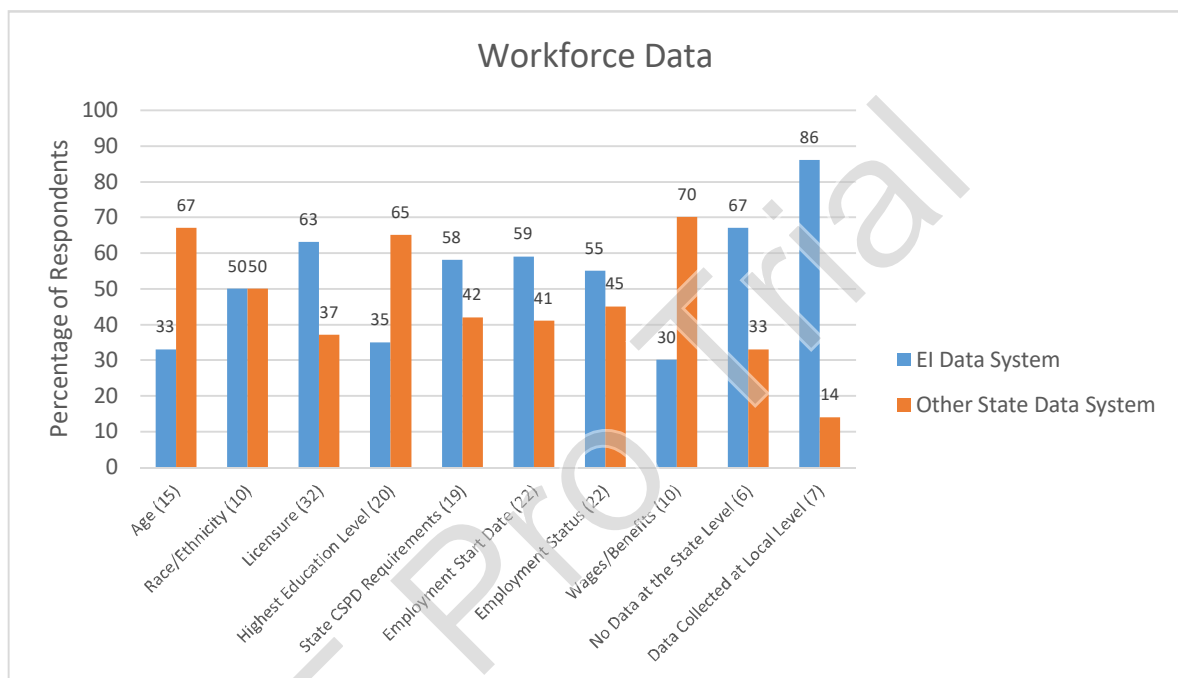
- *Six states offered additional staff options:*
 - *Local government agencies administering the program;*
 - *Administrative support, supervisor, hub leaders;*
 - *Provider decision;*
 - *Not all local staff are users of the system. You need to be a user of the system to enter data and run reports;*
 - *Program managers/directors; and*
 - *Therapists.*

20. Does your state have at least one data system that contains data on individual members of the early intervention workforce?

- *Forty-four states responded to this question. Thirty-four states indicated they had a data system that contains provider information.*

21. What kind of data do you collect/maintain related to the early intervention workforce? Check all that apply.

Thirty-eight states responded to this question. Twenty states keep licensure information in their early intervention data system. Thirteen states capture employment start date and twelve capture employment status. An additional eleven states capture state CSPD requirements in their early intervention data system. In the chart below, the number of states responding to each individual element is included in parens.



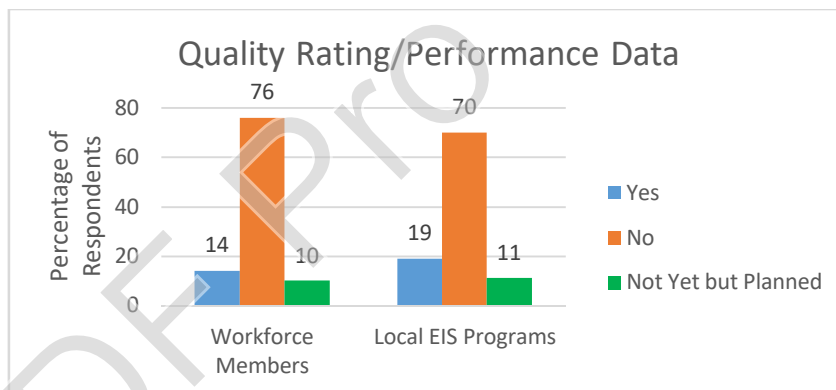
Ten states identified addition data that they collect:

- *NPI, dates of licensure/certification, language spoken, types of service, special populations served, catchment areas, other data needed for provider approval and state provider agreements;*
- *This will be part of another database, MT Early Childhood Practitioners Registry;*
- *WV will be implementing a cross EC professional development tracking process with portfolio options;*
- *Several of the data elements are optional fields for personnel data in our system, so many agencies do not enter the data (e.g., race and ethnicity data on personnel);*

- *Instead of wages/benefits, it's claims payments -1099s issued;*
- *OK State Department of Health also maintains these records for related service providers;*
- *Certification as Early Intervention provider;*
- *Collected at local level and sent to the state as a contract deliverable;*
- *Role (service coordinator/evaluator/IFSP provider); and*
- *Certification and CEU information.*

22. Do you collect/maintain/have access to quality rating or performance data (e.g., QRIS, certification) in your Part C state data system for individual EIS workforce members and/or local early intervention agencies?

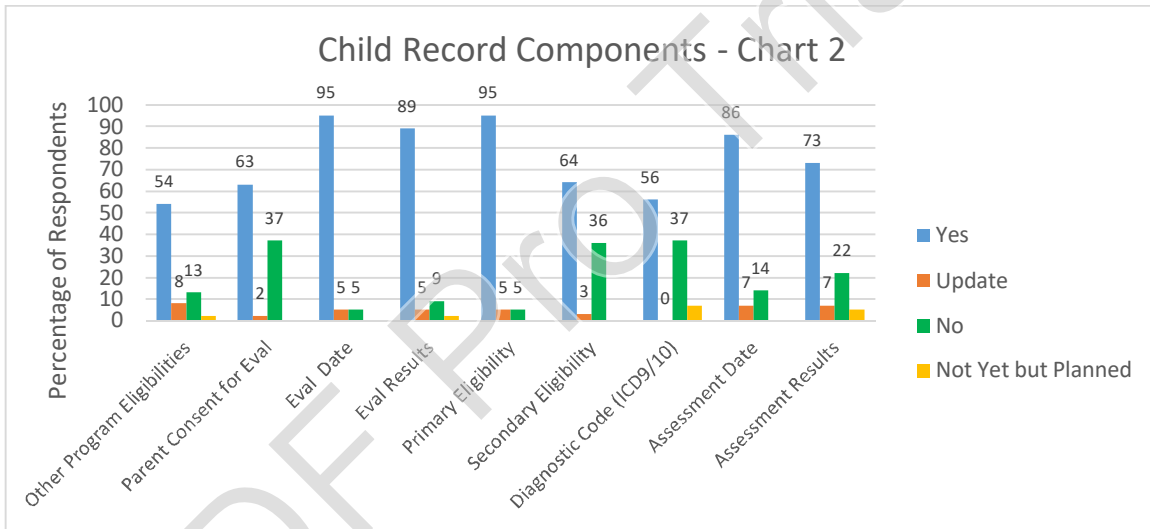
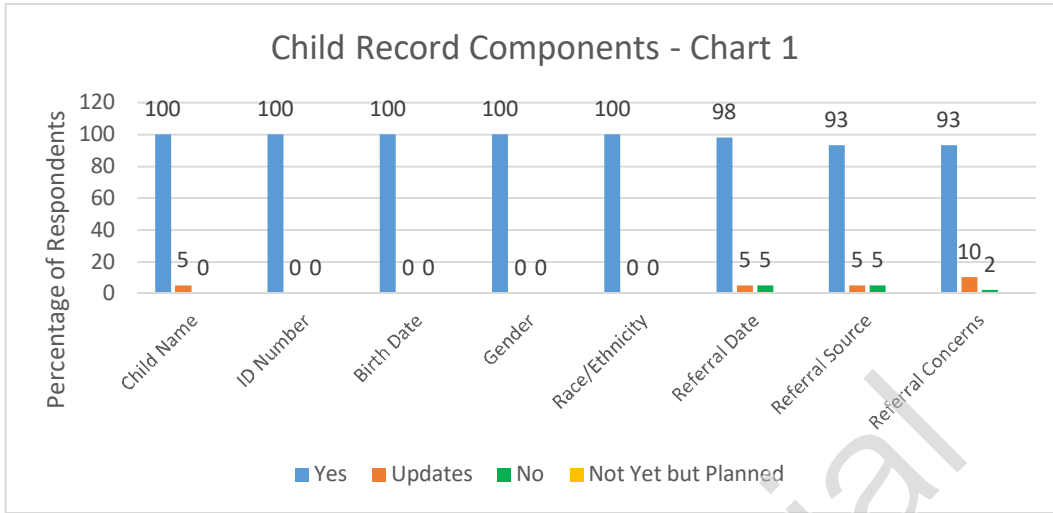
Forty-three states responded to this question. The majority of states indicated they are not collecting this information. Six states are collecting this information for workforce members and eight states are collecting this information on local EIS programs.

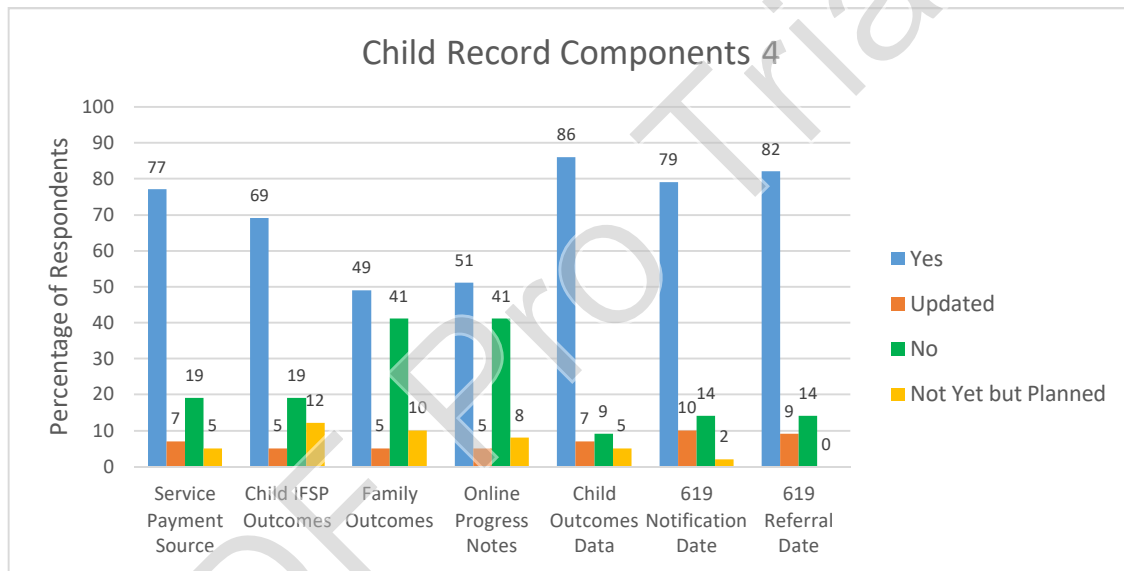
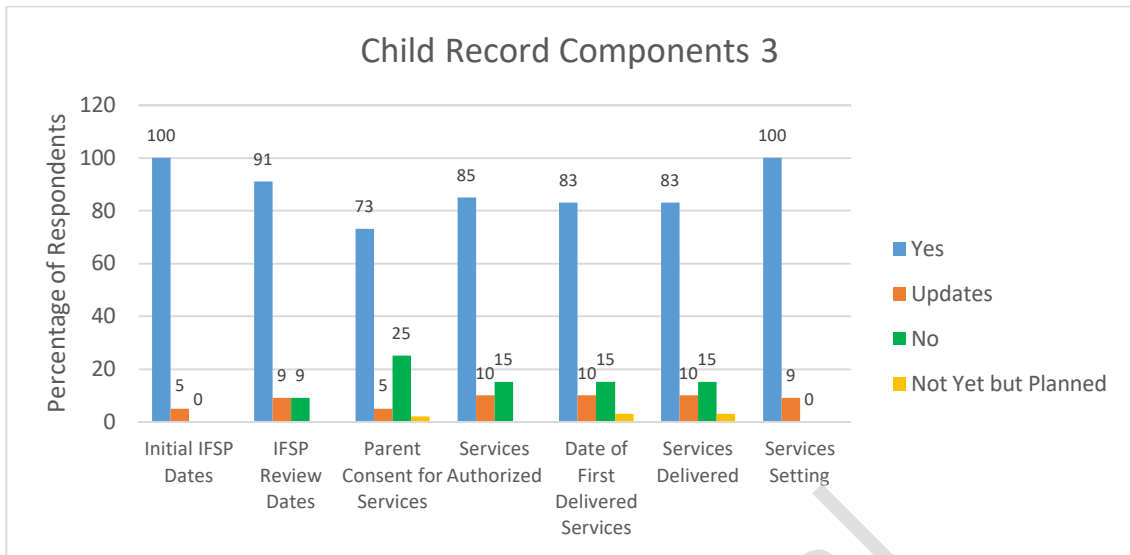


23. Does your EIS data system include the following components of a child's record? Check all that apply.

Forty-four states responded to this question. The data components collected by all the respondents include: child name, identification number, birth date, gender, race/ethnicity, initial IFSP date, and services settings. The rest of the components collected by states had a range from 20 to 43. The question also asked whether information was update when there was a change and if the data was not currently

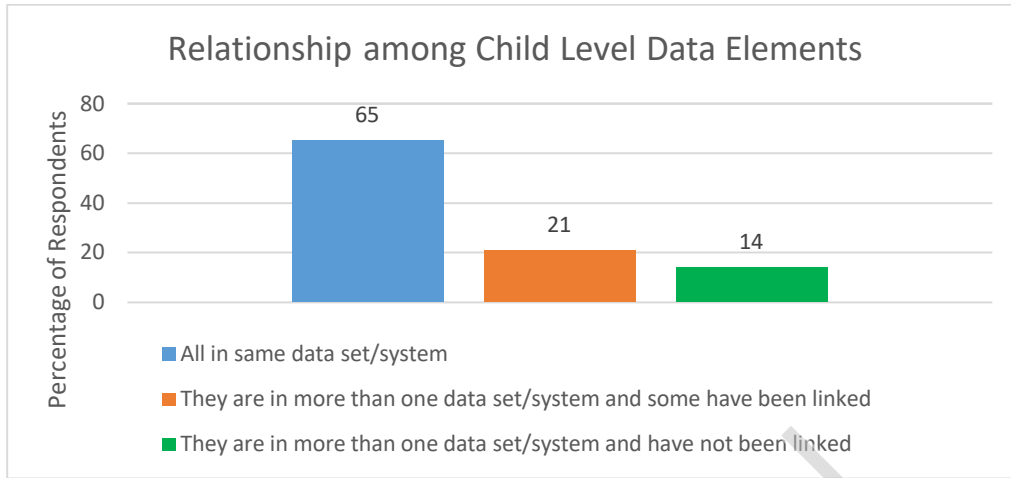
collected, was there a plan to collect in the future. Because of the large number of data components, the information is distributed over several charts for ease of readability.



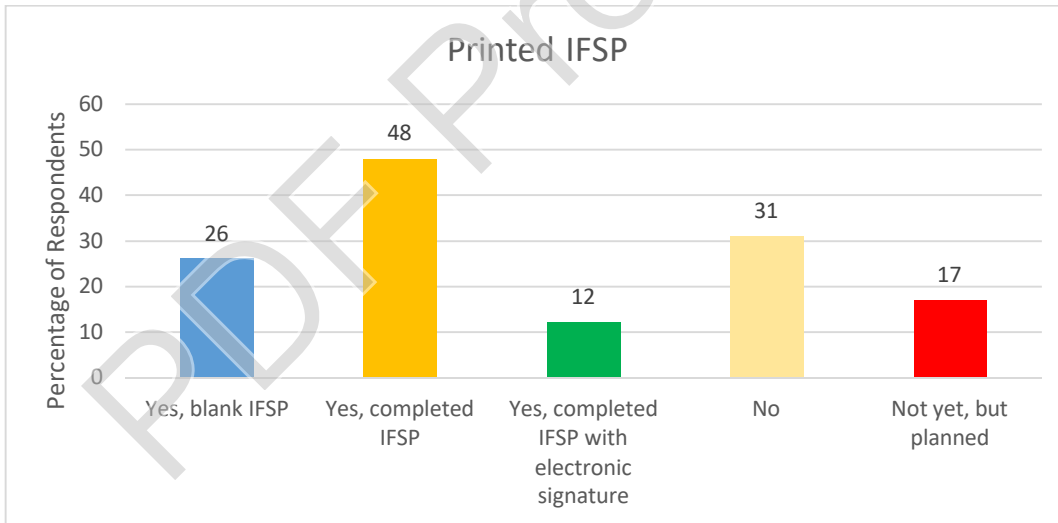


24. Which of the following statements best describes the relationship among the child level data elements that your state lead agency collects for children receiving Part C early intervention?

Forty-three states responded to this survey. Twenty-eight states responded that the child data elements are all in the same data set/system. Nine states indicated they are in more than one data system and some of them have been linked on one or more occasions. Eight states stated that the data are in more than one data set/system and have not been linked.



25. Can the local program print the IFSP from the state data system? Check all that apply. *Forty-two states responded to this question. Twenty states indicated they can print the completed IFSP from the data system and five states can print with electronic signatures. Eleven states can print the blank IFSP form. Thirteen states responded no and an additional seven states responded not yet but planned.*



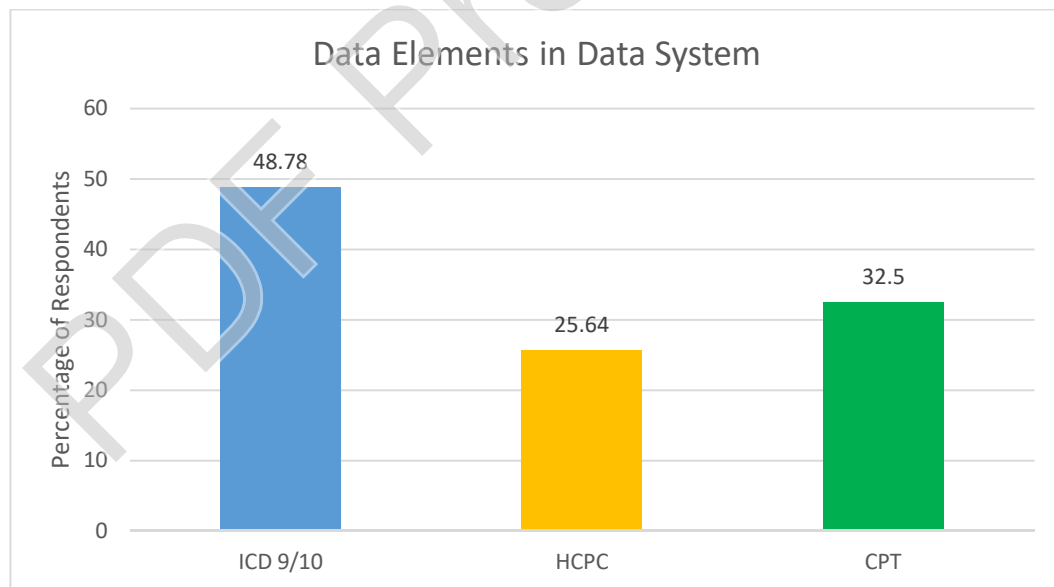
Additional comments include:

- *Completed IFSP with electronic signature designed, waiting for security approval and testing;*
- *We are the local program;*

- *System does not generate the IFSP. IFSP is attached to client's record as PDF document;*
- *Parts are electronic and parts are hand-written;*
- *Our web-based system is just now being rolled out. There is an option for IFSP teams to upload the IFSP to the Child Library where it would be visible to all team members;*
- *Demographic and service data are downloaded into the IFSP which can then be completed with child outcomes, erap, etc. and uploaded;*
- *We are transitioning to a new system this year; and*
- *Yes-partially completed IFSP (child and family demographics, program name, service coordinator).*

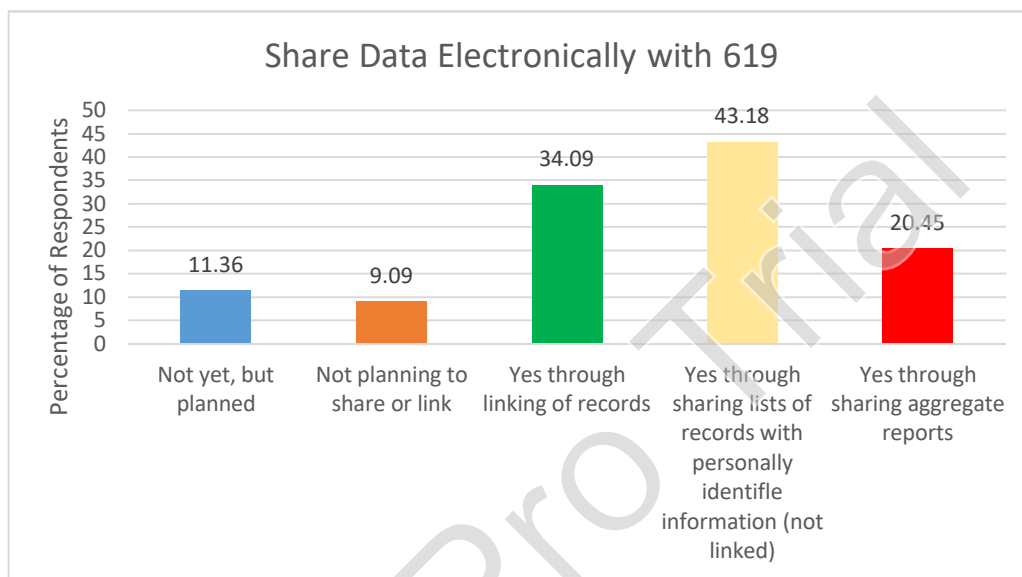
26. Does your data system include the following data elements?

Forty-two states responded to this question. Twenty states include ICD9/10 codes. Ten states include HCPC codes and thirteen states include CPT codes.



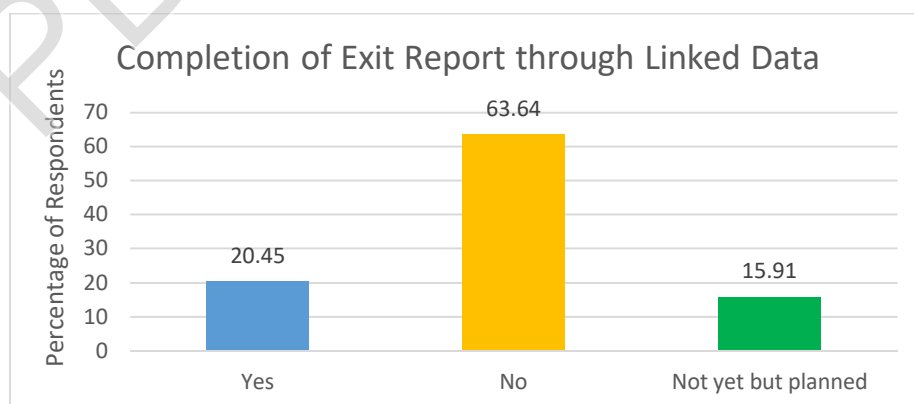
27. Do you use your data system to share any data electronically with the 619 program regardless of method? Check all that apply.

Forty-four states responded to this question. Nineteen states indicated they use their data system through sharing lists of records with personally identifiable information (not linked). Fifteen states indicated they share data electronically through linking of records. Nine states share aggregate reports electronically. Four states are not planning to link or share. Five states indicated they do not share yet but are planning to in the future.



28. Can you link electronically Part C and 619 Preschool Special Education data to complete Exiting Report (Old Table 3)?

Forty-four states responded to this question. Nine states responded yes. Twenty-eight states responded no and seven states responded not yet but planned.

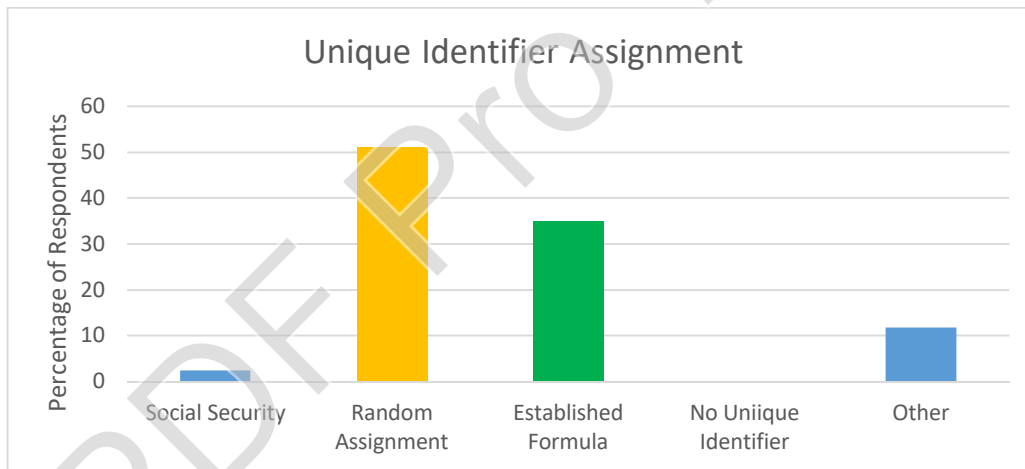


Data Security: How is data protected and shared?

29. If your state has a unique identifier for infants and toddlers with disabilities, what is the basis for the identifier?

Forty-three states responded to this question. Twenty-two states indicated that they used random assignment. Fifteen states had an established formula. One state uses the child's social security number. Five states chose other and their responses follow:

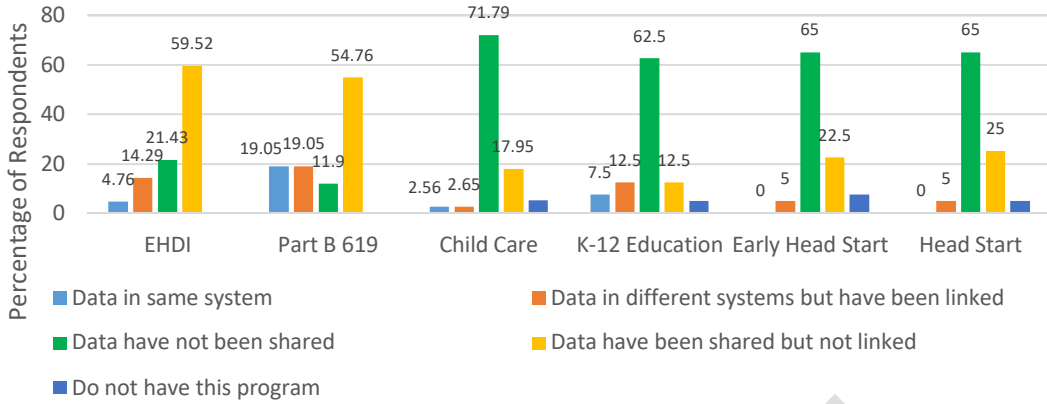
- *Sequential system-generated unique identifier, we also collect SSN but it is not required;*
- *Medicaid Number;*
- *SSID Secure Student Identifier;*
- *State assigned but links to SSA influenced data that has already assigned identifier for Medicaid eligible infants and toddlers; and*
- *Linking for follow-up data analysis.*



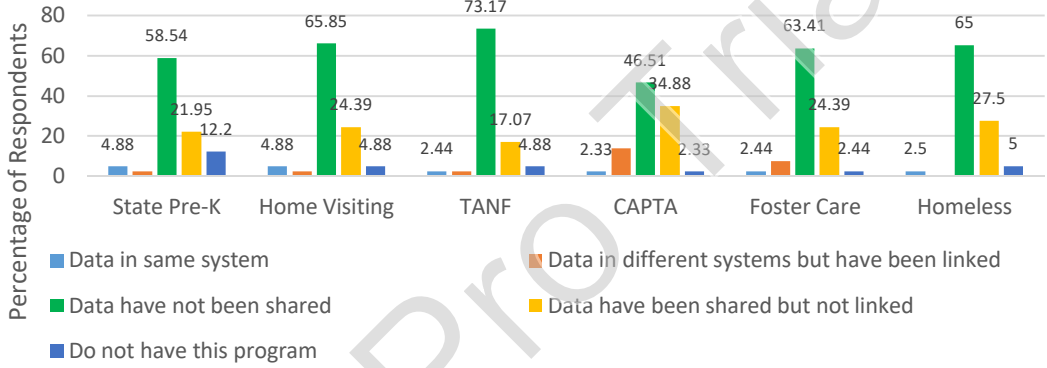
30. Please select the best description of how child-level data for Part C links to child-level data from other programs. Select one response for each row.

Forty-three states responded to this question. The majority of states responded that the data have not been linked across all programs. The second most frequent response was data have been shared but not linked. The following charts reflect the individual state responses.

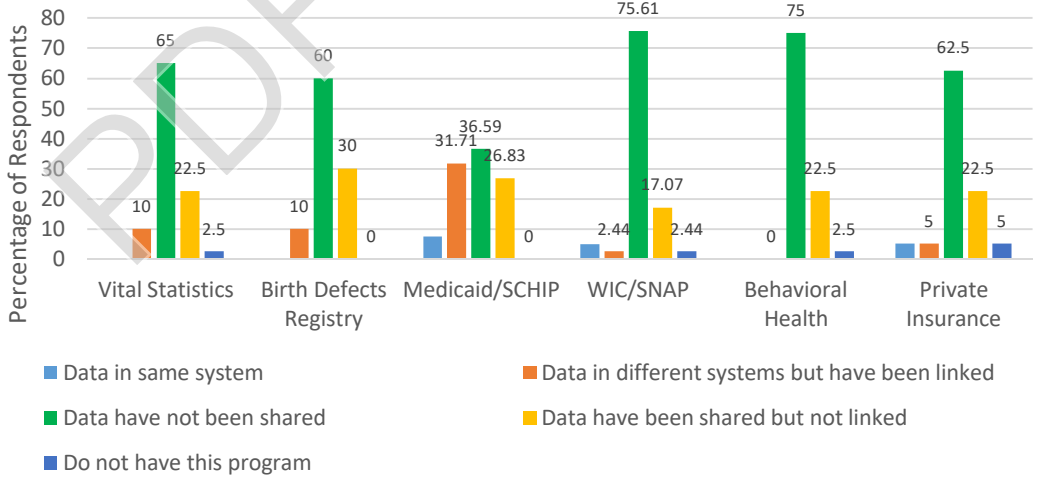
Child Level Data Linkage Across Programs - Chart 1



Child Level Data Linkage Across Programs - Chart 2



Child Level Data Linkage Across Programs - Chart 3



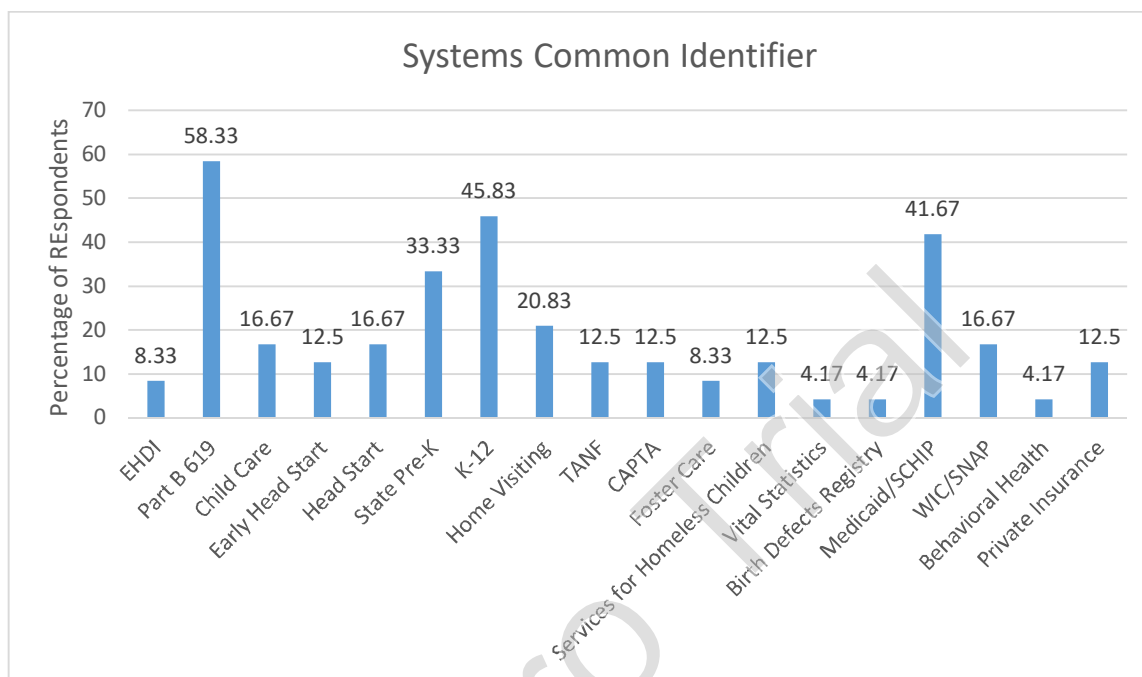
31. If your state links the child-level Part C data to other statewide data systems (e.g., other early learning data systems, K-12 data systems, workforce data systems), what security challenges did you face in linking these data systems?

Sixteen states provided the following comments:

- *CAPTA is our only link;*
- *Agreements between Departments of Education and Medicaid were created to address issues but I am unaware of exactly what issues were faced in the beginning. We have been doing this for over 5 years;*
- *DPHHS is reluctant to link with other systems due to the security of our systems at DPHHS. A serious breach was found in July 2014 uncovering a breach that had existed for two years prior. The chances of linking with others are very slim at this point in time;*
- *Only certain staff have access to Medicaid agreement;*
- *Parent consent;*
- *We have a statutory agreement with our Medicaid agency;*
- *FERPA HIPPA laws;*
- *Obtaining consent, data sharing agreements, IGAs*
- *Non-automated transmission work around;*
- *Obtaining agreements, having linking identifiers that are consistently available for each child;*
- *Too numerous to mention;*
- *Link with Medicaid but have separate sign-ons;*
- *No challenges because statutory authority allows for sharing of data;*
- *Data sharing agreement in place, no security challenges;*
- *Financial, very costly to link systems within own agency, not only the building of the link but the cost to create reports from; and*
- *Needed the MOU to be clear about data sharing and then just needed an SFTP site.*

32. With which of the following systems do you have a common identifier for children receiving Part C services? Check all that apply.

Twenty-four states responded to this question. The three systems most commonly identified by states were Part B Preschool (14), K-12 (11) and Medicaid (10).

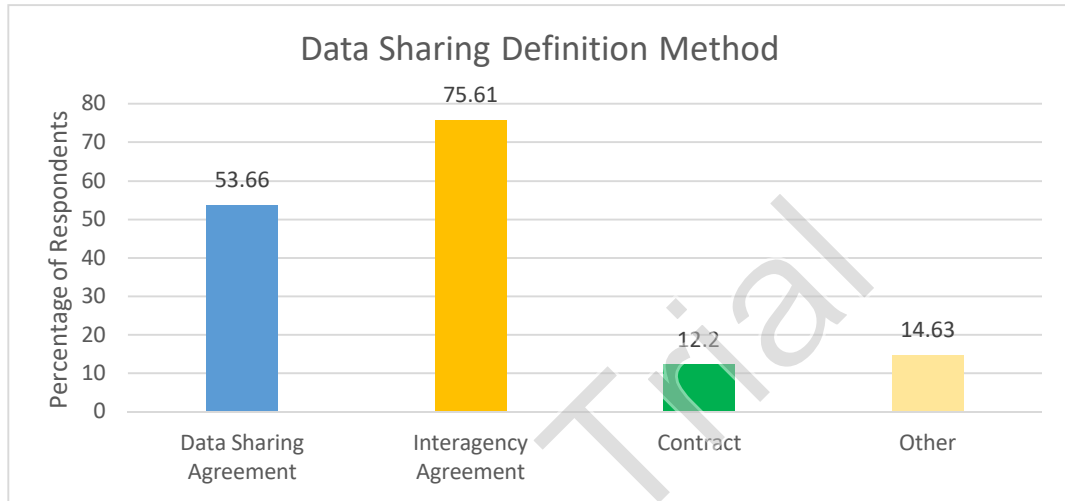


33. What method does your state utilize to define data sharing between/among different agencies serving infants and toddlers receiving services under Part C? Check all that apply.

Forty-one states responded to this question. Thirty-one states have interagency agreements. Twenty-two states have sharing agreements. Five states utilize contracts and six states indicated other. Their responses follow:

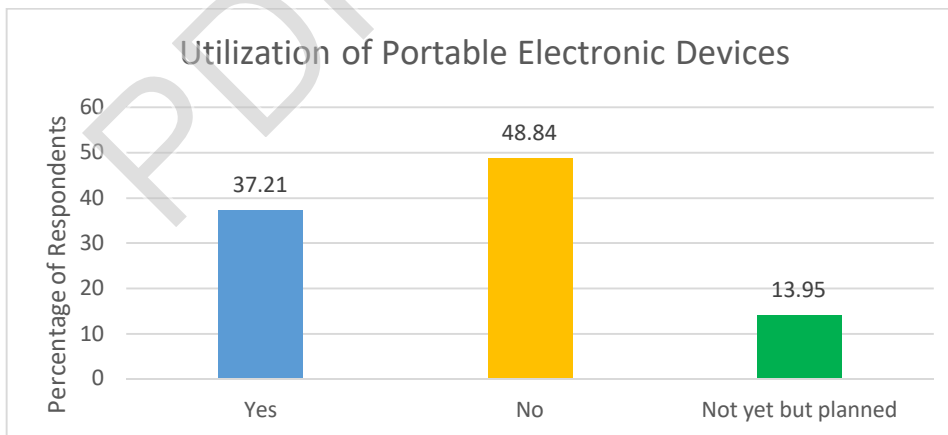
- *I do not know which of the above is the appropriate choice. We have written agreements with Medicaid. Department of Education is lead agency for Part C and has an intra-agency agreement to share data between Part C and Part B as of 2011 when new Part C regs came out.*
- *I don't know;*

- *The ECAC is hiring a person to assist EC programs in development of governance and data sharing agreements over next 1-2 years;*
- *State legislation;*
- *State statutes; and*
- *Dependent upon agency other forms, or legislative/Governor approval.*



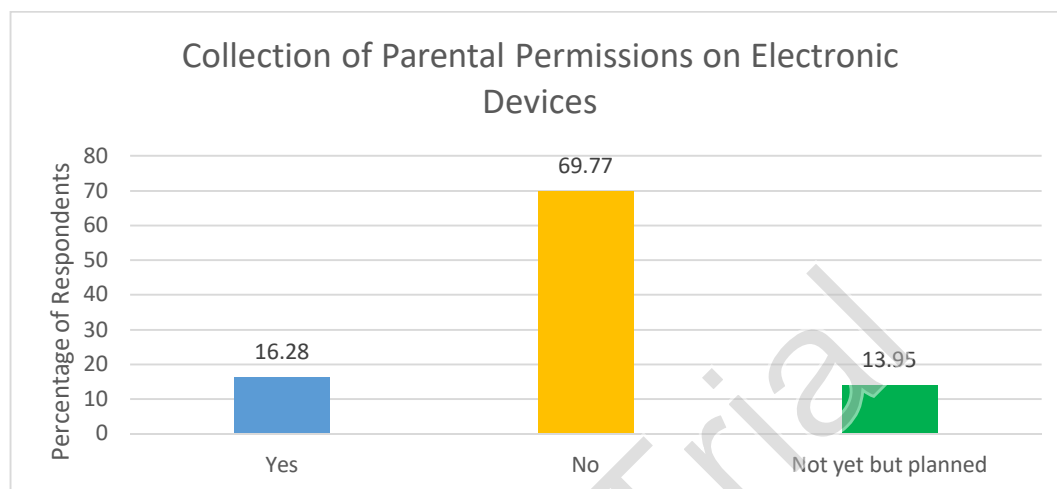
34. Do you utilize portable electronic devices (e.g., mobile phones, iPads etc.) for transmitting data (e.g., evaluation and assessment, IFSP) from the field to a central data system?

Forty-three states responded to this question. Sixteen states responded that they use portable electronic devices. Twenty-one states do not use the devices and six states indicated they do not currently use them but plan to in the future.



35. Do you use electronic devices to collect parental permissions during procedural safeguard moments or to collect service delivery confirmations?

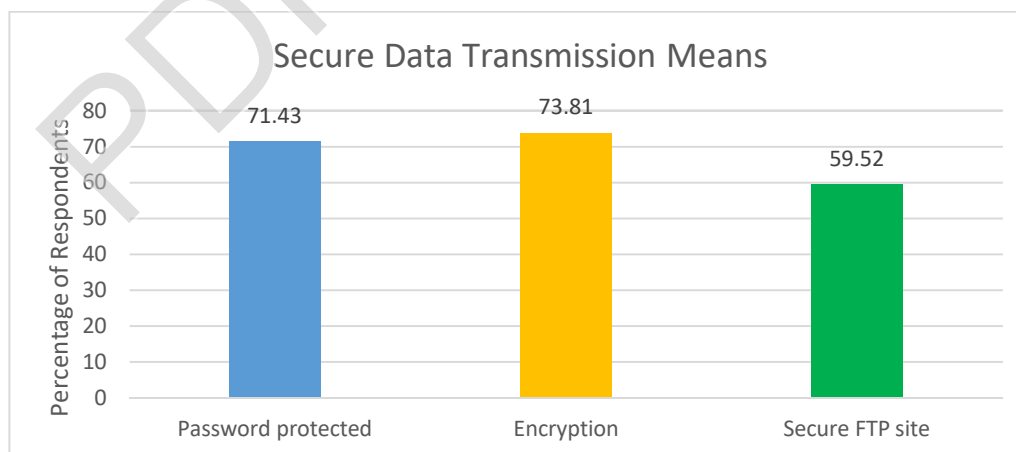
Forty-three states responded to this question. The majority of states (30) responded negatively to using electronic devices to collect parental permissions.



36. Which secure means of transmitting data to and from the local program, region or provider to the state centralized data system do you use? Check all that apply.

Forty-two states responded to this question. Thirty-one states use encryption, thirty states use password protection and twenty-five states use a secure FTP site. Two states added two additional means:

- *Barracuda Security; and*
- *State secure mail system.*

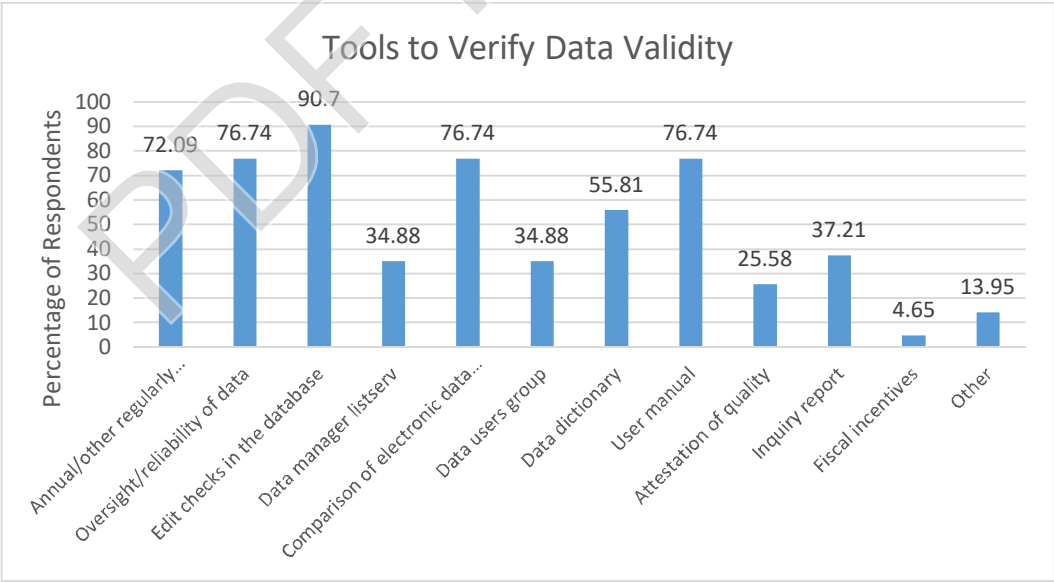


Data Validation: How the system ensures valid and reliable data

37. What tools and procedures are in place to verify the validity of data that the state receives from local programs? Check all that apply.

Forty-three states responded to this question. Thirty-nine states use edit checks in the database. Thirty-three states use oversight/reliability of the data, comparison of electronic data to original paper documentation and a user manual. Thirty-one states conduct regular training and twenty-four states have a data dictionary. Six states identified other tools:

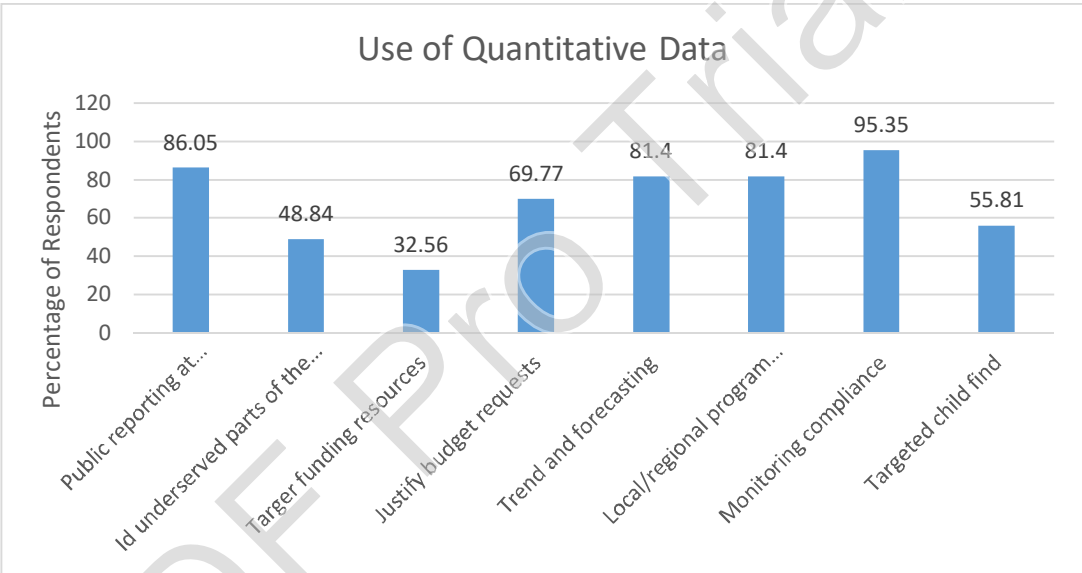
- *Error reports in Crystal Reports;*
- *Self-assessment monitoring;*
- *Verification reports;*
- *Monthly error reports and compliancy reports;*
- *Data survey reports are a regular part of the annual performance report process. Online training nodules are posted on our website for the training of new database users; and*
- *Monthly public reports of key referral, eligibility, IFSP and services data verified by local staff includes program costs, cost per child and cumulative child count.*



Data Analyses: How data are used and analyzed

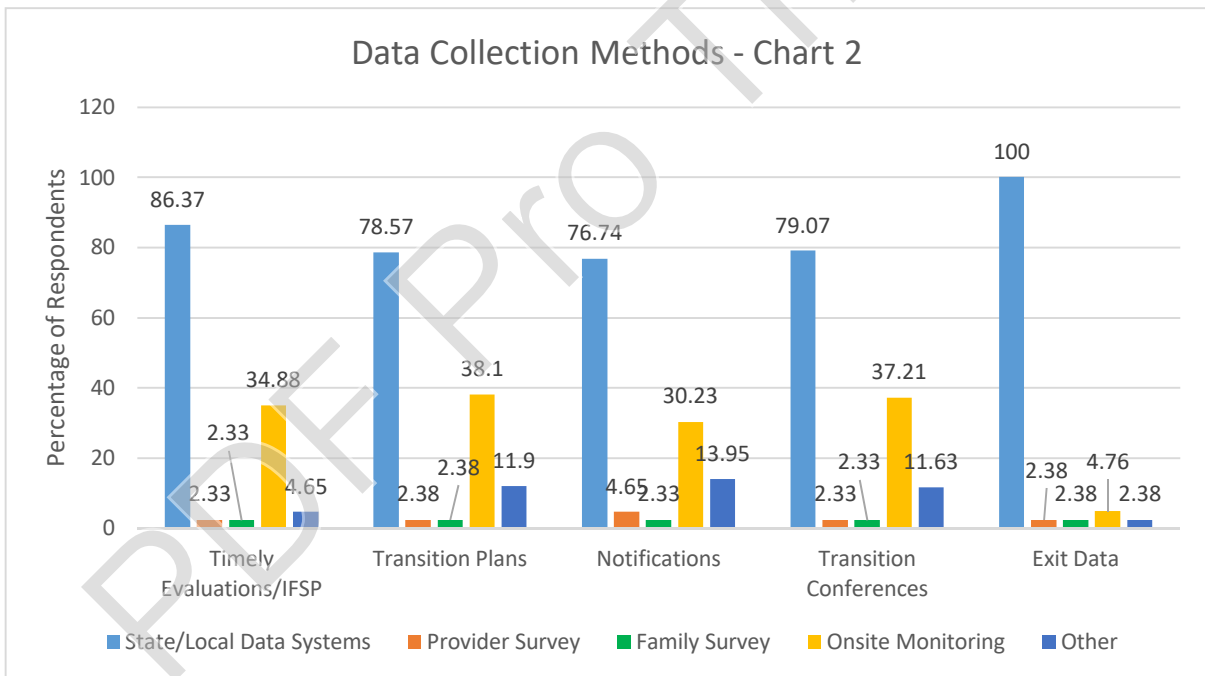
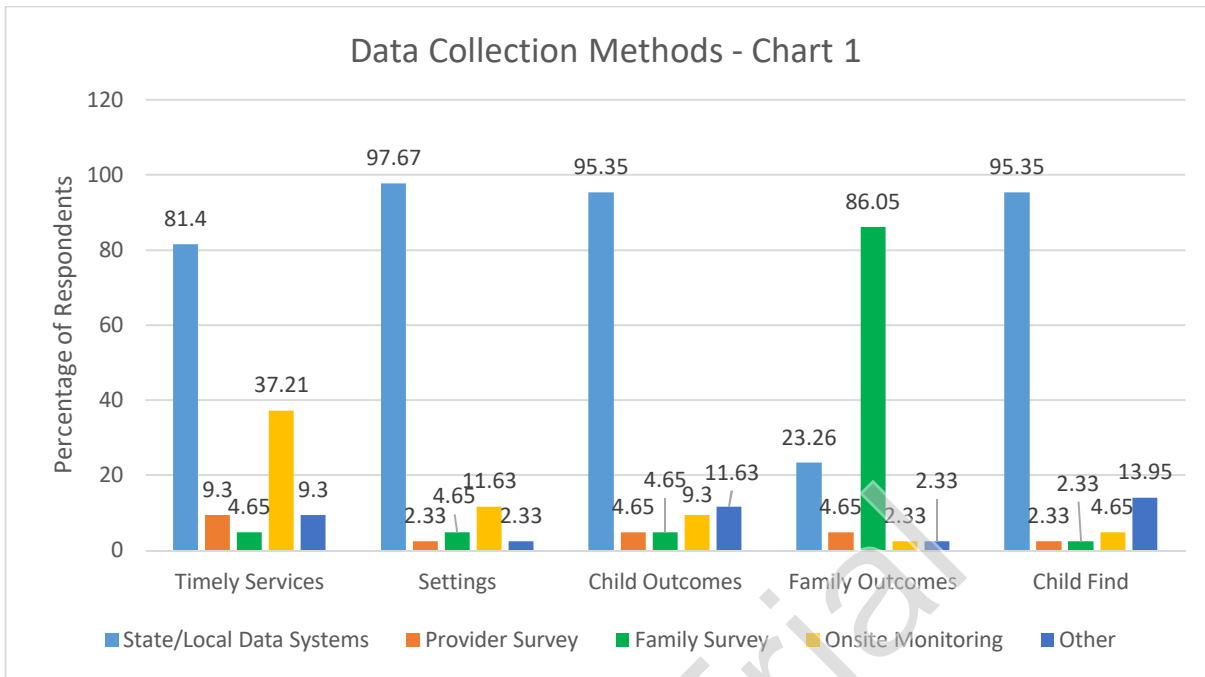
38. How is your state using quantitative data about infants and toddlers with disabilities beyond APR reporting? Check all that apply.

Forty-three states responded to this question. Forty-one states responded that they used the data for monitoring compliance. Thirty-seven states use the data for public reporting at the state/local level. Thirty-five states use data for trend and forecasting along with local/regional program improvement. Thirty states use the data to justify budget requests. Two states checked other and indicated they are using the data to make decisions on contract requests and to make recommendations for targeted funding and targeted child find.



39. Which of the following methods are you using to collect data for the APR indicators or 618 data tables? Check all that apply.

Forty-three states responded to this question. The most frequently cited method for collecting data was the state/local data system followed by onsite monitoring. The following two charts document the states responses for the indicator items and the 618 data submission.



If respondents checked “other”, they were asked to specify the method. The following are the responses:

- *Annual review of Indicators 5 and 6 with each provider agency; discussion of status and comparison with other provider regions throughout the state;*
- *We use an electronic assessment tool (AEPSI) for child outcomes data;*

- *Excel spreadsheet format for data cleaning and collecting delay reasons for APR indicators where applicable;*
- *Local EI programs run quarterly LEA reports and submit copies to LEAs and lead agency;*
- *Use of file samples to complete file review;*
- *Indicator 5 collected from program reporting;*
- *Reports via DOE liaisons;*
- *Need outside census data and CO calculator;*
- *Data desk audit/Submission of paper documentation;*
- *Indicator 1 – desk audits to confirm, use provider survey as reminder about importance of timely service, Indicator 3 – did have separate data base, data is now included in web based system;*
- *Special sheet, second review;*
- *Desk audit of school districts who are providers for those children identified as in need of prolonged assistance. Child outcome data is collected from state's edition of the BDI database;*
- *Web portal for assessment item data and analysis;*
- *Table 3 – work with Part B coordinator; and*
- *Chart/file review.*

40. Do you provide other reports or data to stakeholders beyond the 618 data tables and the required state APR indicators?

Forty-three states responded to this question. Thirty-six states responded affirmatively and provided the following specifics:

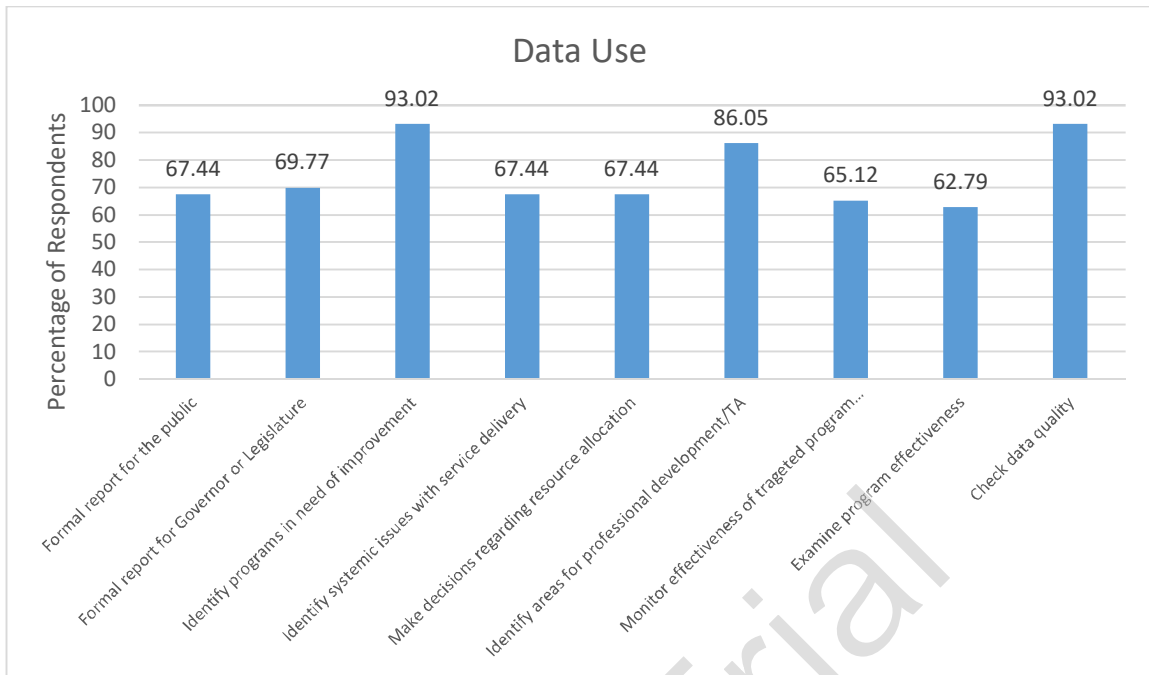
- *City Council questions;*
- *SSIP data analysis;*
- *Quarterly data reports on a variety of issues are delivered to the SICC;*
- *We share program data several times a year with our SICC;*
- *Specific outcomes monitoring reports such as entry/exit data to denote trends;*
- *Worklists, error reports, enrollment summaries;*

- *We provide saturation reports (% of children served) to local stakeholders. We also provide information on hearing and vision referrals;*
- *Ad-hoc reports as requested or for discussion and planning purposes;*
- *Service related summaries for fiscal planning;*
- *Reports as requested;*
- *Annual legislative reports on a number of other components - # of employed EI providers, # of contracted providers, associated costs, etc.;*
- *Data reports for SICC;*
- *Service level data, referral source data and timelines;*
- *Quarterly reports to Governor's office, quarterly reports to Council, monthly statistics for posting;*
- *Annual summation reports and program profiles;*
- *Use of details beyond 618 data tables requirements help with programming improvements;*
- *Additional data reports;*
- *Providers have a list or reports they can use to interact with local stakeholders for collaboration and potential funding opportunities. The state has the same opportunity and responds to agency requests for information;*
- *We have family outcome data beyond what is required for APR. We also share additional data analysis for systems improvement work;*
- *On demand reporting at times per request for legislators, SICC or other stakeholders;*
- *For the SSIP report we have been pulling and analyzing lots of data with our stakeholders – demographics, trends across years, fiscal data;*
- *Regular financial reporting and budget projections;*
- *Referral sources and evaluation results information, additional information as requested;*
- *Various reports and publications are posted regularly to our website;*
- *Too numerous to list. Those included are those associated with SSIP work, data analysis, many reports related to data analysis, infrastructure etc.;*

- *Focused monitoring rankings, fiscal reports, ad hoc issues (eligibility rates, the percentage of children with autism in urban settings, how many children have IEPs in K, see annual data report on birth23.org);*
- *Monthly average delivered hours;*
- *Number of children receiving core EI services (e.g., OT,PT,SpIns, SLP,IBS) and cost of thos services; Vacancy reports and referral information;*
- *Aggregate child count, location of services, number of referrals vs. children enrolled;*
- *Finance data (costs, third party billing, revenue sources), eligibility reasons and trends, services (type and costs);*
- *We often look at the diagnoses that are predominant in our system and use that to base staffing off of; and*
- *SSIP data, fiscal data.*

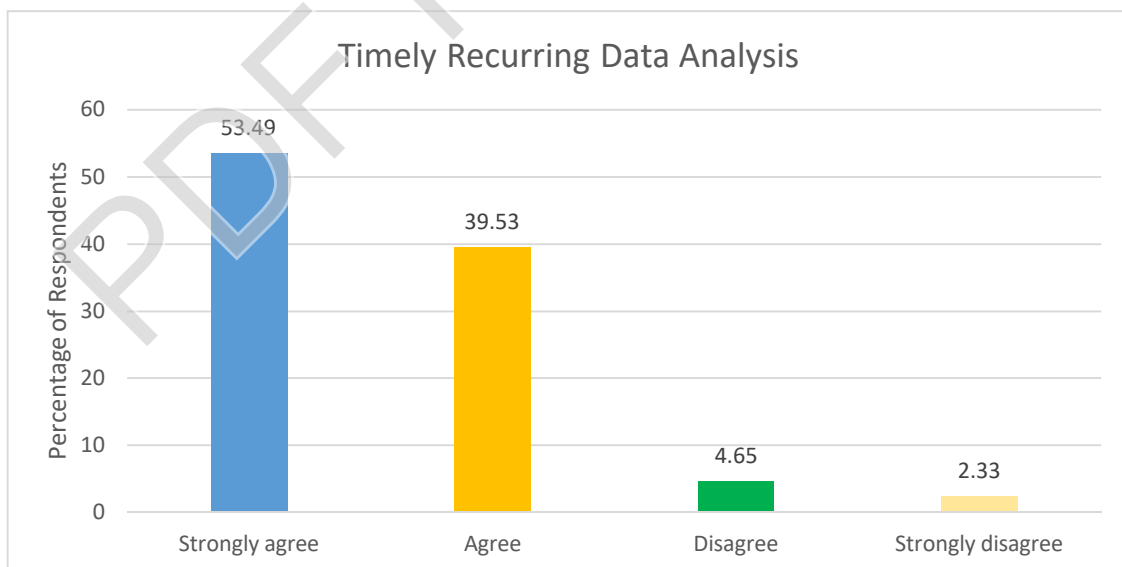
41. In the last two years, has your state lead agency used data from your state system(s) for children receiving Part C services in any of the following ways? Check all that apply.

Forty-three states responded to this question. Forty states identified identification of programs in need of improvement and check/review data quality. Thirty-seven states use data to identify areas for professional development and/or technical assistance. Twenty-nine states use data to create a formal report to the public, idengtify systemic issues with service delivery, and make decisions about resource allocation.



42. I can get my Part C state data analyzed in a timely manner for recurring data needs (e.g., APR, annual report to governor or legislator).

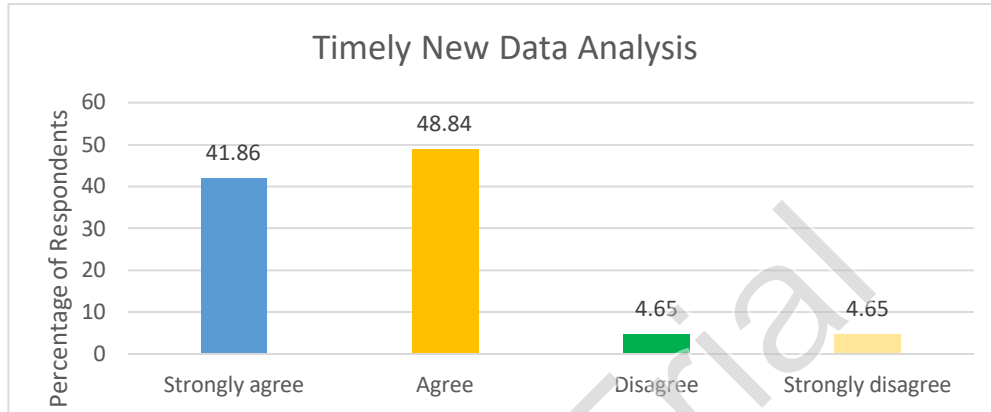
Forty-three states responded to this question. Twenty-three states strongly agreed with the statement. Seventeen states agreed with the statement Two states disagreed and one state strongly disagreed,



43. I can get my Part C state data analyzed in a timely manner when I have a new request (i.e., non-recurring such as an ad hoc request from the legislature or media).

Forty-three states responded to this question. Eighteen states cited strongly agree.

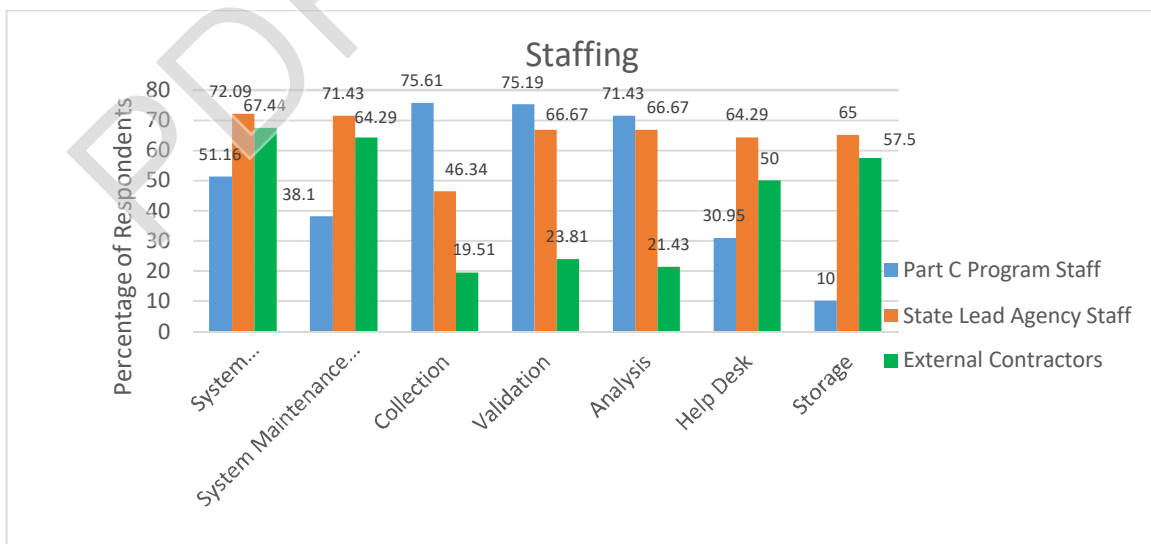
Twenty-one states agreed with the statement. Two states disagreed and two states strongly disagreed.



Staffing

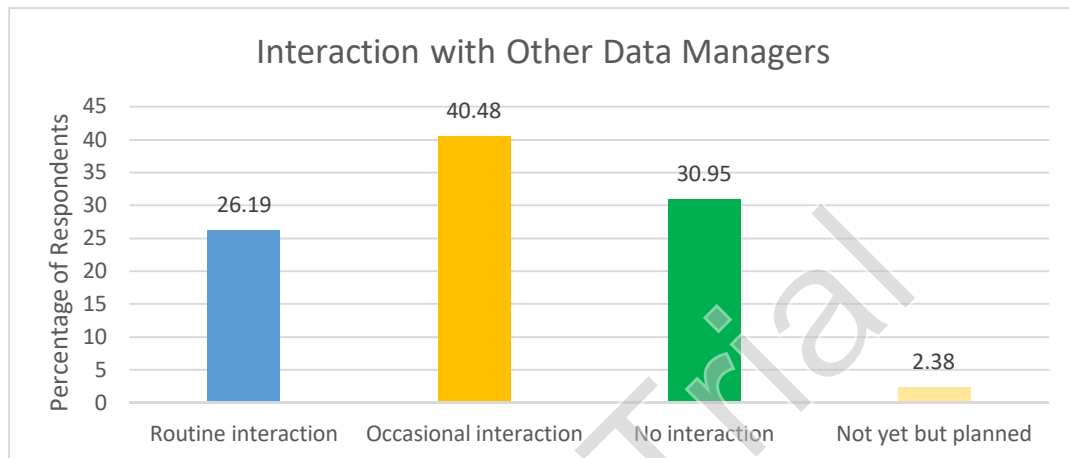
44. What kind of staff perform the following functions for your Part C data system? Check all that apply.

Forty-three states responded to this question. The staff performing the functions identified vary significantly depending on the task. Several states indicated that there was a state agency for information technology.



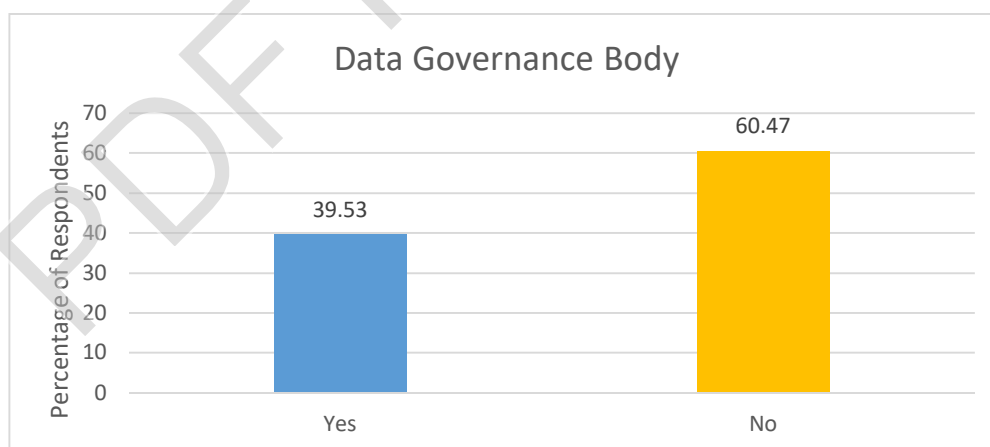
45. Does your Part C data manager interact with data managers for other early childhood programs (e.g., child care, Head Start, etc.)?

Forty-two states responded to this question. Seventeen states responded that there is occasional interaction. Eleven states indicated there was routine interaction and thirteen states indicated there was no interaction.



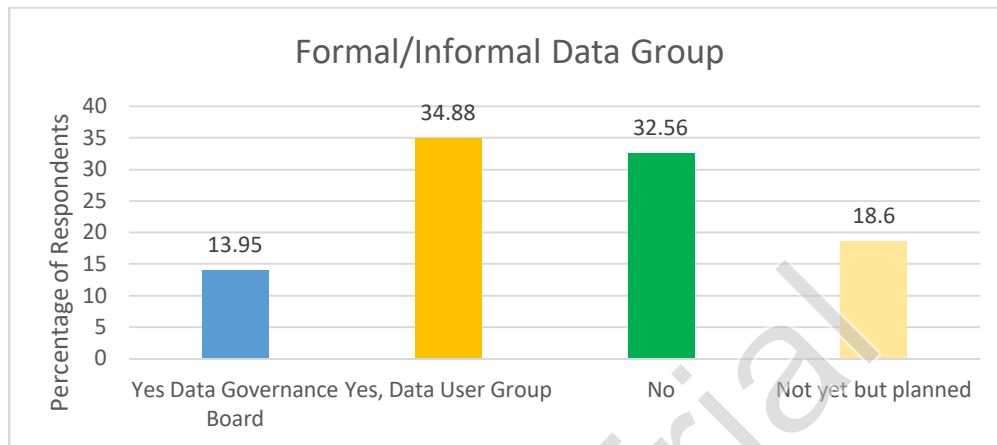
46. Does your state have a data governance body whose scope of responsibility includes data on children and families receiving Part C services? (This governance body's scope of responsibility can be broader than Part C data.)

Forty-three states responded to this question. Seventeen states answered yes and twenty-six answered no.



47. Does your state have a formal or informal group with representatives responsible for defining, validating, analyzing, and using data for early childhood programs?

Forty-three states responded to this question. Sixteen states indicated they had a data user group. Six states had a data governance board.



48. If you answered yes, does your Part C data manager participate?

Twenty-two states responded to this questions. Fifteen states indicated that their data manager participates. There were three comments:

- *Part C is not included; Data Governance is for early childhood education program;*
- *When we get someone hired for vacancy, currently the Part C Coordinator and CQI Coordinator participate; and*
- *When requested.*

Data Enhancements

49. Are you planning on developing a new data system in the next two years?

Forty-three states responded to this question. Thirteen states indicated they were planning on developing a new data system

50. Do you plan to make major enhancements to your data system in the next two years?

Forty-three states responded to this question. Twenty-three states indicated that they were planning on making major enhancements to their data system in the next two years. Comments included the following:

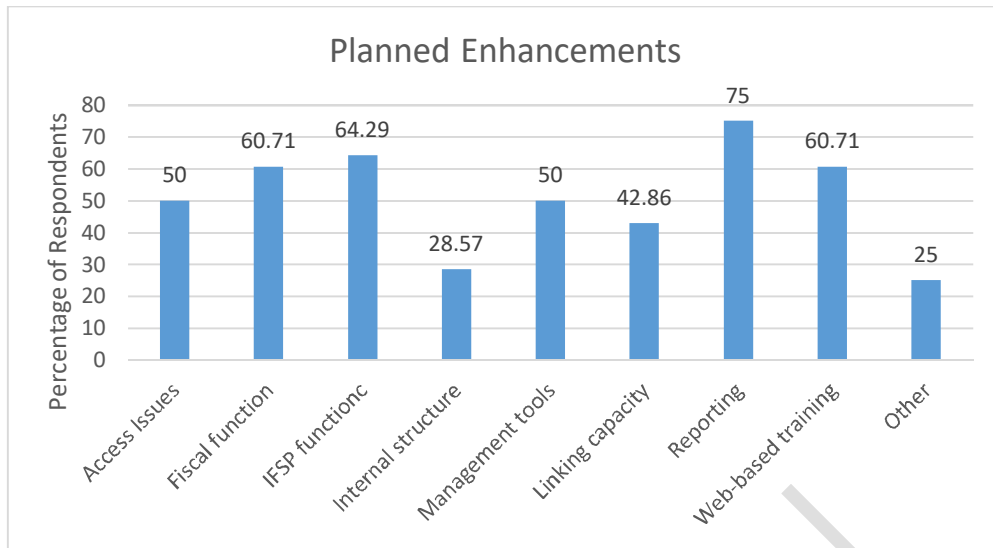
- *Part C is moving to a different division with differing data requirements;*

- *Changing contractors (from local to out-of-state group) and re-building new IDEA data system that is part of the general education Multi-System of Support data program (called Iowa TIERS);*
- *Currently working with vendor (Yahasoft, Inc) to develop Part C and 619 data system to go live July 1.*
- *We have made enhancements on transition and reporting with more planned for IFSP development and edits for Child Outcomes, Entry and Exit into system;*
- *Currently in the RFR process for a web-based system;*
- *Web-based system with additional components to collect IFSP information, increase user access, increase local access to data;*
- *We are just rolling out an updated data system;*
- *Doing a system upgrade to web-based system from desktop system;*
- *ECIDS in collaboration with state Ed agency and home visiting agency;*
- *Want real time data, online medical record; and*
- *We will be making modifications to our collection methods as well as the IFSP form and how our providers interact with it. We will also be updating our billing methodology and the interaction with MMIS.*

51. If you are planning to make major enhancements, please specify what enhancements you plan to make. Check all that apply.

Twenty-eight states responded to this question. Twenty-one states are enhancing their capacity for reporting. Eighteen states are developing or redesigning IFSP functions and enhancing web-based training on the data system. Responses to “other include:

- *We are still adjusting to the state student information system;*
- *Edits for data validity;*
- *We hope to be able to link with Part B during the next 12 months;*
- *These activities have all been completed;*
- *Coaching logs, notes for providers;*
- *Web-based system; and*
- *Reconfiguring database incorporating “single child record” structure.*



PDF Pro Trial

Survey Responses by Lead Agency and Eligibility

	Eligibility Category A	Eligibility Category B	Eligibility Category C	Missing	Total
Lead Agency: Health	6	10	6	0	22
Lead Agency: Education	3	4	4	0	11
Lead Agency: Other	5	4	4	1	14
Total	14	18	14	1	47

Infrastructure

Q.1. Does your state Part C program have at least one electronic data system that contains personally identifiable child level data for all or nearly all individual children and families who are referred?

	Referred	Found Eligible	Receive services
Overall (47)	91%	98%	100%
Health (22)	95%	100%	100%
Education (11)	73%	91%	100%
Other (14)	100%	100%	100%
Category A (14)	92%	93%	100%
Category B (18)	83%	100%	100%
Category C (14)	100%	100%	100%

Q.2. Is the centralized data system web-based or a desktop application?

	Web-based	Desktop	Other
Overall (46)	83%	9%	9%
Health (22)	76%	14%	10%
Education (11)	91%	9%	0%
Other (14)	86%	0%	14%
Category A (14)	86%	14%	0%
Category B (18)	78%	11%	11%
Category C (14)	85%	0%	15%

Q. 3. If you have a centralized statewide data system, who developed and who maintains the system?

Developed System	State Lead Agency	State IT Services	Private Contractors
Overall (46)	24%	10%	28%
Health (22)	33%	25%	38%
Education (11)	17%	0%	14%
Other (14)	14%	0%	17%
Category A (14)	20%	0%	22%
Category B (18)	25%	11%	45%
Category C (14)	29%	20%	13%

Maintained System	State Lead Agency	State IT Services	Private Contractors
Overall (46)	16%	30%	3%
Health (22)	25%	25%	0%
Education (11)	17%	0%	14%
Other (14)	0%	50%	0%
Category A (14)	0%	17%	0%
Category B (18)	25%	33%	0%
Category C (14)	14%	40%	13%

Both Developed and Maintained System	State Lead Agency	State IT Services	Private Contractors
Overall (46)	60%	60%	69%
Health (22)	42%	50%	63%
Education (11)	67%	100%	71%
Other (13)	86%	50%	83%
Category A (14)	80%	83%	78%
Category B (18)	50%	56%	55%
Category C (14)	57%	40%	75%

Q 4. How frequently do you have access to updated local data at the state level?

	Real Time	Daily	Weekly	Monthly	Quarterly	Annually
Overall (46)	72%	17%	0%	7%	2%	2%

Health (22)	76%	14%	0%	10%	0%	0%
Education (11)	55%	18%	0%	9%	9%	9%
Other (14)	79%	21%	0%	0%	0%	0%
Category A (14)	71%	7%	0%	14%	7%	0%
Category B (18)	78%	17%	0%	0%	0%	6%
Category C (14)	69%	23%	0%	8%	0%	0%

Q 5. How does child-level data and other program data get entered into your data system?

Batch Upload	Child Data	Other Program Data
Overall (45)	55%	45%
Health (22)	60%	40%
Education (11)	50%	50%
Other (14)	50%	50%
Category A (14)	75%	25%
Category B (18)	20%	80%
Category C (14)	100%	0%

Data Directly Entered	Child Data	Other Program Data
Overall (45)	72%	28%
Health (22)	67%	33%
Education (11)	89%	11%
Other (14)	69%	31%
Category A (14)	69%	31%
Category B (18)	75%	25%
Category C (14)	69%	31%

Q 6. How are data reported by local programs to the state lead agency? (N=46)

	Internal Network System	Spreadsheet	Web-based System	Batch Upload	Other
Overall (45)	11%	11%	87%	26%	11%
Health (22)	19%	14%	81%	29%	14%

	Internal Network System	Spreadsheet	Web-based System	Batch Upload	Other
Education (11)	9%	0%	91%	18%	9%
Other (14)	0%	14%	93%	29%	7%
Category A (14)	0%	7%	86%	21%	21%
Category B (18)	17%	17%	83%	33%	6%
Category C (14)	15%	8%	92%	23%	8%

Q 7. What is the approval process that prioritizes changes in your data system?

	Formal Change Order	User Group	Informal Request	Contract Amendment	Project Schedule List	Other
Overall (46)	63%	37%	39%	15%	54%	20%
Health (22)	57%	43%	48%	24%	43%	14%
Education (11)	82%	27%	36%	9%	55%	27%
Other (14)	57%	36%	29%	7%	71%	21%
Category A (14)	64%	21%	36%	7%	36%	14%
Category B (18)	50%	50%	50%	11%	56%	33%
Category C (14)	77%	31%	31%	23%	69%	8%

Q 8. Do you have a standing line item in your budget for data system maintenance (small fixes)?

	Yes	No
Overall (45)	70%	30%
Health (22)	64%	36%
Education (11)	73%	27%
Other (14)	79%	21%
Category A (14)	72%	29%
Category B (18)	67%	33%
Category C (14)	71%	29%

Q 9. Do you have a standing line item in your budget for data system enhancements (new functionality)?

	Yes	No
Overall (46)	62%	38%
Health (22)	59%	41%
Education (11)	55%	45%
Other (14)	71%	29%
Category A (14)	71%	29%
Category B (18)	56%	44%
Category C (14)	57%	43%

Q 10. Does your state data system have a unique identifier for the child, workforce member and/or EIS program?

Child	Yes	No	Not Yet but planned
Overall (46)	98%	0%	2%
Health (22)	100%	0%	0%
Education (11)	91%	0%	9%
Other (14)	100%	0%	0%
Category A (14)	100%	0%	0%
Category B (18)	94%	0%	6%
Category C (14)	100%	0%	0%

Workforce Member	Yes	No	Not Yet but planned
Overall (46)	64%	31%	4%
Health (22)	67%	24%	10%
Education (11)	30%	70%	0%
Other (14)	86%	14%	0%
Category A (14)	62%	31%	8%
Category B (18)	72%	28%	0%
Category C (14)	54%	38%	8%

EIS Program	Yes	No	Not Yet but planned
Overall (46)	93%	7%	0%
Health (22)	90%	10%	0%
Education (11)	91%	9%	0%
Other (14)	100%	0%	0%
Category A (14)	93%	7%	0%
Category B (18)	94%	6%	0%
Category C (14)	92%	8%	0%

Q 11. Has your state ever linked any individual child data for children receiving Part C services to data on the personnel who work with those children?

	Yes	No
Overall (46)	49%	51%
Health (22)	59%	41%
Education (11)	18%	82%
Other (14)	57%	43%
Category A (14)	36%	64%
Category B (18)	50%	50%
Category C (14)	57%	43%

Q 12. Does your data system provide electronic notifications/reminders (e.g., transition date, IFSP update due etc.) to EIS personnel for Part C activities?

	Yes	No	Not Yet but planned
Overall (44)	70%	16%	14%
Health (22)	75%	15%	10%
Education (11)	64%	18%	18%
Other (14)	69%	15%	15%
Category A (14)	50%	36%	14%
Category B (18)	82%	12%	6%
Category C (14)	75%	0%	25%

Q 13. Are you using information (e.g., service frequency, duration, and provider authorized on the IFSP) in your state data system to issue payment or link to a system that does?

	Yes	No	Not Yet but planned
Overall (46)	50%	41%	9%
Health (22)	48%	38%	14%
Education (11)	18%	73%	9%
Other (14)	79%	21%	0%
Category A (14)	43%	57%	0%
Category B (18)	50%	39%	11%
Category C (14)	54%	31%	15%

Q 14. Is fiscal information contained in your data system used to bill the following fund sources?

Medicaid	Yes	No	Not Yet but planned
Overall (46)	43%	43%	13%
Health (22)	48%	48%	5%
Education (11)	36%	55%	9%
Other (14)	43%	29%	29%
Category A (14)	29%	64%	7%
Category B (18)	44%	50%	6%
Category C (14)	62%	15%	23%

SCHIP	Yes	No	Not Yet but planned
Overall (46)	25%	68%	7%
Health (22)	38%	57%	5%
Education (11)	0%	100%	0%
Other (14)	21%	64%	14%
Category A (14)	14%	86%	0%
Category B (18)	33%	67%	0%
Category C (14)	27%	55%	18%

Private Third Party Payors	Yes	No	Not Yet but planned
Overall (46)	27%	62%	11%
Health (22)	24%	67%	10%
Education (11)	30%	70%	0%
Other (14)	29%	50%	21%
Category A (14)	7%	86%	7%
Category B (18)	28%	67%	6%
Category C (14)	50%	33%	17%

Parent Cost Share	Yes	No	Not Yet but planned
Overall (46)	20%	73%	7%
Health (22)	29%	67%	5%
Education (11)	10%	80%	10%
Other (14)	14%	79%	7%
Category A (14)	0%	100%	0%
Category B (18)	17%	83%	0%
Category C (14)	50%	33%	17%

Q 15. Is there an electronic interface between your data system and the following fund sources?

Medicaid	Yes	No	Not Yet but planned
Overall (46)	28%	57%	15%
Health (22)	38%	52%	10%
Education (11)	9%	82%	9%
Other (14)	29%	43%	29%
Category A (14)	21%	64%	14%
Category B (18)	28%	61%	11%
Category C (14)	38%	46%	15%

SCHIP	Yes	No	Not Yet but planned
Overall (46)	22%	69%	9%
Health (22)	33%	57%	10%
Education (11)	0%	100%	0%

SCHIP	Yes	No	Not Yet but planned
Other (14)	21%	64%	14%
Category A (14)	14%	86%	0%
Category B (18)	22%	72%	6%
Category C (14)	33%	50%	17%

Private Third Party Payors	Yes	No	Not Yet but planned
Overall (46)	9%	83%	9%
Health (22)	14%	76%	10%
Education (11)	0%	91%	9%
Other (14)	7%	86%	7%
Category A (14)	7%	93%	0%
Category B (18)	6%	89%	6%
Category C (14)	15%	69%	15%

Parent Cost Share	Yes	No	Not Yet but planned
Overall (46)	13%	80%	7%
Health (22)	14%	81%	5%
Education (11)	9%	82%	9%
Other (14)	14%	79%	7%
Category A (14)	0%	100%	0%
Category B (18)	11%	89%	0%
Category C (14)	31%	54%	15%

Q 16. What type of reporting capability does your data system have?

	Capacity Built into Data System	Separate Application/Process	No Capacity
Overall (46)	65%	33%	2%
Health (22)	67%	29%	5%
Education (11)	64%	36%	0%
Other (14)	64%	36%	0%
Category A (14)	64%	29%	7%
Category B (18)	72%	28%	0%
Category C (14)	54%	46%	0%

Q 17. What type of reports does your data system or separate reporting application have?

	Canned Reports	Ad-hoc Reports	Both
Overall (46)	13%	4%	83%
Health (22)	29%	0%	71%
Education (11)	0%	9%	91%
Other (14)	0%	7%	93%
Category A (14)	14%	7%	79%
Category B (18)	17%	0%	83%
Category C (14)	8%	8%	85%

Q 18. What types of users can view or run reports?

State Lead Agency	View Any Reports	View Selected Reports	Run Any Query	Run Selected Reports	Cannot Run or View
Overall (46)	39%	0%	2%	2%	4%
Health (22)	38%	0%	0%	0%	5%
Education (11)	36%	0%	9%	0%	0%
Other (14)	43%	0%	0%	7%	7%
Category A (14)	50%	0%	0%	0%	0%
Category B (18)	50%	0%	0%	0%	6%
Category C (14)	15%	0%	8%	8%	8%

Local Lead Agency	View Any Reports	View Selected Reports	Run Any Query	Run Selected Reports	Cannot Run or View
Overall (46)	19%	22%	0%	11%	5%
Health (22)	31%	19%	0%	6%	0%
Education (11)	0%	33%	0%	33%	11%
Other (14)	17%	17%	0%	0%	8%
Category A (14)	20%	10%	0%	0%	0%
Category B (18)	25%	25%	0%	13%	6%
Category C (14)	10%	20%	0%	20%	10%

Provider Agency	View Any Reports	View Selected Reports	Run Any Query	Run Selected Reports	Cannot Run or View
Overall (46)	2%	18%	0%	13%	29%
Health (22)	5%	20%	0%	10%	20%
Education (11)	0%	27%	0%	9%	36%
Other (14)	0%	7%	0%	21%	36%
Category A (14)	7%	7%	0%	14%	21%
Category B (18)	0%	18%	0%	18%	35%
Category C (14)	0%	23%	0%	8%	31%

Individual Provider	View Any Reports	View Selected Reports	Run Any Query	Run Selected Reports	Cannot Run or View
Overall (46)	4%	11%	0%	18%	40%
Health (22)	5%	14%	0%	14%	33%
Education (11)	9%	9%	0%	18%	45%
Other (14)	0%	8%	0%	23%	46%
Category A (14)	14%	7%	0%	7%	36%
Category B (18)	0%	6%	0%	28%	44%
Category C (14)	0%	25%	0%	8%	42%

Data Collection

Q 19. Which staff at the local level enter data in the centralized statewide data system?

	Service Provider	Service Coordinator	Dedicated Data Entry Person	No Local Data Entry	No Centralized System
Overall (44)	73%	86%	89%	0%	0%
Health (22)	65%	75%	95%	0%	0%
Education (11)	82%	91%	82%	0%	0%
Other (14)	77%	100%	85%	0%	0%
Category A (14)	79%	79%	100%	0%	0%
Category B (18)	67%	94%	89%	0%	0%
Category C (14)	73%	82%	82%	0%	0%

Q 20. Does your state have at least one data system that contains data on individual members of the early intervention workforce?

	Yes	No
Overall (44)	72%	28%
Health (22)	73%	27%
Education (11)	73%	27%
Other (14)	71%	29%
Category A (14)	79%	21%
Category B (18)	72%	28%
Category C (14)	64%	36%

Q 21. What kind of data do you collect/maintain related to the early intervention workforce?

Data in EIS Data System	Age	Race/ Ethnicity	Licensure	Highest Ed Level	State CSPD Requirements	Employment Start Date
Overall (38)	33%	50%	63%	35%	58%	59%
Health (22)	43%	60%	73%	40%	75%	67%
Education (11)	25%	50%	43%	20%	25%	50%
Other (14)	25%	33%	60%	40%	57%	50%
Category A (14)	50%	100%	64%	60%	67%	75%
Category B (18)	29%	33%	45%	27%	57%	40%
Category C (14)	40%	100%	89%	33%	60%	86%

Data in EIS Data System	Employment Status	Wages/ Benefits	No Data	Data Collected at Local level
Overall (38)	55%	30%	67%	86%
Health (22)	64%	0%	100%	100%
Education (11)	40%	50%	50%	50%
Other (14)	50%	50%	50%	100%
Category A (14)	60%	100%	100%	100%
Category B (18)	33%	29%	75%	100%
Category C (14)	86%	0%	0%	50%

Data in Other State System	Age	Race/ Ethnicity	Licensure	Highest Ed Level	State CSPD Requirements	Employment Start Date
Overall (38)	67%	50%	38%	65%	42%	41%

Data in Other State System	Age	Race/Ethnicity	Licensure	Highest Ed Level	State CSPD Requirements	Employment Start Date
Health (22)	57%	40%	27%	60%	25%	33%
Education (11)	75%	50%	57%	80%	75%	50%
Other (14)	75%	67%	40%	60%	43%	50%
Category A (14)	50%	0%	36%	40%	33%	25%
Category B (18)	71%	67%	55%	73%	43%	60%
Category C (14)	60%	82%	11%	67%	40%	14%

Data in Other State System	Employment Status	Wages/Benefits	No Data	Data Collected at Local Level
Overall (38)	45%	70%	33%	14%
Health (22)	36%	100%	0%	0%
Education (11)	60%	50%	50%	50%
Other (14)	50%	50%	50%	0%
Category A (14)	40%	0%	0%	0%
Category B (18)	67%	71%	25%	0%
Category C (14)	14%	100%	100%	50%

Q 22. Do you collect/maintain/have access to quality rating or performance data (e.g., QRIS, certification) in your Part C state data system for individual EIS workforce members and local EI agencies?

	Individual Workforce Members			Local EI Agencies		
	Yes	No	Not Yet but Planned	Yes	No	Not Yet but Planned
Overall (43)	14%	76%	10%	19%	70%	12%
Health (19)	11%	78%	11%	16%	74%	11%
Education (11)	9%	73%	18%	18%	55%	27%
Other (13)	23%	77%	0%	23%	77%	0%
Category A (13)	17%	83%	0%	23%	77%	0%
Category B (18)	11%	78%	11%	17%	72%	11%
Category C (11)	9%	73%	18%	9%	64%	27%

Q 23. Does your EIS data system include the following components of a child's record?

Chart 1	Child Name	ID Number	Birth Date	Gender	Race/Ethnicity	Referral Date	Referral Source	Referral Concerns
Overall (44)	95%	100%	100%	100%	100%	93%	88%	74%

Chart 1	Child Name	ID Number	Birth Date	Gender	Race/Ethnicity	Referral Date	Referral Source	Referral Concerns
Health (20)	90%	100%	100%	100%	100%	90%	84%	83%
Education (11)	100%	100%	100%	100%	100%	91%	91%	64%
Other (13)	100%	100%	100%	100%	100%	100%	92%	69%
Category A (14)	100%	100%	100%	100%	100%	93%	93%	77%
Category B (18)	89%	100%	100%	100%	100%	89%	75%	59%
Category C (11)	100%	100%	100%	100%	100%	100%	100%	91%

Chart 2	Other Program Eligibilities	Parent Consent Date/Eval.	Eval. Date	Eval. Results	Primary Eligibility	Secondary Eligibility	Diagnostic Code (ICD9/10)	Assess. Date	Assess. results
Overall (44)	51%	60%	91%	84%	91%	62%	56%	79%	66
Health (202)	44%	63%	85%	80%	90%	72%	61%	70%	53
Education (11)	70%	64%	91%	82%	91%	44%	30%	80%	80
Other (13)	45%	54%	100%	92%	92%	58%	69%	92%	75
Category A (14)	56%	54%	86%	86%	93%	58%	54%	69%	67
Category B (18)	41%	61%	89%	72%	89%	63%	56%	82%	65
Category C (11)	60%	64%	100%	100%	91%	60%	55%	82%	64

Chart 3	Initial IFSP Dates	IFSP Review Dates	Parent Consent for Services	Services Authorized	Date of First Delivered Service	Services Delivered	Services setting
Overall (44)	95%	81%	68%	76%	77%	73%	91%
Health (202)	90%	75%	61%	67%	74%	58%	80%
Education (11)	100%	90%	80%	82%	82%	78%	100%
Other (13)	100%	85%	67%	83%	77%	92%	100%
Category A (14)	93%	77%	82%	91%	64%	83%	93%
Category B (18)	94%	83%	65%	72%	88%	59%	89%
Category C (11)	100%	82%	55%	64%	73%	80%	91%

Chart 4	Services Payment Source	Child IFSP Outcomes	Family Outcomes	Online Progress Notes	Child Outcomes Data	619 Notification Date	619 Referral Date
Overall (44)	70%	64%	44%	46%	80%	74%	77%
Health (202)	63%	61%	28%	38%	65%	68%	75%
Education (11)	64%	82%	70%	64%	82%	70%	73%
Other (13)	85%	54%	46%	42%	100%	85%	85%

Chart 4	Services Payment Source	Child IFSP Outcomes	Family Outcomes	Online Progress Notes	Child Outcomes Data	619 Notification Date	619 Referral Date
Category A (14)	77%	67%	67%	36%	93%	92%	71%
Category B (18)	67%	72%	33%	47%	72%	67%	72%
Category C (11)	64%	45%	30%	50%	73%	60%	91%

Q 24. Which of the following statements best describes the relationship among the child level data elements that your state lead agency collects for children receiving Part C early intervention?

	Child Elements in Same Data set	Child Elements in More than One Data Set/Linked	Child Elements in More than One Data Set/ UnLinked
Overall (43)	65%	21%	14%
Health (20)	70%	15%	15%
Education (10)	70%	20%	10%
Other (13)	54%	31%	15%
Category A (14)	71%	14%	14%
Category B (17)	71%	18%	12%
Category C (11)	55%	27%	18%

Q 25. Can the local program print the IFSP from the state data system?

	Yes, Blank IFSP	Yes, Completed IFSP	Yes, Completed IFSP w Electronic Signature	No	Not Yet but Planned
Overall (43)	26%	47%	12%	30%	16%
Health (20)	35%	40%	10%	30%	20%
Education (10)	30%	60%	20%	20%	10%
Other (13)	8%	46%	8%	10%	15%
Category A (14)	36%	50%	21%	36%	7%
Category B (18)	22%	39%	11%	33%	22%
Category C (10)	20%	50%	0%	20%	20%

Q 26. Does your data system include the following data elements?

	ICD 9/10 Codes			HCPC Codes			CPT Codes		
	Yes	No	Not Yet but Planned	Yes	No	Not Yet but Planned	Yes	No	Not Yet but Planned
Overall (41)	49%	44%	7%	26%	67%	8%	33%	58%	10%
Health (19)	53%	42%	5%	28%	67%	6%	39%	50%	11%
Education (9)	22%	56%	22%	11%	67%	22%	22%	56%	22%
Other (13)	62%	38%	0%	33%	67%	0%	31%	69%	0%
Category A (13)	38%	62%	0%	17%	83%	0%	17%	83%	0%
Category B (17)	47%	53%	0%	24%	71%	6%	29%	65%	6%
Category C (10)	60%	10%	30%	40%	40%	20%	50%	20%	30%

Q 27. Do you use your data system to share any data electronically with the 619 program regardless of method?

	Not Yet but Planned	No, No Plans	Yes through Linking Records	Yes, through Sharing Lists with Personally Identifiable Information	Yes, through Sharing Aggregate Reports
Overall (44)	11%	9%	34%	43%	20%
Health (202)	15%	15%	20%	45%	25%
Education (11)	9%	0%	73%	27%	18%
Other (13)	8%	8%	23%	54%	15%
Category A (14)	14%	7%	50%	36%	21%
Category B (18)	17%	17%	17%	44%	11%
Category C (11)	0%	0%	45%	55%	27%

Q28. Can you link electronically Part C and 619 Preschool Special Education data to complete Exiting Report

	Yes	No	Not Yet but Planned
Overall (44)	20%	64%	16%
Health (20)	15%	75%	10%
Education (11)	36%	45%	18%
Other (13)	15%	62%	23%
Category A (14)	29%	64%	7%
Category B (18)	11%	67%	22%

	Yes	No	Not Yet but Planned
Category C (11)	27%	64%	9%

Data Security

Q29. If your state data system has a unique identifier for infants and toddlers with disabilities, what is the basis for the identifier?

	Social Security	Random Assignment	Established Formula	No Unique ID	Other
Overall (43)	2%	51%	37%	0%	9%
Health (20)	5%	45%	45%	0%	5%
Education (10)	0%	60%	30%	0%	10%
Other (13)	0%	54%	31%	0%	15%
Category A (14)	7%	57%	21%	0%	14%
Category B (17)	0%	41%	53%	0%	6%
Category C (11)	0%	55%	36%	0%	9%

Q30. Please select the best description of how child-level data for Part C links to child-level data from other programs.

	Early Head Start					Head Start				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	0%	5%	65%	23%	8%	0%	5%	65%	25%	5%
Health (20)	0%	0%	67%	22%	11%	0%	0%	67%	22%	11%
Education (10)	0%	0%	60%	30%	10%	0%	0%	60%	40%	0%
Other (13)	0%	17%	67%	17%	0%	0%	17%	67%	17%	0%
Category A (14)	0%	7%	86%	7%	0%	0%	7%	86%	7%	0%
Category B (17)	0%	0%	63%	31%	6%	0%	0%	63%	31%	6%
Category C (11)	0%	10%	40%	30%	20%	0%	10%	40%	40%	10%

	Child Care					General Ed K-12				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	3%	3%	72%	18%	5%	8%	13%	63%	13%	5%
Health (20)	0%	0%	72%	17%	11%	0%	0%	72%	17%	11%
Education (10)	10%	0%	60%	30%	0%	20%	30%	40%	10%	0%
Other (13)	0%	9%	82%	9%	0%	8%	17%	67%	8%	0%
Category A (14)	8%	8%	77%	8%	0%	7%	14%	64%	14%	0%
Category B (17)	0%	0%	81%	13%	6%	6%	6%	69%	13%	6%
Category C (11)	0%	0%	50%	40%	10%	10%	20%	50%	10%	10%

	Early Head Start					Head Start				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	0%	5%	65%	23%	8%	0%	5%	65%	25%	5%
Health (20)	0%	0%	67%	22%	11%	0%	0%	67%	22%	11%
Education (10)	0%	0%	60%	30%	10%	0%	0%	60%	40%	0%
Other (13)	0%	17%	67%	17%	0%	0%	17%	67%	17%	0%
Category A (14)	0%	7%	86%	7%	0%	0%	7%	86%	7%	0%
Category B (17)	0%	0%	63%	31%	6%	0%	0%	63%	31%	6%
Category C (11)	0%	10%	40%	30%	20%	0%	10%	40%	40%	10%

	State Pre-K					Temporary Assistance for Needy Families (TANF)				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	5%	2%	59%	22%	12%	2%	2%	73%	17%	5%
Health (20)	0%	0%	58%	21%	21%	0%	0%	72%	17%	11%
Education (10)	10%	0%	40%	40%	10%	0%	0%	70%	30%	0%
Other (13)	8%	8%	75%	8%	0%	8%	8%	77%	8%	0%
Category A (14)	7%	7%	71%	7%	7%	0%	0%	93%	7%	0%
Category B (17)	0%	0%	65%	18%	18%	0%	6%	75%	13%	6%
Category C (11)	10%	0%	30%	50%	10%	0%	0%	50%	40%	10%

	Home Visiting					CAPTA				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	5%	2%	63%	24%	5%	2%	14%	47%	35%	2%
Health (20)	5%	0%	58%	26%	11%	0%	10%	55%	30%	5%
Education (10)	0%	0%	70%	30%	0%	0%	0%	50%	50%	0%
Other (13)	8%	8%	67%	17%	0%	8%	31%	31%	31%	0%
Category A (14)	0%	0%	93%	7%	0%	0%	14%	64%	21%	0%
Category B (17)	12%	0%	53%	29%	6%	0%	6%	59%	35%	0%
Category C (11)	0%	10%	40%	40%	10%	0%	27%	9%	55%	9%

	Foster Care					Homeless Children				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	2%	7%	63%	24%	2%	3%	0%	65%	28%	5%
Health (20)	0%	0%	78%	17%	6%	0%	0%	72%	17%	11%
Education (10)	0%	0%	60%	40%	0%	0%	0%	50%	50%	0%
Other (13)	8%	23%	46%	23%	0%	8%	0%	67%	25%	0%
Category A (14)	0%	7%	79%	14%	0%	0%	0%	79%	21%	0%
Category B (17)	0%	6%	69%	25%	0%	0%	0%	69%	25%	6%
Category C (11)	0%	10%	40%	40%	10%	10%	0%	40%	40%	10%

	Vital Statistics					Birth Defects Registry				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	0%	10%	65%	23%	3%	0%	10%	60%	30%	0%
Health (20)	0%	11%	67%	17%	6%	0%	11%	50%	39%	0%
Education (10)	0%	0%	70%	30%	0%	0%	0%	70%	30%	0%
Other (13)	0%	17%	58%	25%	0%	0%	17%	67%	17%	0%
Category A (14)	0%	14%	79%	7%	0%	0%	14%	79%	7%	0%
Category B (17)	0%	6%	75%	19%	0%	0%	6%	69%	25%	0%
Category C (11)	0%	10%	30%	50%	10%	0%	10%	20%	70%	0%

	Medicaid/SCHIP					WIC/SNAP				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	5%	32%	37%	27%	0%	5%	2%	73%	17%	2%
Health (20)	0%	21%	53%	26%	0%	0%	0%	78%	17%	6%
Education (10)	0%	20%	40%	40%	0%	0%	0%	70%	30%	0%
Other (13)	17%	58%	8%	17%	0%	15%	8%	69%	8%	0%
Category A (14)	8%	31%	54%	8%	0%	0%	0%	100%	0%	0%
Category B (17)	0%	35%	41%	24%	0%	6%	0%	75%	19%	0%
Category C (11)	0%	30%	10%	60%	0%	0%	10%	40%	40%	10%

	Behavioral Health					Private Insurance				
	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program	Data in System	Data in Different Systems but Linked	Data Not Linked	Data Shared but Not Linked	Do Not Have Program
Overall (43)	0%	0%	75%	23%	3%	5%	5%	63%	23%	5%
Health (20)	0%	0%	78%	17%	6%	0%	0%	89%	6%	6%
Education (10)	0%	0%	70%	30%	0%	0%	11%	44%	33%	11%
Other (13)	0%	0%	75%	25%	0%	15%	8%	38%	38%	0%
Category A (14)	0%	0%	93%	7%	0%	0%	7%	86%	0%	7%
Category B (17)	0%	0%	81%	19%	0%	0%	6%	63%	31%	0%
Category C (11)	0%	0%	40%	50%	10%	11%	0%	33%	44%	11%

Q31. No analysis

Q32. With which of the following systems do you have a common child identifier for children receiving Part C services?

Q32	Newborn Hearing Screening	Part B 619 Preschool	Child Care	Early Head Start	Head Start	State Pre-K	K-12	Home Visiting Programs	TANF
Overall (23)	8%	58%	17%	13%	17%	33%	46%	21%	13%
Health (9)	13%	63%	1300%	13%	13%	38%	38%	38%	25%
Education (8)	0%	86%	14%	14%	29%	29%	86%	0%	0%
Other (6)	11%	33%	22%	11%	11%	33%	22%	22%	11%
Category A (9)	0%	56%	22%	22%	22%	33%	56%	0%	0%
Category B (7)	29%	57%	14%	14%	14%	29%	43%	57%	29%
Category C (7)	0%	71%	14%	0%	14%	43%	43%	14%	0%

	Newborn Hearing Screening	Part B 619 Preschool	Child Care	Early Head Start	Head Start	State Pre-K	K-12	Home Visiting Programs	TANF
Overall (23)	8%	58%	17%	13%	17%	33%	46%	21%	13%
Health (9)	13%	63%	1300%	13%	13%	38%	38%	38%	25%
Education (8)	0%	86%	14%	14%	29%	29%	86%	0%	0%
Other (6)	11%	33%	22%	11%	11%	33%	22%	22%	11%
Category A (9)	0%	56%	22%	22%	22%	33%	56%	0%	0%
Category B (7)	29%	57%	14%	14%	14%	29%	43%	57%	29%
Category C (7)	0%	71%	14%	0%	14%	43%	43%	14%	0%

Q33. What method does your state utilize to define data sharing between/among different agencies serving infants and toddlers receiving services under Part C?

	Data Sharing Agreement	Interagency Agreement	Contract	Other
Overall (41)	54%	76%	12%	15%
Health (20)	47%	84%	11%	5%
Education (10)	60%	50%	10%	30%
Other (11)	58%	83%	17%	17%
Category A (13)	54%	62%	0%	15%
Category B (16)	50%	88%	13%	13%
Category C (12)	55%	73%	27%	18%

Q34. Do you utilize portable electronic devices (e.g., mobile phones, iPads etc.) for transmitting data (e.g. evaluation and assessment, IFSP) from the field to a central data system?

Q33	Yes	No	Not Yet but Planned
Overall (43)	37%	49%	14%
Health (20)	40%	45%	15%
Education (10)	30%	60%	10%
Other (13)	38%	46%	15%
Category A (14)	36%	50%	14%
Category B (17)	35%	59%	6%
Category C (11)	36%	36%	27%

Q35. Do you utilize portable electronic devices (e.g., mobile phones, iPads etc.) for transmitting data (e.g., evaluation and assessment, IFSP) from the field to a central data system?

	Yes	No	Not Yet but Planned
Overall (43)	16%	70%	14%
Health (20)	10%	75%	15%
Education (10)	30%	60%	10%
Other (13)	15%	69%	15%
Category A (14)	36%	50%	14%
Category B (17)	12%	88%	0%
Category C (11)	0%	64%	36%

Q36. Which secure means of transmitting data to and from the local program, region or provider to the state centralized data system do you use?

	Password Protected	Encryption	Secure FTP Site	Other
Overall (42)	71%	74%	60%	7%
Health (20)	70%	75%	60%	5%
Education (10)	78%	67%	56%	0%
Other (12)	69%	77%	62%	15%
Category A (14)	79%	71%	57%	14%
Category B (17)	63%	69%	50%	6%
Category C (11)	82%	91%	73%	0%

Q37. What tools and procedures are in place to verify the validity of data that the state receives from local programs?

	Training	Oversight/Reliability of Data Entry	Edit Checks in Database	Data Manager Listserv	Comparison of Electronic Data to Paper Documentation	Data Users Group
Overall (42)	72%	77%	91%	35%	77%	35%
Health (20)	65%	80%	90%	25%	90%	25%
Education (10)	80%	90%	80%	60%	70%	40%
Other (12)	77%	62%	100%	31%	62%	46%
Category A (14)	71%	71%	100%	50%	79%	36%
Category B (17)	76%	76%	82%	18%	76%	35%
Category C (11)	64%	91%	91%	36%	82%	36%

	Data Dictionary	User Manual	Attestation of Quality Data	Inquiry Report	Fiscal Incentives	Other
Overall (42)	56%	77%	26%	37%	5%	14%
Health (20)	50%	70%	25%	40%	0%	15%
Education (10)	70%	80%	40%	20%	0%	20%
Other (12)	54%	85%	15%	46%	15%	8%
Category A (14)	64%	86%	29%	57%	0%	14%
Category B (17)	29%	59%	24%	24%	0%	12%
Category C (11)	82%	91%	27%	36%	18%	18%

Data Analyses

38. How is your state using quantitative data about infants and toddlers with disabilities beyond APR reporting?

	Public Reporting	ID Underserved Areas	Target Funding	Justify Budget Requests	Trend Forecasting	Program Improvement	Monitoring Compliance	Targeted Child Find	Other
Overall (42)	86%	49%	33%	70%	81%	81%	95%	56%	5%
Health (20)	85%	55%	45%	75%	70%	80%	95%	50%	10%
Education (10)	70%	50%	20%	60%	100%	80%	100%	70%	0%
Other (12)	100%	38%	23%	69%	85%	85%	92%	54%	0%
Category A (14)	93%	36%	29%	50%	79%	79%	93%	50%	14%
Category B (17)	76%	47%	24%	82%	71%	82%	100%	53%	0%
Category C (11)	91%	64%	45%	82%	100%	82%	100%	73%	0%

39. Which of the following methods are you using to collect data for the APR indicators or 618 data tables?

Indicator 1 Timely Services	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	53%	5%	0%	14%	0%
Health (20)	35%	10%	0%	10%	0%
Education (10)	70%	0%	0%	10%	0%
Other (13)	69%	0%	0%	23%	0%
Category A (13)	64%	14%	0%	7%	0%
Category B (17)	53%	0%	0%	12%	0%
Category C (13)	36%	0%	0%	27%	0%

Indicator 2 Data Table 2 Settings	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	86%	0%	0%	2%	0%
Health (20)	80%	0%	0%	5%	0%
Education (10)	100%	0%	0%	0%	0%
Other (13)	85%	0%	0%	0%	0%
Category A (13)	93%	0%	0%	0%	0%
Category B (17)	76%	0%	0%	6%	0%
Category C (13)	91%	0%	0%	0%	0%

Indicator 3 Child Outcomes	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	77%	0%	0%	0%	5%
Health (20)	75%	0%	0%	0%	5%
Education (10)	80%	0%	0%	0%	10%
Other (13)	77%	0%	0%	0%	0%
Category A (13)	86%	0%	0%	0%	0%
Category B (17)	71%	0%	0%	0%	6%
Category C (13)	73%	0%	0%	0%	9%

Indicator 4 Family Outcomes	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	12%	0%	74%	0%	0%
Health (20)	15%	0%	70%	0%	0%
Education (10)	10%	0%	80%	0%	0%
Other (13)	8%	0%	77%	0%	0%
Category A (13)	7%	0%	86%	0%	0%
Category B (17)	6%	0%	76%	0%	0%
Category C (13)	18%	0%	64%	0%	0%

Indicators 5 & 6, 618 Table 1 Child Find	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	81%	0%	0%	2%	2%
Health (20)	80%	0%	0%	5%	5%
Education (10)	90%	0%	0%	0%	0%
Other (13)	77%	0%	0%	0%	0%
Category A (13)	93%	0%	0%	0%	0%
Category B (17)	71%	0%	0%	6%	6%
Category C (13)	91%	0%	0%	0%	0%

Indicator 7 Timely Evaluations and IFSPs	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	63%	0%	0%	12%	0%
Health (20)	55%	0%	0%	5%	0%
Education (10)	70%	0%	0%	10%	0%
Other (13)	69%	0%	0%	23%	0%
Category A (13)	86%	0%	0%	0%	0%
Category B (17)	53%	0%	0%	12%	0%
Category C (13)	45%	0%	0%	27%	0%

Indicator 8a Transition Plans	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	52%	0%	0%	17%	5%
Health (20)	50%	0%	0%	10%	0%
Education (10)	78%	0%	0%	11%	0%
Other (13)	38%	0%	0%	31%	15%
Category A (13)	79%	0%	0%	0%	7%
Category B (17)	38%	0%	0%	25%	6%
Category C (13)	36%	0%	0%	27%	0%

Indicator 8b Notification	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	58%	0%	0%	14%	7%
Health (20)	55%	0%	0%	5%	5%
Education (10)	70%	0%	0%	20%	0%
Other (13)	54%	0%	0%	23%	15%

Indicator 8b Notification	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Category A (13)	79%	0%	0%	0%	7%
Category B (17)	47%	0%	0%	18%	12%
Category C (13)	45%	0%	0%	27%	0%

Indicator 8c Transition Conference	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	53%	0%	0%	16%	5%
Health (20)	50%	0%	0%	10%	0%
Education (10)	70%	0%	0%	20%	0%
Other (13)	46%	0%	0%	23%	15%
Category A (13)	79%	0%	0%	0%	7%
Category B (17)	41%	0%	0%	24%	6%
Category C (13)	36%	0%	0%	27%	0%

618 Data Table 3 Exit Data	State/Local Data System	Provider Survey	Family Survey	Onsite Monitoring	Other
Overall (43)	93%	0%	0%	0%	0%
Health (20)	89%	0%	0%	0%	0%
Education (10)	100%	0%	0%	0%	0%
Other (13)	92%	0%	0%	0%	0%
Category A (13)	93%	0%	0%	0%	0%
Category B (17)	88%	0%	0%	0%	0%
Category C (13)	100%	0%	0%	0%	0%

40. Do you provide other reports or data to stakeholders beyond the 618 data tables and the required state APR indicators?

	Yes	No
Overall (47)	74%	26%
Health (22)	68%	32%
Education (11)	82%	18%
Other (14)	79%	21%
Category A (14)	71%	29%
Category B (18)	78%	22%
Category C (14)	71%	29%

41. In the last two years, has your state lead agency used data from your state data system(s) for children receiving Part C services in any of the following ways?

	Formal Report for Public	Formal report for Governor or Legislature	Program Improvement	Service Delivery Issues	Resource Allocation Decisions
Overall (43)	67%	72%	93%	67%	67%
Health (20)	60%	55%	95%	65%	70%
Education (10)	60%	80%	90%	70%	60%
Other (13)	85%	92%	92%	69%	69%
Category A (13)	71%	79%	100%	64%	64%
Category B (17)	71%	59%	88%	65%	71%
Category C (13)	55%	82%	91%	73%	64%

	Identify Need for Professional Development, TA	Effectiveness of targeted program improvement	Examine program effectiveness	Check Data Quality	Other
Overall (43)	86%	65%	63%	93%	0%
Health (20)	85%	65%	55%	95%	0%
Education (10)	80%	50%	60%	80%	0%
Other (13)	92%	77%	77%	100%	0%
Category A (13)	86%	71%	57%	93%	0%
Category B (17)	82%	53%	53%	94%	0%
Category C (13)	91%	73%	82%	91%	0%

42. I can get my Part C state data analyzed in a timely manner for recurring data needs (e.g., APR, annual report to governor or legislature).

	Strongly Agree	Agree	Disagree	Strongly Disagree
Overall (43)	53%	40%	5%	2%
Health (20)	50%	50%	0%	0%
Education (10)	40%	50%	0%	10%
Other (13)	69%	15%	15%	0%
Category A (14)	86%	7%	0%	7%
Category B (17)	29%	59%	12%	0%
Category C (11)	55%	45%	0%	0%

43. I can get my Part C state data analyzed in a timely manner when I have a new request (i.e., non- recurring such as an ad hoc request from legislature or media).

	Strongly Agree	Agree	Disagree	Strongly Disagree
Overall (43)	42%	49%	5%	5%
Health (20)	30%	65%	0%	5%
Education (10)	40%	40%	10%	10%
Other (13)	62%	31%	8%	0%
Category A (14)	64%	21%	0%	14%
Category B (17)	18%	76%	6%	0%
Category C (11)	55%	36%	9%	0%

Staffing

44. What kind of staff perform the following functions for your Part C data system?

	Design/Development			Maintenance/Revision		
	Part C	Lead Agency	External Contractors	Part C	Lead Agency	External Contractors
Overall (43)	5%	12%	14%	2%	21%	19%
Health (20)	10%	10%	15%	5%	20%	20%
Education (10)	0%	20%	20%	0%	11%	33%
Other (13)	0%	8%	8%	0%	31%	8%
Category A (15)	7%	14%	7%	0%	29%	21%
Category B (17)	6%	18%	24%	6%	31%	25%
Category C (11)	0%	0%	9%	0%	0%	9%

	Data Collection			Data Validation		
	Part C	Lead Agency	External Contractors	Part C	Lead Agency	External Contractors
Overall (43)	46%	15%	5%	29%	12%	2%
Health (20)	53%	16%	0%	40%	15%	0%
Education (10)	20%	30%	10%	10%	10%	10%
Other (13)	58%	0%	8%	25%	8%	0%
Category A (15)	62%	8%	0%	29%	0%	0%
Category B (17)	50%	31%	6%	38%	25%	0%
Category C (11)	27%	0%	9%	18%	9%	9%

	Data Analysis			Help Desk		
	Part C	Lead Agency	External Contractors	Part C	Lead Agency	External Contractors
Overall (43)	29%	19%	2%	10%	26%	21%
Health (20)	30%	15%	0%	15%	15%	25%
Education (10)	20%	30%	0%	10%	30%	30%
Other (13)	33%	17%	8%	0%	42%	8%
Category A (15)	21%	21%	0%	0%	38%	15%
Category B (17)	44%	25%	0%	6%	29%	24%
Category C (11)	18%	9%	0%	27%	9%	27%

Q44	Data Analysis		
	Part C	Lead Agency	External Contractors
Overall (43)	0%	35%	35%
Health (20)	0%	25%	40%
Education (10)	0%	33%	44%
Other (13)	0%	55%	18%
Category A (15)	0%	50%	29%
Category B (17)	0%	36%	43%
Category C (11)	0%	18%	36%

45. Does your Part C data manager interact with data managers for other early childhood programs?

Q45	Yes, Routinely	Yes, Occasionally	No	Not Yet but Planned
Overall (42)	26%	40%	31%	2%
Health (20)	20%	50%	30%	0%
Education (10)	40%	20%	30%	10%
Other (12)	25%	42%	33%	0%
Category A (14)	21%	50%	29%	0%
Category B (16)	31%	31%	31%	6%
Category C (11)	27%	45%	27%	0%

46. Does your state have a data governance body whose scope of responsibility includes data on children and families receiving Part C services?

	Yes	No
Overall (42)	36%	64%
Health (20)	23%	77%
Education (10)	45%	55%
Other (12)	50%	50%
Category A (14)	57%	43%
Category B (16)	33%	67%
Category C (11)	14%	86%

47. Does your state have a formal or informal group with representatives responsible for defining, validating, analyzing and using data for early childhood programs?

Q47	Yes, Data Governance Board	Yes, Data User Group	No	Not Yet but Planned
Overall (43)	14%	35%	33%	19%
Health (20)	15%	15%	45%	25%
Education (10)	20%	40%	20%	20%
Other (13)	8%	62%	23%	8%
Category A (14)	14%	50%	14%	21%
Category B (17)	18%	18%	47%	18%
Category C (11)	9%	36%	36%	18%

48. If you answered yes, does your Part C data manager participate?

	Yes	No
Overall (22)	77%	23%
Health (7)	86%	14%
Education (6)	83%	17%
Other (9)	67%	33%
Category A (8)	100%	0%
Category B (7)	71%	29%
Category C (6)	67%	33%

Data Enhancements

49. Are you planning on developing a new data system in the next two years?

	Yes	No	Not Sure
Overall (43)	30%	60%	9%
Health (20)	30%	55%	15%
Education (10)	30%	60%	10%
Other (13)	31%	69%	0%
Category A (14)	50%	43%	7%
Category B (17)	18%	71%	12%
Category C (12)	27%	64%	9%

50. Do you plan to make major enhancements to your data system in the next two years?

	Yes	No	Not Sure
Overall (43)	53%	23%	23%
Health (20)	50%	15%	35%
Education (10)	50%	20%	30%
Other (13)	62%	38%	0%
Category A (14)	71%	14%	14%
Category B (17)	47%	24%	29%
Category C (12)	45%	27%	27%

51. If you are planning to make major enhancements, please specify what enhancements you plan to make.

No analysis by lead agency or eligibility criteria

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