

FFY 2021 CORRECTION OF NONCOMPLIANCE GUIDANCE

The primary focus of the Arizona Department of Economic Security/Arizona Early Intervention Program (ADES/AzEIP) monitoring is to improve early intervention results and functional outcomes of all AzEIP eligible infants, toddlers and their families. ADES/AzEIP monitoring also ensures Service Provider Agency (SPA) compliance with requirements under IDEA, Part C and AzEIP policies and procedures.

A SPA must demonstrate 100% compliance for each federal indicator with noncompliance by (1) completion of child-specific corrections (as applicable) and (2) verification of programmatic corrections.

For all instances of new noncompliance, **correction is required as soon as possible** but no later than **one (1) year** from the date ADES/AzEIP issues the written notification of the noncompliance finding to SPA.

For all instances of continuing noncompliance, **correction is required as soon as possible**.

CHILD-SPECIFIC CORRECTION

Note: SPAs that are in the current Indicator 1 (timely services) cohort have the potential for identification of child-specific correction. For FFY 2021, that includes regions 5, 6, 7, 13, 16, 17, and 21.

SPAs that have been identified as having one (1) or more records that require child-specific correction must demonstrate that each case of noncompliance for Indicator 1 (timely services) found during the FFY 2021 review period was corrected by providing documentation that:

- Service(s) was received although late,
- Parents declined service(s), or
- Child left the jurisdiction of the program due to transfer or exit

For correction of child-specific noncompliance for Indicator 1 (timely services), the following must be completed:

1. SPA ensures I-TEAMS is updated to reflect the child-specific correction
2. SPA emails the following information to AzEIPQualityImprovement@azdes.gov:
 - a. Child's Name
 - b. I-TEAMS ID
 - c. The child-specific correction completed:
 - i. Service provided
 - ii. Service removed from IFSP due to parent declining the service
 - iii. Child transferred
 - iv. Child exited
3. ADES/AzEIP reviews the information provided and notifies SPA if child specific corrections have been verified or if additional action steps, including but not limited to completion of a Corrective Action Plan (CAP), are required

ADES/AzEIP requires that all child specific corrections be completed **as soon as possible**.

Note: Child-specific correction has been resolved for Indicator 7 (45-day timeline), Indicator 8a (Transition Planning Meeting), Indicator 8b (Public Education Agency Notification), and Indicator 8c (Transition Conference). No further child-specific correction is needed by SPA for Indicators 7, 8a, 8b, 8c.

PROGRAMMATIC CORRECTION

A SPA must demonstrate that data subsequent to the FFY 2021 monitoring period data is now 100% compliant for each indicator with noncompliance. **For programmatic correction, ADES/AzEIP considers that data is 100% compliant when it meets requirements outlined in the AzEIP Policy and Procedure Manuals.**

A Tier Level is designated for each monitored indicator based on SPA's compliance percentage. If continuing noncompliance is identified from the previous monitoring period, FFY 2020 and FFY 2021 compliance percentages were utilized to determine the FFY 2021 Tier Level.

Programmatic corrections are:

1. Based on assigned tier levels
2. Outlined in [FFY 2021 Tier Definitions and Correction Requirements](#) and consist of:
 - a. Analysis of Noncompliance
 - b. Letter of Assurance
 - c. Technical Assistance (as applicable)
 - d. SPA Submission and ADES/AZEIP Verification of Consecutive Compliant Records
 - e. Corrective Actions (as applicable)

To ensure that programmatic corrections are completed within one (1) year from the date of the FFY 2021 Findings of Noncompliance Letter, ADES/AZEIP requires that all programmatic corrections are completed as **soon as possible**.

Analysis of Noncompliance

SPA will complete an analysis of noncompliance by reviewing records found to be noncompliant during the FFY 2021 monitoring period to explore and determine the reason/root cause and contributing factor area(s) that led to noncompliance. SPA will document their analysis on the 'Analysis of Noncompliance Spreadsheet' which is provided with the FFY 2021 Findings of Noncompliance Letter.

The analysis will assist SPA to make effective programmatic corrections that will prevent future noncompliance.

Letter of Assurance

SPA will submit to ADES/AZEIP a letter of assurance that includes that SPA:

1. Recognizes the reason(s) and root cause(s) of noncompliance
2. Will make programmatic corrections to their policies, procedures, guidance, or practice to prevent future noncompliance
3. Will correct the noncompliance as soon as possible and no later than one (1) year from the date of the FFY 2021 Findings of Noncompliance Letter

Technical Assistance

The overall goal of ADES/AZEIP technical assistance (TA) is to provide opportunity for SPA to enhance their competence in:

1. Providing early intervention supports and services in accordance with IDEA, Part C and AZEIP policies and procedures
2. Collaborating with other early childhood programs

ADES/AZEIP-identified TA will be individualized for each contractor/region/indicator and based on ADES/AZEIP and SPA's analysis of noncompliance.

Optional or mandatory participation in TA by SPA leaders, service coordinators, and/or early intervention service providers is based on SPA's Tier Level.

SPA Submission of Consecutive Compliant Records

Specific **Programmatic Correction Spreadsheets** for each indicator (1, 7, 8a, 8b, 8c) in which programmatic correction is required are attached to the email with the FFY 2021 Findings of Noncompliance Letter.

SPA must use the appropriate **Programmatic Correction Spreadsheet** to identify the required consecutive compliant records per indicator as outlined in the FFY 2021 Findings of Noncompliance Letter.

The Indicator 1 Programmatic Correction Spreadsheets were created using the IFSP Services Utilization Report.

The Indicator 7 Programmatic Correction Spreadsheets were created using the 45-Day Timeline Report. Multiple contracts may be listed for a child record.

The Indicator 8 Programmatic Correction Spreadsheets were created using the Transition Compliance Report.

1. If a transition compliance decision has not been entered in I-TEAMS by ADES/AZEIP, the compliance decision cell will be blank.
2. These records may still be submitted as part of the consecutive compliant count if after SPA review of the record it is determined the record is compliant.

Follow the steps below to identify consecutive compliant records to be submitted:

1. Identify the required number of consecutive records from the **Programmatic Correction Spreadsheet** that was provided by ADES/AzEIP.
2. Identify exclusions:
 - a. Excluded records should be rare occurrences
 - b. If unsure if a record may be excluded, please refer to AzEIP Policy and Procedure Manuals for assistance
 - c. Approved exclusions
 - i. Indicator 7:
 1. SPA/Region was not the assigned SPA on the date the Initial IFSP was completed
 2. Record was transferred to SPA/Region after the 45th day without an initial IFSP
 - ii. Indicator 8:
 1. SPA/Region was not the assigned SPA on the date the specific transition activity (Transition Planning Meeting, PEA Notification, Transition Conference) was completed
 - d. Additional exclusions require ADES/AzEIP approval prior to submission of consecutive compliant records
 - i. Email approval request to AzEIPQualityImprovement@azdes.gov and assigned CQIC including:
 1. A detailed explanation of the reason for the request to exclude the record
 2. All applicable documents that support the request
 - a. Examples: Developmental Evaluation Report, Prior Written Notice of Eligibility, IFSP, Provider Contact Logs, SC Contact Logs, PEA Notification, Transition Conference Summary, written correspondence
 - b. If unsure of which documents to include, contact the SPA-assigned CQIC
 - ii. ADES/AzEIP will notify SPA if record can be excluded
3. Approved excluded records do not affect the consecutive compliant count; the consecutive compliant count continues after an approved exclusion until the required number of compliant records is reached

On the **Programmatic Correction Spreadsheet** highlight **only** the rows indicated below:

1. Highlight the row of each consecutive compliant record in **YELLOW**
2. Highlight any excluded record in **ORANGE** and include in the Comments column
 - a. One of the approved reasons identified in 2.c.i.1, 2.c.i.2, or 2.c.ii.1
 - b. Date of ADES/AzEIP approval (if required)
3. Once the consecutive records have been highlighted, save a copy of the **Programmatic Correction Spreadsheet** with its original file name

Complete a 'Child File Review Form' for each identified consecutive compliant record and verify:

1. All supporting documentation meets AzEIP policies and procedures
2. Data is accurately reflected in I-TEAMS
3. Dates on child records, 'Child File Review Form' and I-TEAMS match
4. All fields and detailed explanations are entered on the 'Child File Review Form' as appropriate

Upload the 'Child File Review Form' and all supporting documentation for each consecutive compliant record through the FFY 2021 Corrective Action File Review Google Form.

Update the title of the **Programmatic Correction Spreadsheet** adding the date of submission to ADES/AzEIP to the end of the title.

Once all file reviews and supporting documentation have been submitted, email the highlighted **Programmatic Correction Spreadsheet** to AzEIPQualityImprovement@azdes.gov and the assigned CQIC.

For ADES/AzEIP to verify submitted records, SPA must successfully follow and complete all steps above **as soon as possible but no later than June 29, 2024** to be considered for timely correction.

ADES/AzEIP Verification of Submitted Documentation

1. Files will be reviewed in consecutive order as identified on the **Programmatic Correction Spreadsheet**
 - a. If a file is determined to be noncompliant (incomplete, inaccurate, or inconsistent), the file verification process will halt, and

- b. SPA will be notified to begin the process again
- 2. SPA is encouraged to submit spreadsheets and required documentation as each indicator per region is ready for verification
 - a. Multiple spreadsheets submitted at the same time will likely lead to a delay in ADES/AzEIP response time

Corrective Action Plan

1. ADES/AzEIP requires the development of a SPA Corrective Action Plan (CAP) within one (1) month of:
 - a. The date of the FFY 2021 Findings of Noncompliance Letter if SPA has one or more findings in Tier 3
 - b. Notification from ADES/AzEIP if ADES/AzEIP is unable to verify consecutive compliant records
2. CAP strategies and actions must:
 - a. Be based on information gathered from the Analysis of Noncompliance spreadsheet
 - b. Include:
 - i. Identification and Evidence of implementation
 - ii. Timelines for implementation
 - iii. Submission of the required consecutive compliant records
 - iv. Plan for reporting periodic progress to ADES/AzEIP
3. ADES/AzEIP will meet with SPA to review the CAP and determine if additional corrective actions are needed
4. If SPA has not corrected noncompliance by April 30, 2024, ADES/AzEIP will notify SPA of additional required corrective action(s)

Additional Corrective Actions

ADES/AzEIP will implement corrective actions for any SPA that is unable to demonstrate successful correction of noncompliance. Corrective actions may include one or more of the following:

1. Required submission of additional documentation and/or increased reporting of the area(s) of noncompliance and strategies to improve compliance
2. Focused monitoring activities that may occur on site or remotely to review files, meet with staff, identify strategies for improvement and prepare a plan to address areas of noncompliance
3. Developing a CAP including timeline for implementation and periodic progress reporting
4. Revising contract terms and provisions of SPA when necessary and with appropriate notice
5. Requiring SPA to revise its contractual terms or procurement methods when necessary, and with appropriate notice
6. Adjustment or withholding of whole or partial payment until satisfactory resolution of noncompliance
7. Suspending all or part of SPA's contract or service provision responsibilities
8. Termination of SPA's contract or service provision responsibilities in whole or in part

Status of Correction Letter

ADES/AzEIP will issue a 'Status of Correction' Letter upon verification of:

1. Child-specific corrections (as applicable for Indicator 1)
2. Programmatic correction, including completion of all required corrective actions