**State Performance Plan / Annual Performance Report: Part C**

**for STATE FORMULA GRANT PROGRAMS under the Individuals with Disabilities Education Act**

**For reporting on
FFY 2021**

**Guam**



**PART C DUE
February 1, 2023**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State’s systems designed to drive improved results for infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. This introduction must include descriptions of the State’s General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

## Intro - Indicator Data

**Executive Summary**

This Executive Summary includes a description of Guam's Part C State Performance Plan (SPP) and Annual Performance Report (APR) for FFY 2021. A description of the Guam's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement in the development and review of the SPP and APR, and how Guam will report the APR to the public are provided separately within this introduction section of Guam's FFY2021 SPP/APR.

Additional information related to data collection and reporting

**General Supervision System**

**The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.**

The Guam Department of Education (GDOE) is a unitary system. The Part C Guam Early Intervention System (GEIS) is part of GDOE’s Division of Special Education.
The Compliance Monitoring Office (CMO), directly under the Superintendent of Education, is responsible for implementing Guam’s General Supervision System. GDOE has created effective monitoring strategies that are integrated across all components of the general supervision system. Multiple data sources and methods are used to monitor the public schools and GEIS. Selected monitoring activities ensure continuous examination of performance for compliance and results. This includes off-site and on-site monitoring activities. Data from the monitoring activities are used to collect and/or verify performance data for every indicator included in the State Performance Plan (SPP). This analysis process ensures that the monitoring system is designed to maximize the use of monitoring resources to include effective professional development and targeted technical assistance.
Overall, the general supervision system includes planned analysis and review of all available monitoring data from on-site, off-site monitoring activities, and dispute resolution. This review process is conducted biannually.
The CMO manages GDOE's Dispute Resolution System (State Complaints Due Process Hearings, and Mediations). The CMO uses the Dispute Resolution System to identify and correct noncompliance in the implementation of IDEA requirements and to identify components of the system that need improvement (e.g., policies, procedures, guidelines, written agreements). The CMO would examine dispute resolution data from GEIS to identify issues related to performance and help plan onsite monitoring activities. The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.

**Technical Assistance System:**

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to early intervention service (EIS) programs.**

DOE has a technical assistance system with mechanisms in place to ensure the timely delivery of high quality, evidence-based technical assistance, and support to early interventionists and other early childhood service providers. Technical assistance (TA), training and support are provided based on program needs in improving services for low-incidence areas, improving child outcomes, coaching for families, and any other areas identified through a needs assessment or through the SPP/APR.

The technical assistance, training, and support were based on program needs identified in improving timely services, child and family outcomes, and transition planning. GEIS was able to access resources through OSEP-funded TA Centers and Resources such as DaSY Center, IDEA Data Center, Early Childhood Technical Assistance Center (ECTA), and through the University of Guam Center for Excellence in Developmental Disabilities Education, Research and Service (CEDDERS).

During this reporting period, TA support was provided by the Guam CEDDERS in the form of training for new staff on the Learn the Signs, Act Early (LTSAE): 4-Key Steps for Early Identification, Ages and Stages Questionnaire Developmental Screening, Early Childhood Outcome Measures, and on Early Childhood Coaching. GEIS continued to consult with Dr. Naomi Younggren, through ECTA, to discuss further plans on the Routine-based Interviews (RBI) for the five new service providers hired. In addition, Dr. Younggren provided on-site training and technical assistance on early transition and on the IFSP process in September 2022.

GEIS has mechanisms in place to evaluate the effectiveness of the technical assistance, training, and supports provided. One strategy that the Program is using to measure the impact of the training are self-assessment surveys that are disseminated before and after the training to determine the levels of understanding and competencies of the providers. In addition, there are follow-up observations to see if there are changes in the implementation of evidence-based practices. The Program uses other methods of evaluation such as, the review of data compiled from the training evaluations, observations, and feedback from parents, service providers, GELC, and the Part C Guam Interagency Coordinating Council (GICC) members. These mechanisms are placed to ensure the timely delivery of high quality, evidence-based technical assistance and support to the GEIS program.

**Professional Development System:**

**The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.**

Guam Part C has in place mechanisms to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.

As part of GDOE’s State Strategic Plan, several goals were developed to improve educational outcomes for all students. One such goal is that GDOE instructional personnel will meet high standards for qualifications and ongoing professional development and will be held accountable for all assigned responsibilities. There are normally a total of 9 professional development days in the GDOE School Calendar. The nine (9) professional development days are designated specifically to focus on the state-wide initiatives. Since the GEIS is a part of the GDOE Division of Special Education, as much as possible, the designated professional development days are utilized to assist the early intervention service providers to improve outcomes for infants and toddlers and their families. GEIS may utilize these days to continue with direct services. This is to ensure that services are not compromised, when participating in other training activities offered by other early childhood serving agencies.

GEIS reports on a quarterly basis to the Guam's Early Learning Council (GELC) which represents all early childhood serving agencies. GEIS continues to partner and collaborate with all early childhood serving agencies in planning for professional development activities. The Department of Public Health and Social Services – Division of Children’s Wellness (DPHSS-DCW) Preschool Development Grant (PDG) Birth to Five project continues to be an excellent collaborative initiative in supporting shared professional development activities. These professional development training activities include – a) Teaching Strategies to include the Creative Curriculum and the Al’s Pals Curriculum; b) Strengthening Families/Protective Factors Framework- Parent Café; c) Learn The Signs: 4 Key Steps for Early Identification, and (d) other GELC early childhood initiatives. Other collaborative TA and professional development was provided through partnership with the GDOE on the Conscious Discipline training and with the Guam Early Hearing Detection and Intervention (EHDI) Project in training and webinars on supporting families of children who are deaf or hard of hearing.

GEIS continues to provide training to build confidence and competencies of the service providers and to ensure evidence-based strategies or models are implemented with fidelity. These models include: 1) Routines Based Intervention, 2) Early Childhood Coaching and have expanded the strategies by using the Early Start Denver Model (ESDM) Family Coaching and the ESDM Help Is In Your Hands Parent modules, and 3) Infusing and using Child and Family Outcomes throughout the IFSP process. GEIS continues to monitor and evaluate these strategies through the implementation of the Early Childhood Coaching (FLARE) plans during home visiting sessions, direct observations, and assessments of the coaching practices using the Guam Early Childhood Coaching Fidelity Checklists.

In addition, GEIS continues to provide Family Learning Sessions on evidence-based strategies at support a child’s expressive language skills. The focus of these learning sessions is to provide opportunities for parents to apply these strategies and share their learning with other families. In addition, service providers share additional tools and resources when working with infants and toddlers and their families during regular scheduled home visiting sessions.

**Broad Stakeholder Input:**

**The mechanisms for soliciting broad stakeholder input on the State’s targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 11, the State’s Systemic Improvement Plan (SSIP).**

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

**Apply stakeholder input from introduction to all Part C results indicators. (y/n)**

YES

**Number of Parent Members:**

10

**Parent Members Engagement:**

**Describe how the parent members of the Interagency Coordinating Council, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

As noted earlier, invitations were sent to the GICC members including parent members, parents of children enrolled in GEIS, and Community partners that included other early childhood programs. In addition to the invitations, flyers, emails, and phone call reminders were sent to the parents 2 weeks and then one week prior to the event. At each in-person and virtual sessions, Stakeholders were provided information on how many were engaged in the process. These processes included reviewing performance of the indicator, and if there was slippage noted, the stakeholders were asked to review the data and had discussed in groups any modification and additions on the implementation activities that may result in improved performance. At 2 large group sessions, ICC members and parents reviewed infographics as a way to increase understanding of the indicators using visual and discussed suggestions on strategies that will result in the development and implementation of activities designed to improve outcomes for infants and toddlers.

With the TA support from the Guam CEDDERS, a PowerPoint presentation included an explanation of the State Performance Plan (SPP), how it is designed to evaluate Guam’s efforts to implement the IDEA requirements and purposes, and how Guam will improve the implementation which will include measurable and rigorous targets for indicators established under the priority areas.

The presentation also included how Guam will report on the number of parent members who participated and how parent members of the Interagency Coordinating Council/State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents will be engaging in setting targets for performance indicators, analyzing data, developing improvement strategies, and evaluating the progress.

During the cluster sessions and Large Stakeholders meetings, Stakeholders reviewed and analyzed the program’s trend data that was provided during the sessions. For some sessions, parents and other stakeholders asked for additional data to be broken down and data providing input and recommendations. Input from each virtual session was presented at the Larger Stakeholder meetings that included possible reasons for the performance, recommendation for improvement strategies, and considerations for target setting. Information received are documented in the narrative for each indicator.

**Activities to Improve Outcomes for Children with Disabilities:**

**Describe the activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for infants and toddlers with disabilities and their families.**

GEIS facilitated the following activities to increase the capacity of diverse groups of parents to participate in the virtual stakeholder input sessions. These sessions were scheduled for different times and dates to allow parents to attend when it is most convenient for them. The sessions were scheduled to include multiple dates in order to allow diverse groups of parents to participate. The sessions also included focus discussions on how virtual home visiting services were provided during the COVID pandemic. Some parents share that virtual home visits seemed to work better using the coaching model through Tele-Intervention. Prior to the virtual sessions, GEIS sent out flyers to all parents with a follow-up call to confirm receipt of the flyers and a week prior to the session, parents received another call from the Service Coordinators/Service Providers encouraging parents to attend. During the sessions, the facilitator presented the agenda and anticipated outcomes and asked each parent to commit to engaging in the discussion identified agenda. Based on the commitment made by the parents, the small group discussions were engaging and parents were actively involved in sharing their input on 1) that the causes and reasons behind the data; 2) recommendations that will help improve the services, and 3) target setting for each performance indicator.

**Soliciting Public Input:**

**The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

Prior to the Stakeholder input sessions, the flyers entitled: Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was shared during a quarterly meeting for the Guam Interagency Coordinating Council, and the Guam Early Learning Council. The flyer was also shared during the GELC Leadership Committee meetings for the Preschool Development Grant on activities and shared with members of Project Minetgot: Guam Territorial Team, which is a one-year project designed to strengthen Guam’s early childhood programs. The flyer was also shared with parents enrolled in GEIS during visits and through emails, text, and phone calls.

**Making Results Available to the Public:**

**The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.**

GEIS will include the SPP/APR 2021-2022 report on the GEIS website: https://www.gdoe.net/District/Department/3-Guam-Early-Intervention-Services (click on grants and reports on left side), and http://www.gdoe.net/District/Department/2-Special-Education

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2020 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2020 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.**

GEIS will report annually to the public as soon as practicable, but no later than 120 days following the submission of the FFY 2021 SPP/ APR.

GEIS will also post a generated SPP/APR pdf version for pubic posting and OSEP’s Determination Letter and Response Table on the DOE website at Guam Early Intervention System website.

In addition, GEIS has included the APR and SSIP Reports on the GEIS website: https://www.gdoe.net/District/Department/3-Guam-Early-Intervention-Services (click on grants and reports on left side), and http://www.gdoe.net/District/Department/2-Special-Education

## Intro - Prior FFY Required Actions

Guam's IDEA Part C determination for both 2021 and 2022 is Needs Assistance. In Guam's 2022 determination letter, the Department advised Guam of available sources of technical assistance, including OSEP-funded technical assistance centers, and required Guam to work with appropriate entities. The Department directed Guam to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.

Guam must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which Guam received assistance; and (2) the actions Guam took as a result of that technical assistance.

**Response to actions required in FFY 2020 SPP/APR**

The Department directed Guam to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. Guam must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Guam's determination for 2022 reported a score of zero ("0") for the "long standing noncompliance" indicator in the 2022 Compliance Matrix for Guam Part C's grant special conditions. Guam, therefore, provides the following information related to the technical assistance received and actions taken related to Guam's Part C grant special condition:

(1) The technical assistance sources from which Guam received assistance: Guam continues to work with the Department's Risk Management Service (RMS) to address Guam Department of Education's (GDOE's) Special Conditions. The GDOE Comprehensive Corrective Action Plan (CCAP) describes the required activities - Letters from RMS and GDOE CCAP reports can be found on the GDOE website: http://gdoe.net; and

(2) The actions Guam took as a result of the technical assistance: Guam provides quarterly reports to RMS demonstrating progress towards addressing the Special Conditions.

Additionally, the technical assistance, training, and support were based on program needs identified in improving timely services, child and family outcomes, and transition planning. GEIS was able to access resources through OSEP-funded TA Centers and Resources such as DaSY Center, IDEA Data Center, Early Childhood Technical Assistance Center (ECTA), and through the University of Guam Center for Excellence in Developmental Disabilities Education, Research and Service (CEDDERS).

During this reporting period, TA support was provided by the Guam CEDDERS in the form of training for new staff on the Learn the Signs, Act Early (LTSAE): 4-Key Steps for Early Identification, Ages and Stages Questionnaire Developmental Screening, Early Childhood Outcome Measures, and on Early Childhood Coaching. GEIS continued to consult with Dr. Naomi Younggren, through ECTA, to discuss further plans on the Routine-based Interviews (RBI) for the five new service providers hired. In addition, Dr. Younggren provided on-site training and technical assistance on early transition and on the IFSP process in September 2022.

Furthermore, in October 2020, GDOE was awarded an OSEP State Personnel Development Grant (SPDG): Project Hita Para Mo'na to support its system's professional development improvements, especially during these uncertain times and the impact of the COVID-19 pandemic, which has started with the early intervention professional development system, inclusive of GEIS and other early childhood partners. Technical assistance for the implementation of Project Hita Para Mo'na is through the partnership established with one of Guam's local parent organizations, Autism Community Together (ACT); Guam's higher education technical assistance provider and preservice program, University of Guam CEDDERS and School of Education; and the national special education leadership organization, the National Association of State Directors of Special Education (NASDSE).

## Intro - OSEP Response

Guam's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 22, 2022 determination letter informed Guam that it must report with its FFY 2021 SPP/APR submission, due February 1, 2023, on the actions Guam took as a result of that technical assistance. Guam provided the required information.

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support Guam's lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report.

OSEP accepts the SICC form, which will not be posted publicly with Guam's SPP/APR documents.

The Department imposed Specific Conditions on Guam's IDEA Part C grant awards for the last three or more years. Those conditions are in effect at the time of the Department’s 2023 determination.

## Intro - Required Actions

Guam's IDEA Part C determination for both 2022 and 2023 is Needs Assistance. In Guam's 2023 determination letter, the Department advised Guam of available sources of technical assistance, including OSEP-funded technical assistance centers, and required Guam to work with appropriate entities. The Department directed Guam to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. Guam must report, with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which Guam received assistance; and (2) the actions Guam took as a result of that technical assistance.

# Indicator 1: Timely Provision of Services

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Compliance indicator:** Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must be based on actual, not an average, number of days. Include the State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

**Measurement**

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

**Instructions**

If data are from State monitoring, describe the method used to select early intervention service (EIS) programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

The State’s timeliness measure for this indicator must be either: (1) a time period that runs from when the parent consents to IFSP services; or (2) the IFSP initiation date (established by the IFSP Team, including the parent).

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs’ (OSEP’s) response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 98.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 95.56% | 95.68% | 96.00% | 96.83% | 96.43% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner** | **Total number of infants and toddlers with IFSPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 125 | 133 | 96.43% | 100% | 98.50% | Did not meet target | No Slippage |

**Number of documented delays attributable to exceptional family circumstances**

***This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.***

6

**Provide reasons for delay, if applicable.**

There were six (6) delays attributable to exceptional family circumstances. Of these, four (4) parents cancelled visits for a later date, one (1) parent did not meet the hearing appointment and had to rescheduled, and (1) parent requested to hold services for another date.

There were two (2) children who did not receive timely Occupational Therapy (OT) services due to Program Delays: OT services for the first child was added to the IFSP on April 2022. The child exited at 36 month of age on June 2022 without receiving OT services. The second child had OT services added to the Initial IFSP completed on May 23, 2022. OT services were not provided by the time the child turned 36 months and exited the program.

GEIS contracted OT services through an off-island vendor during this reporting period. Services were interrupted due to pending assignments of additional therapist needed to support the Guam DOE (Parts B and C). OT services from the off-island vender started back again for GEIS on December 2022.

**Include your State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).**

GEIS’ definition of “receipt of timely services” is determined by services on the IFSP provided within 30 days from the date of consent signed by the parent. Though services reported are to be delivered within 30 days of consent, IFSP services are initiated as soon as possible, depending on family circumstances. On the day that service is provided, the service provider has the family sign the form confirming delivery of initial services. The service provider submits documentation to the SC who then submits documentation to the data clerk for input on the date service was delivered. Should service not be delivered in a timely manner, the Service Coordinator is required to submit documentation stating the reason(s) for delay. Monthly meetings are scheduled and conducted individually with staff to discuss the status of cases.

**What is the source of the data provided for this indicator?**

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

Guam Part C data for Indicator 1 was collected from July 1, 2021 to June 30, 2022

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

GEIS performance for this reporting period is 131/133 or 98.50%. Of the133 infants and toddlers, there were 125 with IFSPs who receive the early intervention services on their IFSPs in a timely manner, and six (6) with documented delays attributable to exceptional family circumstances. The six exceptional circumstances were due to five parents cancelling scheduled meetings, and one parent that requested to hold the service for a later date. The remaining two (2) children did not receive timely OT services by the time they exited GEIS at 36 month of age.

The actual data for 2021-2022, were compiled through the GEIS data system and a manual review of the service provider’s contact logs and intervention plans found in the child’s program folder. A data system report indicates new services recommended in the child’s IFSP, date service is to begin (within 30 days from consent by parent of IFSP), and date service was delivered by service provider. The data report also indicates a ‘flag” on new services that were not delivered within the required timeline. The SC is responsible for submitting required documentation indicating the date service was provided to the data office. The SC is also responsible for submitting documentation of service not delivered by the required timeline.

**Provide additional information about this indicator (optional)**

During the last reporting period, GEIS lost 6 out of 10 primary service providers in the program: one re-located off-island, three were assigned to DPHSS to support with the COVID-19 quarantine process and the COVID hotline, one resigned, and one transferred to work in a classroom. In addition, families were still uncomfortable with face to face meetings or visits made by our GEIS staff, which resulted in numerous cancellations of meetings/sessions. GEIS had five of the six positions filled as of October 2021.

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 |  |  | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 1 - Prior FFY Required Actions

Because Guam reported less than 100% compliance for FFY 2020, Guam must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2021 SPP/APR, that it has verified the correction of noncompliance identified in FFY 2020 for this indicator. Specifically, Guam must report that it: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within its jurisdiction, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, Guam must describe the specific actions that were taken to verify the correction.

If Guam did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

The GDOE Compliance Monitoring Office (CMO) did not issue a written notification of findings of the noncompliance reported in the FFY 2020 APR Indicator 1 substantial compliance data of 96.43% (81/84). As reported in the FFY 2020 APR, the three instances of noncompliance reported were three infants/toddlers who left island or the program at 36 months of age before the end of the reporting period. At the time of the annual review, CMO conducted a pre-finding review of the FFY 2020 APR Indicator 1 data. CMO verified through the program data report that the three reported individual instances of noncompliance in the FFY 2020 APR data were out of the GEIS jurisdiction at the time of the annual review. In addition, the program data report included additional data within the FFY 2020 reporting year and after the reported individual instances of noncompliance demonstrating 100% compliance with Indicator 1 requirements, which indicated that GEIS was correctly implementing the specific regulatory requirements for Indicator 1. CMO determined that this pre-finding annual review of FFY 2020 Indicator 1 data met the two-prong verified correction requirement, consistent with OSEP Memo 09-02 and Item #4 in OSEP’s September 3, 2008 FAQs. CMO therefore did not issue a written notification of findings of noncompliance for the FFY 2020 APR Indicator 1 noncompliance data.

The CMO conducted their off-site monitoring for Indicator 1 compliance the following year in FFY 2021. The off-site monitoring included a review of the program data report for Indicator 1 from July 1, 2021– March 8, 2022. A Written Notice of Finding of Noncompliance for Indicator 1 was issued to the GEIS in March 2022. Verified correction, including individual instances of noncompliance and demonstration of subsequent data at 100% compliance, for the Indicator 1 noncompliance written finding will be reported in the FFY 2022 APR.

## 1 - OSEP Response

## 1 - Required Actions

Because Guam reported less than 100% compliance for FFY 2021, Guam must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2022 SPP/APR, that it has verified the correction of noncompliance identified in FFY 2021 for this indicator and is: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within its jurisdiction, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, Guam must describe the specific actions that were taken to verify the correction.

If Guam did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2021.

# Indicator 2: Services in Natural Environments

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings. (20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

**Instructions**

Sampling from the State’s 618 data is not allowed.

Describe the results of the calculations and compare the results to the target.

The data reported in this indicator should be consistent with the State’s 618 data reported in Table 2. If not, explain.

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= | 100.00% | 100.00% | 100.00% | 100.00% | 99.36% |
| Data | 100.00% | 100.00% | 99.30% | 99.36% | 100.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 98.00% | 98.00% | 99.00% | 99.00% | 100.00% |

**Targets: Description of Stakeholder Input**

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 108 |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Total number of infants and toddlers with IFSPs | 108 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings** | **Total number of Infants and toddlers with IFSPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 108 | 108 | 100.00% | 98.00% | 100.00% | Met target | No Slippage |

**Provide additional information about this indicator (optional).**

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3: Early Childhood Outcomes

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of infants and toddlers with IFSPs who demonstrate improved:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication); and

C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

State selected data source.

**Measurement**

Outcomes:

 A. Positive social-emotional skills (including social relationships);

 B. Acquisition and use of knowledge and skills (including early language/communication); and

 C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

**Summary Statements for Each of the Three Outcomes:**

**Summary Statement 1:** Of those infants and toddlers who entered early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 1:**

Percent = [(# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d)) divided by (# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d))] times 100.

**Summary Statement 2:** The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 2:**

Percent = [(# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e)) divided by the (total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

**Instructions**

*Sampling of****infants and toddlers with IFSPs****is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions page 2 for additional instructions on sampling.)*

In the measurement, include in the numerator and denominator only infants and toddlers with IFSPs who received early intervention services for at least six months before exiting the Part C program.

Report: (1) the number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting data under Section 618 of the IDEA; and (2) the number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements.

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining “comparable to same-aged peers.” If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Process (COS), then the criteria for defining “comparable to same-aged peers” has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

If the State’s Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i), the State must report data in two ways. First, it must report on all eligible children but exclude its at-risk infants and toddlers (i.e., include just those infants and toddlers experiencing developmental delay (or “developmentally delayed children”) or having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay (or “children with diagnosed conditions”)). Second, the State must separately report outcome data on either: (1) just its at-risk infants and toddlers; or (2) aggregated performance data on all of the infants and toddlers it serves under Part C (including developmentally delayed children, children with diagnosed conditions, and at-risk infants and toddlers).

## 3 - Indicator Data

**Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i)? (yes/no)**

YES

**Targets: Description of Stakeholder Input**

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

Additional Stakeholder Involvement:

GEIS held 4 sessions targeting parent training called “Family Learning Sessions” and a “Strengthening Families – Parent Café’ that allow them to learn specific strategies to support their child’s expressive language skills. In addition, these sessions provide an opportunity for parents to share their concerns, if any, and to provide feedback to GEIS on how it could improve services and support.

1. On August 26, 2021, GEIS, with technical assistance with Guam CEDDERS, facilitated the GEIS Strengthening Families – Parent Café. The theme of the Parent café, You are Not Alone, provided an opportunity for parents to engage with other parents during Café Conversations to discuss questions related to relationships and support. The overall purpose of the Café was to 1) Provide program updates and supports available; b) Share EI’s plan for in-person home visits; and c) Strengthen families based on the Parent Café theme, You Are Not Alone. There were twelve (12) parents who attended the Parent Café’ along with 6 GEIS staff who were Café Hosts. At the sessions, parents provided feedback on the plan for the in-person home visits and shared how they accessed help to support the needs of their child and family. The Café was a wonderful opportunity for parents to meet other parents, knowing that they are not alone and can access other resources and supports.

2. On November 10, 2021, GEIS with technical support from Guam CEDDERS facilitated the GEIS Family Learning Session with a focus on “Turn Taking.” The purpose of the session is to share proven strategies to respond sensitively to your child’s communication cues so that their child is Heard! The strategy highlighted was “Turn Taking.” Parent reviewed what “Turn Taking” looks like and watched a short snippet of turn taking in action. After the video, participants reviewed the refrigerator list indicating the goal: Turn-taking and dyadic engagement occurs throughout the session, the activity, and the day. After the video, parents shared their experiences and how they encourage turn-taking. Overall, each parent had the opportunity to share and learn from each other. There were 5 parents that attended the session.

3. On March 9, 2022, GEIS staff, with technical assistance with Guam CEDDERS, facilitated the GEIS Family Learning Session: Singing Songs and Rhymes. The purpose of the session is to share proven strategies to respond sensitively to your child’s communication cues so that their child is Heard! The strategy highlighted was “Singing Songs and Rhymes.” The GEIS staff shared what is “Singing Songs and Rhymes” and presented the 10 Ways Babies Learn When We Sing to Them taken from the National Association of the Education of Young Children (NAEYC) Association. These tips include - bonding, transitions, language, new words, rhythm, and rhyme, play, family fun, singing names, listening skills, and love. Afterwards, parents watched a short video entitled: Encouraging your Child to Talk and reviewed the refrigerator list indicating the goal for Singing Songs and Rhymes. At the session, there were 16 parents and 5 GEIS staff who attended this virtual interactive session. In small groups, parents shared their experiences and how they encouraged singing songs and rhymes. Overall, each parent had the opportunity to share and learn from each other. In addition, there was an open session provided for families to share anything they would like to share or questions.

4. On April 27, 2022, GEIS staff, with technical assistance with Guam CEDDERS, facilitated the GEIS Family Learning Session: Reading Books. The purpose of the session is sharing proven strategies to encourage your child to talk through Reading Books. The GEIS staff shared 13 Ways Babies Learn When We Read to Them from the National Association of the Education of Young Children (NAEYC). In addition, parents were asked to watch a video of a parent reading to his child and what it looks like when reading books. Next, the “Refrigerator List” was shared as a reminder of what to do to encourage your child to pay attention when reading a book. Parents were engaged in small group discussions of what they have done to encourage their child to read. This small group interactive activity allowed parents to learn from each other. Overall, each parent had the opportunity to share and learn from each other. There were five (5) parents and 4 GEIS staff who attended this virtual interactive session.

**Will your separate report be just the at-risk infants and toddlers or aggregated performance data on all of the infants and toddlers it serves under Part C?**

At-risk infants and toddlers

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline**  | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A1** | 2020 | Target>= | 65.50% | 68.00% | 70.00% | 66.00% | 36.17% |
| **A1** | 36.17% | Data | 45.45% | 47.92% | 56.86% | 60.38% | 36.17% |
| **A1 AR** |  | Target>= |  | 68.00% | 70.00% |  |  |
| **A1 AR** |  | Data |  | 100.00% | 100.00% |  |  |
| **A2** | 2020 | Target>= | 72.00% | 74.00% | 76.00% | 66.30% | 45.59% |
| **A2** | 45.59% | Data | 59.09% | 55.17% | 56.10% | 55.84% | 45.59% |
| **A2 AR** |  | Target>= |  | 74.00% | 76.00% |  |  |
| **A2 AR** |  | Data |  | 100.00% | 100.00% |  | 100.00% |
| **B1** | 2020 | Target>= | 70.50% | 73.00% | 75.00% | 65.50% | 46.30% |
| **B1** | 46.30% | Data | 55.36% | 45.76% | 58.18% | 60.34% | 46.30% |
| **B1 AR** |  | Target>= |  | 73.00% | 75.00% |  |  |
| **B1 AR** |  | Data |  | 100.00% | 100.00% |  | 0.00% |
| **B2** | 2020 | Target>= | 60.00% | 62.00% | 64.00% | 54.00% | 39.71% |
| **B2** | 39.71% | Data | 50.00% | 44.83% | 48.78% | 42.86% | 39.71% |
| **B2 AR** | 2006 | Target>= |  | 62.00% | 64.00% |  |  |
| **B2 AR** |  | Data |  | 100.00% | 100.00% |  | 87.50% |
| **C1** | 2020 | Target>= | 66.00% | 68.00% | 70.00% | 59.00% | 46.00% |
| **C1** | 46.00% | Data | 48.15% | 36.17% | 50.00% | 55.17% | 46.00% |
| **C1 AR** | 2006 | Target>= |  | 68.00% | 70.00% |  |  |
| **C1 AR** |  | Data |  | 100.00% | 100.00% |  | 0.00% |
| **C2** | 2020 | Target>= | 66.00% | 68.00% | 70.00% | 61.00% | 47.06% |
| **C2** | 47.06% | Data | 56.82% | 54.02% | 50.00% | 55.84% | 47.06% |
| **C2 AR** | 2006 | Target>= |  | 68.00% | 70.00% |  |  |
| **C2 AR** |  | Data |  | 100.00% | 100.00% |  | 87.50% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 40.59% | 45.01% | 49.43% | 53.85% | 58.28% |
| A1 AR |  |  |  |  |  |
| Target A2 >= | 50.25% | 54.32% | 58.29% | 62.26% | 66.50% |
| A2 AR |  |  |  |  |  |
| Target B1 >= | 49.90% | 53.50% | 57.10% | 60.70% | 64.50% |
| B1 AR |  |  |  |  |  |
| Target B2 >= | 43.22% | 45.86% | 48.50% | 51.14% | 53.78% |
| B2 AR |  |  |  |  |  |
| Target C1 >= | 48.52% | 51.04% | 53.56% | 56.08% | 58.62% |
| C1 AR |  |  |  |  |  |
| Target C2 >= | 50.26% | 52.69% | 55.12% | 57.55% | 60.00% |
| C2 AR |  |  |  |  |  |

**FFY 2021 SPP/APR Data**

**Number of infants and toddlers with IFSPs assessed**

48

**Outcome A: Positive social-emotional skills (including social relationships)**

| **Not including at-risk infants and toddlers** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 0 | 0.00% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 17 | 35.42% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 12 | 25.00% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 9 | 18.75% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 10 | 20.83% |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 0 | 0.00% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 0 | 0.00% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 0 | 0.00% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1 | 8.33% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 11 | 91.67% |

| **Not including at-risk infants and toddlers** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 21 | 38 | 36.17% | 40.59% | 55.26% | Met target | No Slippage |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 19 | 48 | 45.59% | 50.25% | 39.58% | Did not meet target | Slippage |

**Provide reasons for A2 slippage, if applicable**

For this reporting period there were 48 infants and toddlers who exited and participated in the outcome measure. There were 19 out of the 48 or 39.58% who reached or maintained age expected skills in the area of positive social-emotional skills by the time they turned 3 years of age or exited the program. This is slippage of 6.01% as compared to FFY 2020 at 45.59%.

Stakeholders recommended that the following drill down data be reviewed to determine possible reasons for slippage: age at entry, service time, disability, and a comparison of frequency of services indicated in the IFSP and the actual number of services received for children for children in category “c”. As indicated in the reporting, category “c” are children who improved functioning to a level nearer to same-aged peers but did not reach age expected skills by the time they exited the program. There were 12 out of the 48 or 25% of children who exited in category “c”.

Age at Entry: Of the 12 children, there were 8 between 12 months and 23 months of age and 4 between 24 and 36 months of age.
Service Time: Five children received less than 11 months of early intervention services, and 7 received 12 to 24 months of services.
Disability: Four had established conditions and 8 were eligible as developmental delay.

Stakeholders discussed that the average age children are enrolled into early intervention is at 2 years of age and received an average of 16.8 months of services. Overall, the data indicates that children are not accessing services in the first year of life. For this reporting period, about half of the staff are new and therefore, professional development is a priority to ensure that providers have adequate to advanced level of confidence and understanding of the evidence-based practices that are used to support the child and family. Stakeholders discussed and agreed to the following improvement strategies:

Frequency: Stakeholders discussed the number of monthly services provided to families and encouraged the team to relook at family needs and increase services if families need more support.

Provider’s Competencies: Stakeholders felt the importance of providing training for the new staff and booster sessions on early childhood coaching, routines-based interview, and embedment of child outcomes into the IFSP process.

Parent Competencies: Stakeholders believed the importance to determine parent knowledge and comfort levels when discussing the use and implementation of strategies Training should focus on helping parents understand how to enhance their child’s overall child development skills and, the IFSP process.

Stakeholders further recommended that the training on strategies be accessible to the family and other members such as siblings and extended family members that spend time caring for the child receiving early intervention services. Such training includes evidence-based practices to enhance language development.

Resources: Stakeholders shared that more online resources would provide families with the supports needed while waiting for the next visit with their service provider. This will include, for example, online Parenting Curriculum (Birth-8 years) training that provides short videos sent to families through weekly emails.

It is important to ensure access to technology equipment (i.e., iPad, MiFi) is made available for families who need it.

| **Just at-risk infants and toddlers/All infants and toddlers** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 1 | 1 |  |  | 100.00% | N/A | N/A |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 12 | 12 | 100.00% |  | 100.00% | N/A | N/A |

**Outcome B: Acquisition and use of knowledge and skills (including early language/communication)**

| **Not including at-risk infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 0 | 0.00% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 16 | 33.33% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 16 | 33.33% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 8 | 16.67% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 8 | 16.67% |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 0 | 0.00% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 0 | 0.00% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 0 | 0.00% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1 | 8.33% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 11 | 91.67% |

| **Not including at-risk infants and toddlers** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 24 | 40 | 46.30% | 49.90% | 60.00% | Met target | No Slippage |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 16 | 48 | 39.71% | 43.22% | 33.33% | Did not meet target | Slippage |

**Provide reasons for B2 slippage, if applicable**

For this reporting period there were 48 infants and toddlers that exited and participated in the outcome measure. Sixteen (16) out of the 48 or 33.33% who reached or maintained age expected skills in the area of acquisition and use of knowledge and skills (including early language/ communication by the time they turned 3 years of age or exited the program. This is a slippage of 5.68% as compared to FFY 2020 at 39.71%.

Stakeholders recommended that the following drill down data be reviewed to determine possible reasons for slippage: age at entry, service time, disability, and a comparison of frequency of services indicated in the IFSP and the actual number of services received for children for children in category “c”. As indicated in the reporting, category “c” are children who improved functioning to a level nearer to same-aged peers but did not reach age expected skills by the time they exited the program. There were 16 out of the 48 or 33.3% of children who exited in category “c”.

Age at Entry: Of the 16 children, there were 7 between 12 months and 23 months of age and 9 between 24 and 36 months of age.
Service Time: Five children received less than 11 months of early intervention services, and 7 received 12 to 24 months of services.
Disability: Thirteen (13) had established conditions and 10 were eligible for developmental delay.

Stakeholders discussed that the average age children are enrolled into early intervention is at 2 years of age and received an average of 16.8 months of services. Overall, the data indicates that children are not accessing services in the first year of life. For this reporting period, about half of the staff are new and therefore, professional development is a priority to ensure that providers have adequate to advanced level of confidence and understanding of the evidence-based practices that are used to support the child and family. Stakeholders discussed and agreed to the following improvement strategies:

Frequency: Stakeholders discussed the number of monthly services provided to families and encouraged the team to relook at family needs and increase services if families need more support.

Provider’s Competencies: Stakeholders felt the importance of providing training for the new staff and booster sessions on early childhood coaching, routines-based interview, and embedment of child outcomes into the IFSP process.

Parent Competencies: Stakeholders believed the importance to determine parent knowledge and comfort levels when discussing the use and implementation of strategies Training should focus on helping parents understand how to enhance their child’s overall child development skills and, the IFSP process.

Stakeholders further recommended that the training on strategies be accessible to the family and other members such as siblings and extended family members that spend time caring for the child receiving early intervention services. Such training includes evidence-based practices to enhance language development.

Resources: Stakeholders shared that more online resources would provide families with the supports needed while waiting for the next visit with their service provider. This will include, for example, online Parenting Curriculum (Birth-8 years) training that provides short videos sent to families through weekly emails.

It is important to ensure access to technology equipment (i.e., iPad, MiFi) is made available for families who need it.

| **Just at-risk infants and toddlers/All infants and toddlers** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 1 | 1 | 0.00% |  | 100.00% | N/A | N/A |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 12 | 12 | 87.50% |  | 100.00% | N/A | N/A |

**Outcome C: Use of appropriate behaviors to meet their needs**

| **Not including at-risk infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 0 | 0.00% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 17 | 35.42% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 10 | 20.83% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 11 | 22.92% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 10 | 20.83% |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 0 | 0.00% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 0 | 0.00% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 0 | 0.00% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1 | 8.33% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 11 | 91.67% |

| **Not including at-risk infants and toddlers** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 21 | 38 | 46.00% | 48.52% | 55.26% | Met target | No Slippage |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 21 | 48 | 47.06% | 50.26% | 43.75% | Did not meet target | Slippage |

**Provide reasons for C2 slippage, if applicable**

For this reporting period there were 48 infants and toddlers that exited and participated in the outcome measure. Sixteen (16) out of the 48 or 43.75% who reached or maintained age expected skills in the area of use of appropriate behaviors to meet their needs by the time they turned 3 years of age or exited the program. This is a slippage of 3.31% as compared to FFY 2020 at 47.06%.

Stakeholders recommended that the following drill down data be reviewed to determine possible reasons for slippage: age at entry, service time, disability, and a comparison of frequency of services indicated in the IFSP and the actual number of services received for children for children in category “c”. As indicated in the reporting, category “c” are children who improved functioning to a level nearer to same-aged peers but did not reach age expected skills by the time they exited the program. There were 10 out of the 48 or 20.8% of children who exited in category “c”.

Age at Entry: Of the 10 children, there were 6 between 12 months and 23 months of age and 4 between 24 and 36 months of age.
Service Time: Five children received less than 11 months of early intervention services, and 5 received 12 to 24 months of services.
Disability: Three (3) had established conditions and 7 were eligible as developmental delay.

Stakeholders discussed that the average age children are enrolled into early intervention is at 2 years of age and received an average of 16.8 months of services. Overall, the data indicates that children are not accessing services in the first year of life. For this reporting period, about half of the staff are new and therefore, professional development is a priority to ensure that providers have adequate to advanced level of confidence and understanding of the evidence-based practices that are used to support the child and family. Stakeholders discussed and agreed to the following improvement strategies:

Frequency: Stakeholders discussed the number of monthly services provided to families and encouraged the team to relook at family needs and increase services if families need more support.

Provider’s Competencies: Stakeholders felt the importance of providing training for the new staff and booster sessions on early childhood coaching, routines-based interview, and embedment of child outcomes into the IFSP process.

Parent Competencies: Stakeholders believed the importance to determine parent knowledge and comfort levels when discussing the use and implementation of strategies Training should focus on helping parents understand how to enhance their child’s overall child development skills and, the IFSP process.

Stakeholders further recommended that the training on strategies be accessible to the family and other members such as siblings and extended family members that spend time caring for the child receiving early intervention services. Such training includes evidence-based practices to enhance language development.

Resources: Stakeholders shared that more online resources would provide families with the supports needed while waiting for the next visit with their service provider. This will include, for example, online Parenting Curriculum (Birth-8 years) training that provides short videos sent to families through weekly emails.

It is important to ensure access to technology equipment (i.e., iPad, MiFi) is made available for families who need it.

| **Just at-risk infants and toddlers/All infants and toddlers** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 1 | 1 | 0.00% |  | 100.00% | N/A | N/A |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 12 | 12 | 87.50% |  | 100.00% | N/A | N/A |

**The number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program**.

| **Question** | **Number** |
| --- | --- |
| The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting 618 data | 96 |
| The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program. | 15 |

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |

**Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)**

YES

**List the instruments and procedures used to gather data for this indicator.**

The Guam Early Intervention System uses multiple sources of information to determine the status of the early childhood outcomes. Most of the information is collected as part of the development of the child's IFSP; therefore, collecting child assessment information is part of the IFSP development process and not an added step.

The following information is considered in determining a child's status relating to the three early childhood outcomes:

The summary information for child outcomes is expected to take into account the child's functioning in his or her natural environment. Information from the family and service providers in contact with the child is considered in deciding the rating for each outcome.

Various ortypes of information are used in determining the child's status relative to the child outcomes. These may include, but not be limited to: parent input or observation; Service Provider input/observation; Hawaii Early Learning Profile (HELP); the Guam Early Learning
Guidelines; the Developmental Assessment of Young Children – 2nd Edition (DAYC-2) and from related service providers.

Information about each outcome is reflected in the child's IFSP present levels of functional performance across typical settings and situations that make up his or her daily routines.

Infants and toddlers exiting with less than 6 months of service did not participate in exit surveys. Exit data is collected just prior to exiting the program.

**Provide additional information about this indicator (optional).**

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of families participating in Part C who report that early intervention services have helped the family:

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

State selected data source. State must describe the data source in the SPP/APR.

**Measurement**

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs) divided by the (# of respondent families participating in Part C)] times 100.

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

**Instructions**

*Sampling of****families participating in Part C****is allowed.* *When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions page 2 for additional instructions on sampling.)*

Provide the actual numbers used in the calculation.

Describe the results of the calculations and compare the results to the target.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of families to whom the surveys were distributed and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

States will be required to compare the current year’s response rate to the previous year(s) response rate(s), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of families that received Part C services.

Include the State’s analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers receiving services in the Part C program. States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State.

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group)

If the analysis shows that the demographics of the infants or toddlers for whom families responded are not representative of the demographics of infants and toddlers receiving services in the Part C program, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to families (e.g., by mail, by e-mail, on-line, by telephone, in-person), if a survey was used, and how responses were collected.

Beginning with the FFY 2022 SPP/APR, due February 1, 2024, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race and ethnicity in its analysis. In addition, the State’s analysis must also include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another demographic category approved through the stakeholder input process.

States are encouraged to work in collaboration with their OSEP-funded parent centers in collecting data.

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2005 | Target>= | 95.70% | 96.00% | 96.50% | 98.00% | 88.20% |
| A | 91.00% | Data | 96.83% | 100.00% | 94.87% | 100.00% | 88.24% |
| B | 2005 | Target>= | 91.00% | 92.00% | 94.00% | 98.00% | 94.10% |
| B | ###C04BBASEDATA### | Data | 98.41% | 97.56% | 97.44% | 90.91% | 94.12% |
| C | 2005 | Target>= | 96.00% | 97.00% | 97.00% | 100.00% | 94.10% |
| C | 79.00% | Data | 98.41% | 100.00% | 100.00% | 95.45% | 94.12% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 89.00% | 90.00% | 91.00% | 92.00% | 93.00% |
| Target B>= | 94.60% | 95.10% | 95.60% | 96.10% | 96.60% |
| Target C>= | 94.60% | 95.10% | 95.60% | 96.10% | 96.60% |

**Targets: Description of Stakeholder Input**

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 108 |
| Number of respondent families participating in Part C  | 34 |
| Survey Response Rate | 31.48% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 34 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 34 |
| B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs | 33 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 34 |
| C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn | 34 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 34 |

| **Measure** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- |
| A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2) | 88.24% | 89.00% | 100.00% | Met target | No Slippage |
| B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2) | 94.12% | 94.60% | 97.06% | Met target | No Slippage |
| C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2) | 94.12% | 94.60% | 100.00% | Met target | No Slippage |

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |

| **Question** | **Yes / No** |
| --- | --- |
| Was a collection tool used? | YES |
| If yes, is it a new or revised collection tool?  | NO |
| The demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. | YES |

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Survey Response Rate | 17.00% | 31.48% |

**Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.**

GEIS will assess different options that will support the dissemination and completion of the surveys by revising the standard operating procedure for disseminating, collecting, and reporting. GEIS implemented three (3) levels of attempts: Level 1: Service Coordinators were to connect with parents via phone or email to complete the survey; Level 2: Service Coordinators were to have parent complete the survey during a regular scheduled home visit in the month of May; and Level 3: Program Coordinator and administrative support staff made phone contacts with parent encouraging to complete the survey.

The GEIS Core Data Team reviewed the reasons why there was a low number of respondents for levels 3 and 4 attempts, and agreed that the Program Coordinator shall monitor and conduct individual follow up with service coordinators and service providers. In addition, additional guidance will be provided to all staff regarding this procedure.

**Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of families that received Part C services.**

Throughout the reporting period, GEIS disseminated 108 surveys to parents of infants and toddlers receiving services for a minimum of 6 months. Surveys were disseminated to parents via service coordinators who met their parents at a home visit, either in-person or virtual. In addition, the survey was distributed using various modes such as hard copies, digital, and through phone interviews with service coordinators or GEIS administrative staff.

Out of the 108 surveys disseminated, 34 or 31.48% (34/108) completed the survey. This is an increase in respondents from the last reporting period, which was 17% (17/100) in FFY 2020. Throughout the reporting period, GEIS continued to monitor closely the levels of attempts standard operating procedures in the dissemination and completion of the surveys, as described in the Strategies section above.

Based on a review of geographic location, the respondents represented a majority of the villages where the majority of infants and toddlers served reside. The 34 respondents were from the different regions of the island: 41.18% or 14/34 were families in the central part of Guam; 47.06% or 16/34 from the northern villages; and 11.76% or 4/34 were from families living in the southern villages.

Based on the dissemination process throughout the year and the geographic location of respondents, GEIS did not identify any nonresponse bias. The level of attempts standard operating procedures, described in the Strategies section above, will continue to be used in subsequent years for completing the family survey.

**Include the State’s analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program.** **States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State.**

GEIS conducted an analysis of the demographics to determine whether the FFY 2021 survey response group was representative of the population served. All families receiving early intervention services for a minimum of 6 months were provided the survey. The survey was distributed using various modes such as hard copies, digital and through phone interviews.

A review by ethnicity revealed that the 34 respondents were representative of the ethnic groups of the target population of infants/toddlers receiving GEIS services when examining the breakdown by OSEP’s ethnicity categories. The Pacific Islander, Asian, Two or More, and White ethnicity categories were reported for the target population. These four ethnicity categories were represented in the 34 respondents. The comparison data included:

Pacific Islander = Target = 65.74% (71/108); Respondents = 61.76% (21/34)
Asian = Target = 25% (27/108); Respondents = 20.59% (7/34)
Two or More = Target = 8.33% (9/108); Respondents = 14.71% (5/34)
White = Target = 0.93% (1/108); 2.94% (1/34)

A review of geographic location also indicated that the 34 respondents were representative of the geographic location of the infants/toddlers receiving GEIS services, the target population. The geographic location reviewed was the region of the island in which the infants/toddlers reside: Northern, Central, Southern, or Other/Unknown. The comparison data included:

Northern region = Target = 39.81% (43/108); Respondents = 47.06% (16/34)
Central region = Target = 39.81% (43/108); Respondents = 41.18% (14/34)
Southern region = Target = 18.52% (20/108); Respondents = 11.76% (4/34)
Other/Unknown = Target = 1.85% (2/108); Respondents = 0% (0/34)

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy, age of the infant or toddler, and geographic location in the proportion of responders compared to target group).**

The metric used to determine representativeness was the ECTA Center representativeness calculation. The calculator uses an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon the 90% confidence intervals for each indicator (significance level = .10). The ECTA Center calculator is excel-based that automatically indicates whether the difference between the target population data and the respondent data is statistically significant. For both the ethnicity and geographic location data, the ECTA Center calculator indicated that the respondent data were representative of the target population.

It should be noted that the ECTA Center excel-based calculator indicated a caution in using the calculator for determining representativeness for small cell sizes in subgroups less than 35.

**Provide additional information about this indicator (optional).**

## 4 - Prior FFY Required Actions

None

## 4 - OSEP Response

## 4 - Required Actions

# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the E*DFacts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

**Measurement**

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100.

**Instructions**

*Sampling from the State’s 618 data is not allowed.*

Describe the results of the calculations.The data reported in this indicator should be consistent with the State’s reported 618 data reported in Table 1. If not, explain why.

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.13% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 1.40% | 1.50% | 1.55% | 1.31% | 0.95% |
| Data | 0.99% | 0.86% | 1.13% | 0.86% | 0.96% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 1.00% | 1.05% | 1.10% | 1.13% | 1.15% |

Targets: Description of Stakeholder Input

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

Additional Stakeholder Input:

GEIS gathered input from providers through the implementation of a Continuous Quality Improvement (CQI) Team with an Aim Statement - to decrease the number of refusal rates when a child is initially referred for early intervention services. The CQI Team reviewed the reasons for the refusals and agreed to develop a “Referral Protocol” that uses a flow chart to display how Service Coordinators will discuss the referral process with parents, ask parents about any concerns, resources needed, and the importance of developmental screening. In addition, the CQI Team developed a mechanism to capture the data referral protocol data. The CQI Teams met monthly (March 1st, April 4th and June 8, 2022)
 to review referral data and address reasons children are exiting the program. Based on the findings and input from the CQI Team, the following action steps were initiated:

• Training on interim IFSP with GEIS staff and to implement this process and encourage families with newborns who are in the hospital to access GEIS services early on.
• Review and update GEIS procedures for documenting why children exit the program.
• Increase public awareness activities and training with primary referral sources on the 4-key steps for early identification.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 1 with IFSPs | 5 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 1 | 2,917 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 5 | 2,917 | 0.96% | 1.00% | 0.17% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

For this reporting period, GEIS did not meet the target of 1%, reporting a performance of .17% or 5 out of 2917 estimated births from the 2010 Guam Census. In compared to last reporting, this is a slippage of .79% from FFY 2020 performance of .96%

The Program has in place a Continuous Quality Improvement (CQI) Team with an aim to increase the number of children served in Part C. In May and July 2022, the CQI Team reviewed referral data for this reporting period on the number of referrals, referral sources, and the actions taken. Of the 91 referrals received as of May 2022, 39 referrals had specific actions completed to include the following: 8 not eligible, 5 moved, 22 passed screener, 3 deceased, and 1 referred to Part B. Of the remaining 52 out of the 91, there were 27 whose parents did not respond to having their child screened, 3 children could not be located, and 22 parents refused services.

The CQI Team further drilled down data to review the reasons why 22 parents refused services: 4 indicated they wanted to wait because their newborn was still in the hospital; 3 indicated “no concerns” (with 1 documented “at risk” on the screener); 1 was unsure what to do; 1 parent indicated busy, 3 refused with no comments noted, 3 documentations unclear for reasons, and 7 with no documentation noted. Based on the data shared the CQI Team agreed to the following action steps: 1) Training on implementing the Interim IFSP process for families of infants in the hospital as an option for services to begin while in the hospital; 2) Review referral protocol to include documenting that screening are offered and encouraged to be completed prior to refusing services; and 3) To review the procedures for -- no response from parents and families that cannot be located.

Based on data on the referral sources, there were 15 identified referral sources: Parents, Health Facilities (private clinics), Hospitals, Department of Public Health and Social Services with the most referrals and least referrals coming from child care centers, and Child Protective services (CPS).

Information from the CQI Team was presented to the stakeholders at the input sessions and the stakeholders recommended the following improvement strategies:

• Training for CPS, Child Care providers, and health care providers on the 4-Key Steps for Early Identification as part of the CDC Learn the Signs. Act Early that is embedded in GEIS referral process.
• To conduct outreach fairs and events in collaboration with other early childhood serving agencies to share information on ---1) the importance of the early years, 2) developmental monitoring/ surveillance, 3) developmental screening, and 4) the programs to increase the public awareness about GEIS and other early childhood programs that serve children birth to age 3 and their families.
• To increase use of social media such as the GEIS website, the Neni 311 Warmline; Guam Early Learning Council Facebook, and the Village Mayors Office to share information about the programs.

**Provide additional information about this indicator (optional)**

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

**Measurement**

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100.

**Instructions**

*Sampling from the State’s 618 data is not allowed.*

Describe the results of the calculations . The data reported in this indicator should be consistent with the State’s reported 618 data reported in Table 1. If not, explain why.

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.56% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 1.95% | 2.00% | 2.03% | 2.03% | 1.61% |
| Data | 1.66% | 1.31% | 1.65% | 1.81% | 1.62% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 1.61% | 1.63% | 1.63% | 1.65% | 1.65% |

Targets: Description of Stakeholder Input

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

Additional Stakeholder Input:

GEIS gathered input from providers through the implementation of a Continuous Quality Improvement (CQI) Team with an Aim Statement - to decrease the number of refusal rates when a child is initially referred for early intervention services. The CQI Team reviewed the reasons for the refusals and agreed to develop a “Referral Protocol” that uses a flow chart to display how Service Coordinators will discuss the referral process with parents, ask parents about any concerns, resources needed, and the importance of developmental screening. In addition, the CQI Team developed a mechanism to capture the data referral protocol data. The CQI Team meets bi-monthly to review referral data and address reasons children are exiting the program. Based on the findings and input from the CQI Team, following action steps were initiated:

• Training on interim IFSP with GEIS staff and to implement this process and encourage families with newborns who are in the hospital to access GEIS services early on.
• Review and update GEIS procedures for documenting why children exit the program.
• Increase public awareness activities and training with primary referral sources on the 4-key steps for early identification.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 3 with IFSPs | 108 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 3 | 8,690 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 108 | 8,690 | 1.62% | 1.61% | 1.24% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

For this reporting period, GEIS did not meet the target of 1.61%, reporting a performance of 1.24% or 108 out of 8690. When compared to last reporting, there is a slippage of .38% from FFY 2020 performance of 1.62%

The Program has in place a Continuous Quality Improvement (CQI) Team with an aim to increase the number of children served in Part C. In May and July 2022, the CQI Team reviewed referral data for this reporting period on the number of referrals, referral sources, and the actions taken. Of the 91 referrals received as of May 2022, 39 referrals had specific actions completed to include the following: 8 not eligible, 5 moved, 22 passed screener, 3 deceased, and 1 referred to Part B. Of the remaining 52 out of the 91, there were 27 whose parents did not respond to having their child screened, 3 children could not be located, and 22 parents refused services.

The CQI Team further drilled down data to review the reasons why 22 parents refused services: 4 indicated they wanted to wait because their newborn was still in the hospital; 3 indicated “no concerns” (with 1 documented “at risk” on the screener); 1 unsure what to do; 1 parent indicated busy, 3 refused with no comments noted, 3 documentations unclear for reasons, and 7 with no documentation noted. Based on the data shared the CQI Team agreed to the following action steps: 1) Training on implementing the Interim IFSP process for families of infants in the hospital as an option for services to begin while in the hospital; 2) Review referral protocol to include documenting that screening are offered and encouraged to be completed prior to refusing services; and 3) To review the procedures for -- no response from parents and families that cannot be located.

Based on data on the referral sources, there were 15 identified referral sources: Parents, Health Facilities (private clinics), Hospitals, Department of Public Health and Social Services with the most referrals and least referrals coming from child care centers, and Child Protective services (CPS).

Information from the CQI Team was presented to the stakeholders at the input sessions and the stakeholders recommended the following improvement strategies:

• Training for CPS, Child Care providers, and health care providers on the 4-Key Steps for Early Identification as part of the CDC Learn the Signs. Act Early that is embedded in GEIS referral process.
• To conduct outreach fairs and events in collaboration with other early childhood serving agencies to share information on ---1) the importance of the early years, 2) developmental monitoring/ surveillance, 3) developmental screening, and 4) the programs to increase the public awareness about GEIS and other early childhood programs that serve children birth to age 3 and their families.
• To increase use of social media such as the GEIS website, the Neni 311 Warmline; Guam Early Learning Council Facebook, and the Village Mayors Office to share information about the programs.

**Provide additional information about this indicator (optional).**

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 6 - Required Actions

# Indicator 7: 45-Day Timeline

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Compliance indicator:** Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must address the timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

**Measurement**

Percent = [(# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

**Instructions**

*If data are from State monitoring, describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.*

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide actual numbers used in the calculation.

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 7 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 70.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 98.08% | 97.41% | 96.90% | 97.98% | 94.90% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

| **Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline** | **Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 24 | 151 | 94.90% | 100% | 72.85% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable.**

Of the 151 infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted within the 45-day timeline, 86 were delayed to to family exceptional circumstances (50 families cancelled session/meetings, 14 families requested to hold services to a later date, one family requested to wait while their baby is pending release from the hospital, 8 families were a no show for scheduled meetings, one family were not at the address on record, and 11 families did not respond to phone calls, written notifications, and one family at the time refused early intervention services) and there were 24 were conducted timely.

The remaining 41 eligible infants that did not have their initial IFSP conducted after the 45 day timeline due to program delays were for the following reasons: 1) Due to the lack of personnel, the Team was unable to schedule for an evaluation for 40 children; and 2) One child was caused by the Service Coordinator oversite in scheduling.

Guam did not meet the 100% compliance for this indicator and reported 72.85% (110/151) for this compliance indicator.

All GEIS Service Coordinators staff met with their IFSP teams monthly to discuss the status of cases. Printouts of cases, which indicate the 45-day “flag” date, are provided to service coordinators monthly so that SCs are alerted to the timeline requirement. Service Coordinators and service providers are required to submit all contact logs of cases to the data office at the end of the month to provide documentation of their efforts in their work with families, to include, strategies and action plans are discussed with staff in working with families as early as possible so that evaluations and IFSPs can be conducted within the required timeline. In addition, the Part C Program Coordinator will work with the staff and develop a continuous quality improvement (CQI) process to address the challenges in ensuring services are done timely.

The Program Coordinator will continue to look at the CQI process to help with program improvement strategies for this requirement and identifying where technical assistance is needed. Results are also reviewed during GEIS staff meetings to discuss strategies and action plans to ensure the program meets compliance.

The Program Coordinator will continue to review reports monthly and verify data via monthly staffing and, when necessary, conduct a file review to track progress or slippage. Results of the monthly reports are reviewed by the Program Coordinator with the service coordinator or the service provider and strategies and action plans are developed to ensure the program meets compliance.

**Number of documented delays attributable to exceptional family circumstances**

**This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.**

86

**Provide reasons for delay, if applicable.**

There are 86 that were delayed to to family exceptional circumstances: 50 families cancelled session/meetings, 14 families requested to hold services to a later date, 1 family requested to wait while their baby is pending release from the hospital, 8 families were a no show for scheduled meetings, one family were not at the address on record, and 11 families did not respond to phone calls, written notifications, and one family at the time refused early intervention services).

**What is the source of the data provided for this indicator?**

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

Guam Part C is reporting data for indicator 7 collected from July 1, 2021 to June 30, 2022.

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

Though our verification process, there were 151 infants and toddlers to be evaluated and assessed for whom an initial IFSP meeting was required to be conducted within the 45-day timeline with in this reporting period. Eighty-six (86) were delayed due to family exceptional circumstances (50 families cancelled session/meetings, 14 families requested to hold services to a later date, 1 family requested to wait while their baby is pending release from the hospital, 8 families were a no show for scheduled meetings, 1 family were not at the address on record, and 11 families did not respond to phone calls, written notifications, and one family at the time refused early intervention services) and there were 24 were conducted timely.

Due to program delay, the remaining 41 eligible infants had their initial IFSP conducted after the 45 day timeline due to the following reasons: 1) Because of the lack of personnel, the Team was unable to schedule for an evaluation for 40 children; and 2) One child was caused by the Service Coordinator oversite in scheduling.

Guam did not meet the 100% compliance for this indicator and reported 72.85% (110/151) for this compliance indicator.

All GEIS Service Coordinators staff met with their IFSP teams monthly to discuss the status of cases. Printouts of cases, which indicate the 45-day “flag” date, are provided to service coordinators monthly so that SCs are alerted to the timeline requirement. Service Coordinators and service providers are required to submit all contact logs of cases to the data office at the end of the month to provide documentation of their efforts in their work with families, to include, strategies and action plans are discussed with staff in working with families as early as possible so that evaluations and IFSPs can be conducted within the required timeline.

**Provide additional information about this indicator (optional).**

During the pandemic, GEIS lost 6 out of 10 primary service providers in the program: one re-located off-island, three were assigned to DPHSS to support with the COVID-19 quarantine process and the COVID hotline, one resigned, and one transferred to work in a classroom. In addition, families were still uncomfortable with have visits made by our GEIS staff, which resulted in numerous cancellations of meetings/sessions. GEIS had five of the six positions filled as of October 2021.

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 |  |  | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 7 - Prior FFY Required Actions

Because Guam reported less than 100% compliance for FFY 2020, Guam must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2021 SPP/APR, that it has verified the correction of noncompliance identified in FFY 2020 for this indicator. Specifically, Guam must report that it: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within its jurisdiction, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, Guam must describe the specific actions that were taken to verify the correction.

If Guam did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

The GDOE Compliance Monitoring Office (CMO) did not issue a written notification of findings of the noncompliance reported in the FFY 2020 APR Indicator 7 substantial compliance data of 94.90% (93/98). As reported in the FFY 2020 APR, the five instances of noncompliance were completed over timeline within the reporting period. At the time of the annual review, CMO conducted a pre-finding review of the FFY 2020 APR Indicator 7 data. CMO verified through the program data report that the five reported individual instances of noncompliance in the FFY 2020 APR data were corrected over timeline. In addition, the program data report included additional data within the FFY 2020 reporting year and after the reported individual instances of noncompliance demonstrating 100% compliance with Indicator 7 requirements, which indicated that GEIS was correctly implementing the specific regulatory requirements for Indicator 7. CMO determined that this pre-finding annual review of FFY 2020 Indicator 7 data met the two-prong verified correction requirement, consistent with OSEP Memo 09-02 and Item #4 in OSEP’s September 3, 2008 FAQs. CMO therefore did not issue a written notification of findings of noncompliance for the FFY 2020 APR Indicator 7 noncompliance data.

The CMO conducted their off-site monitoring for Indicator 7 compliance the following year in FFY 2021. The off-site monitoring included a review of the program data report for Indicator 7 from July 1, 2021– March 8, 2022. A Written Notice of Finding of Noncompliance for Indicator 7 was issued to the GEIS in March 2022. Verified correction, including individual instances of noncompliance and demonstration of subsequent data at 100% compliance, for the Indicator 7 noncompliance written finding will be reported in the FFY 2022 APR.

## 7 - OSEP Response

## 7 - Required Actions

Because Guam reported less than 100% compliance for FFY 2021, Guam must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2022 SPP/APR, that it has verified the correction of noncompliance identified in FFY 2021 for this indicator and is: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within its jurisdiction, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, Guam must describe the specific actions that were taken to verify the correction.

If Guam did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2021.

# Indicator 8A: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Effective Transition

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 89.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 98.68% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

**Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday. (yes/no)**

YES

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 70 | 80 | 100.00% | 100% | 100.00% | Met target | No Slippage |

**Number of documented delays attributable to exceptional family circumstances**
**This number will be added to the “Number of children exiting Part C who have an IFSP with transition steps and services” field to calculate the numerator for this indicator.**

10

**Provide reasons for delay, if applicable.**

**What is the source of the data provided for this indicator?**

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

Guam Part C is reporting data for indicator 8A collected from July 1, 2021 to June 30, 2022

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

Data for Indicator 8A, reports the percent of children “who received services and exited at the transition planning age” with timely planning to support the child's transition to preschool and other appropriate community service by their 3rd birthday. Data accuracy included verification of data for the reporting period with the 618 reported exit data to determine that it accurately reflects data for infants and toddlers with IFSPs for the full report period. Based on the data report obtained from documentation submitted by the service coordinators, 100% (70/70) of the children had written documentation of completion of a IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday. This data report was consistent with the 618 reported exit data of children with IFSPs.

**Provide additional information about this indicator (optional)**

There was a total of eighty (80) toddlers with disabilities exiting Part C who were at transition age at when exiting GEIS. Of these, seventy (70) had timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday.

Ten (10) were greater than 33 months of age at their Initial IFSP and are not counted in the measurement.

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8A - Prior FFY Required Actions

None

## 8A - OSEP Response

## 8A - Required Actions

# Indicator 8B: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Effective Transition

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

**Data include notification to both the SEA and LEA**

YES

| **Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 50 | 50 | 100.00% | 100% | 100.00% | Met target | No Slippage |

**Number of parents who opted out**

**This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.**

0

**Provide reasons for delay, if applicable.**

**Describe the method used to collect these data.**

The Department of Education (DOE) is the State Education Agency, and Lead Agency responsible for administration of Part C and Part B 619 Preschool. There was evidence that the LEA representative through the Part B Preschool Program was notified of the potential Part B eligibility for all children who received GEIS services and were referred to Part B for potential eligibility. A referral is submitted to Part B to notify the program of a child who may be potentially eligible for Part B services. The GEIS Service Coordinator is responsible for submitting the referral and written documentation to the data clerk indicating the date of notification to the Part B program. A report is then generated monthly indicating dates of notification. The GEIS Program Coordinator reviews reports monthly and verifies data via monthly staffing and, when necessary, file review. Data for Indicator 8B, reports the percent of children exiting GEIS where notification to the SEA and LEA occurred within the required Part C regulation timeline for children potentially eligible for Part B preschool services. Data compiled included verification of data for the reporting period and not submitted 618 data. Based on the data report obtained from documentation submitted by the service coordinators, 100% (50/50) of the children who received GEIS services and were referred to the LEA (Part B) for potential Part B eligibility.

**Do you have a written opt-out policy? (yes/no)**

NO

**What is the source of the data provided for this indicator?**

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

Guam Part C is reporting data for Indicator 8B collected from July 1, 2021 to June 30, 2022

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

The LEA representative through the Part B Preschool Program was notified of toddlers receiving services under the GEIS program for 100% (50/50) of the children who received GEIS services and were referred to Part B for potential Part B eligibility.

The GEIS does not have an opt-out option for families.

The GEIS Program Coordinator reviews reports monthly and verifies data via monthly staffing and, when necessary, file review. This is useful in tracking progress or slippage. Results assist the program with program improvement strategies for this requirement and identifying where technical assistance is needed.

**Provide additional information about this indicator (optional).**

There were ten (10) children who were not counted in the percentage of children timely transition planning due the their age at the time of the initial IFSP: which were greater than 33 month of age

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

## 8B - Required Actions

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Effective Transition

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8C - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 70.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 93.65% | 97.50% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

**Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services. (yes/no)**

YES

| **Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 37 | 50 | 97.50% | 100% | 96.00% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Two (2) children did not receive timely transition conference due to a Program Delay : One child had a transition conference at 34 months of age (fifteen days late). One child had a transition conference at 34 months, (twenty days late) .This was due to the shortage of service providers available to meet the scheduled time.

**Number of toddlers for whom the parent did not provide approval for the transition conference**

**This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.**

0

**Number of documented delays attributable to exceptional family circumstances**

**This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.**

11

**Provide reasons for delay, if applicable.**

Based on data, eleven (11) were delayed but completed that were attributable to exceptional family circumstances, (two families were late in responding to calls or meeting notices, three requested to hold off on scheduling meetings and six cancelled scheduled meetings).

There were two (2) not done timely due to program delay; one was due to the shortage of staff when scheduling with available teams, and one was due to the late scheduling of the transition conference meeting by the service coordinator.

There were thirty-seven (37) who had their timely transition conference at least 90 days prior to their third birthday

**What is the source of the data provided for this indicator?**

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

Guam Part C is reporting data for indicator 8C collected from July 2021 to June 30 2022

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

There were a total of 60 children with notifications to the LEA. Of the sixty children, ten (10) children were not counted since they were >33 months of age at the Initial IFSP.
Of the remaining fifty children: there were thirty-seven (37) children who had their transition conference timely, and eleven (11) children with documented delays attributable to exceptional circumstances.
There were two (2) not done timely due to program delay; this was due the shortage of staff and the scheduling with available service providers.

The GEIS Service Coordinator is responsible for submitting the referral and written documentation to the GEIS data clerk indicating the date of notification to the Part B program. A report is then generated monthly indicating dates of notification. The GEIS Program Coordinator reviews reports monthly and verifies data via monthly staffing and, when necessary, file review.

**Provide additional information about this indicator (optional).**

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 |  |  | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8C - Prior FFY Required Actions

Because Guam reported less than 100% compliance for FFY 2020, Guam must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2021 SPP/APR, that it has verified the correction of noncompliance identified in FFY 2020 for this indicator. Specifically, Guam must report that it: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within its jurisdiction, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, Guam must describe the specific actions that were taken to verify the correction.

If Guam did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

The GDOE Compliance Monitoring Office (CMO) did not issue a written notification of findings of the noncompliance reported in the FFY 2020 APR Indicator 8C substantial compliance data of 97.50% (39/40). As reported in the FFY 2020 APR, the one instance of noncompliance was completed over timeline by 15 days within the reporting period. At the time of the annual review, CMO conducted a pre-finding review of the FFY 2020 APR Indicator 8C data. CMO verified through the program data report that the one reported individual instance of noncompliance in the FFY 2020 APR data was corrected over timeline by 15 days. In addition, the program data report included additional data within the FFY 2020 reporting year and after the reported individual instances of noncompliance demonstrating 100% compliance with Indicator 8C requirements, which indicated that GEIS was correctly implementing the specific regulatory requirements for Indicator 8C. CMO determined that this pre-finding annual review of FFY 2020 Indicator 8C data met the two-prong verified correction requirement, consistent with OSEP Memo 09-02 and Item #4 in OSEP’s September 3, 2008 FAQs. CMO therefore did not issue a written notification of findings of noncompliance for the FFY 2020 APR Indicator 8C noncompliance data.

The CMO conducted their off-site monitoring for Indicator 8C compliance the following year in FFY 2021. The off-site monitoring included a review of the program data report for Indicator 8C from July 1, 2021– March 8, 2022. A Written Notice of Finding of Noncompliance for 8C was issued to the GEIS in March 2022. Verified correction, including correction of individual instances and demonstration of subsequent data at 100% compliance, for the Indicator 8C noncompliance written finding will be reported in the FFY 2022 APR.

## 8C - OSEP Response

## 8C - Required Actions

Because Guam reported less than 100% compliance for FFY 2021, Guam must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2022 SPP/APR, that it has verified the correction of noncompliance identified in FFY 2021 for this indicator and is: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within its jurisdiction, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, Guam must describe the specific actions that were taken to verify the correction.

If Guam did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2021.

# Indicator 9: Resolution Sessions

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

**Results indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures under section 615 of the IDEA are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (3.1(a) divided by 3.1) times 100.

**Instructions**

Sampling from the State’s 618 data is not allowed.

This indicator is not applicable to a State that has adopted Part C due process procedures under section 639 of the IDEA.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s 618 data, explain.

States are not required to report data at the EIS program level.

## 9 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Select yes to use target ranges.**

Target Range not used

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 0 |

**Targets: Description of Stakeholder Input**

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

An invitation to the Guam Part C- Guam Early Intervention System (GEIS) Stake Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to stakeholders to participate in order to attain input on the development of Guam’s FFY 2020 SPP/APR. This was given to all Guam Interagency Coordinating Council (GICC) members, Preschool Development Grant birth-5 (PDG) leadership and workgroups, and parents of children in the GEIS, and the GICC members. The GICC members consist of parents, representatives of various agencies, and other programs identified by the council. GEIS - reported on program progress and/or slippage of its performance to our stakeholders who are service providers, who are members of the GICC, the Guam Early Learning Council (ELC), the State Systemic Improvement Plan (SSIP) Core Leadership team, and other parents during Parent Input sessions.
The Program shared that here were NO hearing requests that went to resolution sessions during this reporting period.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= |  |  |  |  |  |

**FFY 2021 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  |  |  | N/A | N/A |

**Provide additional information about this indicator (optional)**

As per OSEP, Guam is not required to provide target until any fiscal year in which ten or more resolution sessions were held. There were not hearing requests that went to resolution sessions during this reporting period. There were no hearing requests that went to resolution sessions during this reporting period. Guam Part C follows the Guam Part B due process hearing procedures

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

Guam reported fewer than ten resolution sessions held in FFY 2021. Guam is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

**Results indicator:** Percent of mediations held that resulted in mediation agreements. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

**Instructions**

Sampling from the State’s 618 data is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR.

The consensus among mediation practitioners is that 75-85% is a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data. States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s 618 data, explain.

States are not required to report data at the EIS program level.

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

An invitation to the Guam Part C- Guam Early Intervention System (GEIS) Stake Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to stakeholders to participate in order to attain input on the development of Guam’s FFY 2020 SPP/APR. This was given to all Guam Interagency Coordinating Council (GICC) members, Preschool Development Grant birth-5 (PDG) leadership and workgroups, and parents of children in the GEIS, and the GICC members. The GICC members consist of parents, representatives of various agencies, and other programs identified by the council. GEIS - reported on program progress and/or slippage of its performance to our stakeholders who are service providers, who are members of the GICC, the Guam Early Learning Council (ELC), the State Systemic Improvement Plan (SSIP) Core Leadership team, and other parents during Parent Input sessions.
The Program shared that here were NO hearing requests that went to resolution sessions during this reporting period.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= |  |  |  |  |  |

**FFY 2021 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  |  |  | N/A | N/A |

**Provide additional information about this indicator (optional)**

As per OSEP, Guam is not required to provide target until any fiscal year in which ten or more resolution sessions were held. There were not hearing requests that went to resolution sessions during this reporting period. There were no hearing requests that went to resolution sessions during this reporting period. Guam Part C follows the Guam Part B due process hearing procedures

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

Guam reported fewer than ten mediations held in FFY 2021. Guam is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 10 - Required Actions

# Indicator 11: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

**Measurement**

The State’s SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for infants and toddlers with disabilities and their families. The SSIP includes each of the components described below.

**Instructions**

***Baseline Data:*** The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

***Targets:*** In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

***Updated Data:*** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for infants and toddlers with disabilities and their families by improving early intervention services. Stakeholders, including parents of infants and toddlers with disabilities, early intervention service (EIS) programs and providers, the State Interagency Coordinating Council, and others, are critical participants in improving results for infants and toddlers with disabilities and their families and must be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State’s targets under Indicator 11. The SSIP should include information about stakeholder involvement in all three phases.

*Phase I: Analysis*:

- Data Analysis;

- Analysis of State Infrastructure to Support Improvement and Build Capacity;

- State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

*Phase II: Plan* (which is in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;

- Support for EIS Program and/or EIS Provider Implementation of Evidence-Based Practices; and

- Evaluation.

*Phase III: Implementation and Evaluation* (which is in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

**Specific Content of Each Phase of the SSIP**

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

***Phase III: Implementation and Evaluation***

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result for Infants and Toddlers with Disabilities and Their Families (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., February 1, 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 11 - Indicator Data

**Section A: Data Analysis**

**What is the State-identified Measurable Result (SiMR)?**

By June 2025, 64.5% of infants and toddlers who entered early intervention below age expectations in the acquisition and use of knowledge and skills (including early language/communication) and who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

**Has the SiMR changed since the last SSIP submission? (yes/no)**

NO

**Is the State using a subset of the population from the indicator (*e.g.*, a sample, cohort model)? (yes/no)**

NO

**Is the State’s theory of action new or revised since the previous submission? (yes/no)**

NO

**Please provide a link to the current theory of action.**

GEIS has included the Theory of Action, and Implementation Plan for Indicator 11) on the GEIS website: https://www.gdoe.net/District/Department/3-Guam-Early-Intervention-Services (click on grants and reports on left side), and http://www.gdoe.net/District/Department/2-Special-Education

Progress toward the SiMR

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages)*.***

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 46.30% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 49.90% | 53.50% | 57.10% | 60.70% | 64.50% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Numerator: # of children who entered the program below age expectations in the acquisition and use of knowledge and skills (including early language/communication) and who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | Denominator: Total # of children who exited the program in Progress Categories a, b, c, and d in Outcome B, the acquisition and use of knowledge and skills (including early language/communication | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 24 | 40 | 46.30% | 49.90% | 60.00% | Met target | No Slippage |

**Provide the data source for the FFY 2021 data.**

GEIS continues to use the following data sources:
Indicator 3B1:
The Hawaii Early Learning Profile (HELP)
Developmental Assessment for Young Children (DAYC2)
HELP Early Child Outcome Checklist
Parent Surveys
Observations
IFSP Outcomes

**Please describe how data are collected and analyzed for the SiMR**.

The Guam Early Intervention System uses multiple sources of information to determine the status of the early childhood outcomes. Most of the information is collected as part of the development of the child's IFSP; therefore, collecting child assessment information is part of the IFSP development process and not an added step. The following information is considered in determining a child's status relating to the three early childhood outcomes: 1) The summary information for child outcomes is expected to take into account the child's functioning in his or her natural environment. Information from the family and service providers in contact with the child is considered in deciding the rating for each outcome 2) Many types of information are used in determining the child's status relative to the child outcomes. These may include, but not be limited to: parent input/observation; Service Provider input/observation; Hawaii Early Learning Profile (HELP); the Guam Early Learning Guidelines; the Developmental Assessessment of Young Children – 2nd Edition (DAYC-2) and from related service providers; 3) Information about each outcome is reflected in the child's IFSP present levels functional performance across typical settings and situations that make up his or her daily routines. 4) Infants and toddlers exiting with less than 6 months of service did not participate in exit surveys. Exit data is collected just prior to exiting the program.

Data collection procedures for gathering data for the secondary data set is based on the Early Childhood Outcome (ECO), HELP Checklist that was developed by aligning skills pertaining to expressive language that were noted in the HELP strands. For this reporting period, stakeholders inclusive of the Continuous Quality Improvement Team discussed the specific data needed to respond to the secondary data point. Through rich discussion, the stakeholders agreed to target only expressive language skills in six areas. These areas on the HELP checklist include 2-3: Expressive Language; 2-4A: Communicating with Others Gesturally; 2-4B: Communicating with Others Verbally; 2-5: Learning Grammar and Sentence Structure: 2-6: Development of Sounds & Intelligibility; and 2-7: Communicating through Rhythm. As a result of the input gathered, GEIS will focus on the specific skills pertaining to expressive language. For SPP FFY 2020 to 2025, stakeholders agreed that expressive language be the focus of professional development and set targets to increase performance by 3% each year.

As noted earlier, GEIS used items from the Hawaii Early Learning Profile (HELP) strand that most closely relate to the SiMR in the area of expressive language to create the HELP ECO Checklist. The data is used to support the collection and reporting for GEIS Secondary Data point. This process entails—1) GEIS service providers complete the ECO HELP Checklist for each child that is exiting the program; 2) The ECO Checklist is transmitted to the Data Manager, who inputs the data into the ECO HELP Excel data program. 3) The HELP ECO Data is aggregated and a ECO HELP Summary Report is provided to the Program Coordinator for review.

**Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* that demonstrates progress toward the SiMR? (yes/no)**

YES

**Describe any additional data collected by the State to assess progress toward the SiMR.**

In addition to the data collected and reported for indicator 3 B Summary Statement 1 and the ECO HELP Data Report, GEIS connects the following data to provide a comprehensive report of not only child’s performance, but in assessing parents’ levels of confidence and competence in supporting their child’s overall development with specific focus on expressive language. Furthermore, GEIS annually assess providers knowledge and skills in implementing GEIS models: 1) Early Childhood Coaching, 2) Routines Based-Interview, and 3) Division of Early Childhood (DEC) evidence-based practices to the fidelity. As noted earlier, GEIS lost 6 service providers through resignation or moved off-island or to another agency between May and June 2021. GEIS is currently in full implementation of these models and have prioritized targeted training for the 5 new staff that were hired by October 2021. These target training include the Early Childhood Outcome Measure Key Practices and the Early Childhood Coaching. As of date of this report, 3 of the 5 new Service Providers were observed using the Early Childhood Coaching CaseTools to monitor the implementation of key practices in coaching. Additional booster follow-up early childhood coaching sessions are planned for Fall 2022 and Spring 2023 to measure implementation of early childhood coaching to fidelity.

The following are data is captured and reported with Guam’s SiMR annual reporting:
Child Assessment:
1. Indicator 3 Child Outcome Measurement process
2. HELP ECO Assessment Checklist: Captures child data and the progress made in the area of expressive language skills.

Parent Assessment:
1. Annual Family Feedback Survey – Indicator 4
2. GEIS 6-Month IFSP Family Survey – This survey is disseminated at the IFSP Review meeting and captures parent’s feedback on how to improve the early intervention services they are receiving, the types of training, and connecting with other community partners.

Service Provider / Coordinator Assessment:
1. Annual Service Provider/ Coordinator Self-Assessment Survey: This self-assessment determines the level of confidence in implementing the 10 evidence-based practices.
2. Observations using 3 tools – 1) Case Tools – Family Centered Practices and Everyday Child and Learning Opportunities; and the GEIS Coaching Fidelity Checklist which includes 38 items specific to coaching practices was implemented with the providers to measure if the coaching model is being implemented to fidelity. These tools are used to measure the implementation of coaching to the fidelity of the model.

Community Partners:
1. Community Partner Survey: Provides information of cooperation, coordination, and integrated activities and initiatives across early childhood community partners.
2. Early Childhood Administrator’s Survey: Provides information from community partners on their experience and challenges to collaboration.

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

NO

**Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)**

NO

Section B: Implementation, Analysis and Evaluation

**Please provide a link to the State’s current evaluation plan.**

GEIS website: https://www.gdoe.net/District/Department/3-Guam-Early-Intervention-Services (click on grants and reports on left side), and http://www.gdoe.net/District/Department/2-Special-Education

**Is the State’s evaluation plan new or revised since the previous submission? (yes/no)**

NO

**Provide a summary of each infrastructure improvement strategy implemented in the reporting period.**

The following summary provides information on the infrastructure improvement strategies:

FAMILY SUPPORTS (FS):
In collaboration, Guam Early Learning Council (GELC) Leadership Team expand the process for community- based parent / family engagement activities such as Family Learning Sessions, Strengthening Families virtual Parent Café, posters and brochures on the 5 Protective Factors, short videos were developed and posted on the GELC Facebook and Instagram pages (such as cartoon Full of Colors targeted for two year old toddlers, and Peek-A-Boo! target for Birth to 9 months of age. This aligns with the intended outcome to linkages with community-based programs (CBPs) and parent support groups that focus on sharing of strategies to address family and child needs. For this reporting period, and due to the COVID pandemic, the families were served virtually with the understanding the GEIS will move to in-person home visiting in August 2022.

PROFESSIONAL DEVELOPMENT (PD):
GEIS has prioritize professional development activities to support the 5 new service providers and 1 service coordinator to adequately prepared to work with families and caregivers by:
– Disseminating the Professional Development Self-Assessment Tool that addresses competency areas for EC providers to include evidenced based practices that promote early learning language/communication and literacy.
– analyzing existing PD to include different available options such as virtual; in-person; and develop methods to offer trainings asynchronously.
– Continuing the use training modules for EC that align with our EBP to include Early Childhood Coaching, IFSP process, Early Start Denver Model – Family Coaching, Routine Based Intervention, Teaching Strategies, EBPs to promote expressive language skills; Strengthening Families, Tele-Intervention: Distance Education Learning, Service Coordinator Training, etc.
– Incorporating the FLARE (Functional IFSP Outcomes to Guide Intervention; Learning More to Ensure a Deeper Understanding; Action and Trying Strategies; Reflection and Responsive Feedback; and End Visit Planning for Between and Next Visit) framework to document outcomes and next steps during home visits. The FLARE framework uses the early childhood coaching model coupled with the routines-based intervention (RBI) evidence-based model

LOCAL PRACTIONER (LP):
GEIS, in collaboration with GELC workgroups, continues to update and implement Standard Operating Procedures (SOP), such as the Island-wide Developmental and Behavioral Screening System (iDBSS), from child identification to transition with community partners to coordinate services for children and families and to include strategies that promote early learning language/communication and early literacy strategies.

**Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.**

FAMILY SUPPORTS:
Intended Outcomes
•GEIS identifies and develops linkages with community-based programs (CBPs) and parent support groups that focus on sharing of strategies to address family and child needs.
Short Term:
•Parents and EI staff are knowledgeable about community-based resources.
•Parents have skill sets to participate actively in supporting their child’s overall development.
Intermediate:
•Parents will access community-based resources.
•Parent/child interactions will increase in both quality and quantity to help their child grow and learn
Progress to date:
Parents have access to community- based parent / family engagement activities such as Strengthening Families Parent Café and parent curriculum

PROFESSIONAL DEVELOPMENT:
Intended Outcomes:
GEIS identifies and/or develops and implements the professional development resources and mechanisms for ongoing support necessary to ensure early intervention service providers, including service coordinators and contracted providers, consistently use coaching and natural learning environment practices when planning and delivering early intervention services
Short Term:
•EC providers will have knowledge and skills on evidence-based practices that promote children’s acquisition and use of knowledge and skills (including early language/communication and early literacy).
•EC administrators/supervisors will have knowledge and skills to support EC providers on evidence-based practices within the primary provider and coaching model with fidelity.
•EC providers will have improved understanding and skills of child outcomes, child development, including evidence-based practices to support acquisition and use of knowledge and skills.
•EC providers will have greater understanding family’s needs and will be able to better communicate to improve families’ understanding of IFSP and acquisition and use of knowledge and skills.
Intermediate Term:
•EC providers will implement effective evidenced practices that promote children’s acquisition and use of knowledge (including early language/communication and early literacy) interventions and supports to children and families.
•The quality and quantity of parent-child engagement will improve and increase.
•EC providers will access coaching/mentoring support to improve understanding and skills of child outcomes, child development, including evidence-based practices to support acquisition and use of knowledge and skill.
Progress to date:
GEIS continues to use EBPs to include Early Childhood Coaching, IFSP process, Early Start Denver Model – Family Coaching, Routine Based Intervention, Teaching Strategies, EBPs to promote expressive language skills; Strengthening Families, Tele-Intervention: Distance Education Learning, Strategies in working with parents, Service Coordinator Training, etc.
GEIS continue to use the professional development resources and mechanisms for ongoing support necessary to ensure early intervention service providers, including service coordinators and contracted providers, consistently use coaching and natural learning environment practices when planning and delivering early intervention services

LOCAL PRACTITIONER:
Intended Outcomes
- GEIS improves strategic engagement with all early childhood community partners, including the development of an integrated referral system (web-based).
Short Term:
- EC providers will have knowledge and skills to implement effective strategic engagement with community partners and to promote early learning language/communication and early literacy.
- EC providers will have skill sets to effectively implement the SOP with community partners and evidenced based strategies to promote early learning language/communication and early literacy.
Intermediate Term:
- EC providers will have in place collaborative partnership and demonstrate effective use of the SOP with community partners.
- EC providers will coordinate services across community partners to better serve young children and their families by providing family driven, - LC, individualized, and coordinated service delivery that promotes early learning language/communication and early literacy.
Parents will access EC services across community partners that promote early learning language/communication and early literacy that meets the needs of child and family.

**Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)**

NO

**Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.**

**List the selected evidence-based practices implemented in the reporting period:**

GEIS continues to provide training to build confidence and competences of the service providers and to ensure evidence-based strategies or models are implemented to fidelity. These models include: 1) Routines Based Intervention, 2) Early Childhood Coaching and have expanded the strategies by using the Early Start Denver Model (ESDM) Family Coaching and the ESDM Help Is In Your Hands Parent modules, and 3) Infusing and using Child and Family Outcomes throughout the IFSP process. GEIS continues to monitor and evaluate these strategies through the implementation of the Early Childhood Coaching (FLARE) plans at home visiting sessions, direct observations, and assessing the coaching practices using the Guam Early Childhood Coaching Fidelity Checklists.

In addition, GEIS continues to provide Family Learning Sessions on evidence-based strategies at support a child’s expressive language skills. The focus of these learning sessions is to provide opportunities for parents to apply these strategies and share their learning with other families. In addition, service providers share additional tools and resources when working with infants and toddlers and their families during regular scheduled home visiting sessions.

**Provide a summary of each evidence-based practice.**

1. The Family Learning Sessions were held this reporting period: Babbles, Bubbles, and Boo…on: "Singing Songs and Rhymes", “Turn Taking", "Tuning In" and "Reading Books", Commenting and Narrating". These sessions provide tips and ideas that parents could do to support their child’s expressive language development. Theses EPBs are shared with families during these sessions.
2. Early Childhood Coaching training was provided to five new service providers that were hire by October 2021.
3. Routine based interview training for new service providers will be facilitated by Dr. Naomi Younggren upon agreement of schedule.
4. Training on the Early Start Denver Model: Family Coaching will be provided to new service providers upon completion of Early Childhood Coaching booster sessions and observation documenting Early Childhood Coaching practices are implemented to the fidelity of the model .
5. GEIS continues to use the following eleven (11) coherent evidence-base DEC practices (EBPs) strategies to reflect how its supports activities that focus on improving outcomes or results for infants and toddlers with disabilities and their families and links to the SiMR. The eleven (11) EBPs that were identified (under the area and item#) include the following:
•Assessment #11: Practitioners report assessment results so that they are understandable and useful to families.
•Environment #1: Practitioners provide services and supports in natural and inclusive environments during daily routines and activities to promote the child’s access to and participation in learning experiences.
•Family #1: Practitioner’s build trusting and respectful partnerships with the family through interactions that are sensitive and responsive to cultural, linguistic, and socioeconomic diversity.
•Family #4: Practitioners support family functioning, promote family confidence and competence, and strengthen family-child relationships by acting in ways that recognize and build on family strengths and capacities.
•Instruction #2: Practitioners, with the family, identify skills to target for instruction that help a child become adaptive, competent, socially connected, and engaged and that promote learning in natural and inclusive environments.
•Instruction #13: Practitioners use coaching or consultation strategies with primary caregivers or other adults to facilitate positive adult-child interactions and instruction intentionally designed to promote child learning and development.
•Interaction #2: Practitioners promote the child’s social development by encouraging the child to initiate or sustain positive interactions with other children and adults during routines and activities through modeling, teaching, feedback, or other types of guided support.
•Interaction #4: Practitioners promote the child’s cognitive development by observing, interpreting, and responding intentionally to the child's exploration, play, and social activity by joining in and expanding on the child's focus, actions, and intent.
•Team and Collaboration #2: Practitioners and families work together as a team to systematically and regularly exchange expertise, knowledge, and information to build team capacity and jointly solve problems, plan, and implement interventions.
•Team and Collaboration #4: Team members assist each other to discover and access community-based services and other informal and formal resources to meet family-identified child or family needs.
•Transition #1: Practitioners in sending and receiving programs exchange information before, during, and after transition about practices most likely to support the child’s successful adjustment and positive outcomes.
 6. GEIS will expand training for service providers and service coordinators on EBPs practices by implementing the Teaching Strategies Creative Curriculum and TSGold Assessment.

**Provide a summary of how each evidence-based practices and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child/outcomes.**

1. The Family Learning Sessions: Babbles, Bubbles, and Boo are virtual parent interactive events that – 1) shares EBP/strategies that enhances the parent’s capacity to support and nurture their child's expressive language skills; 2) allows families to meet other parents and shares tips that have worked for them; and 3) parents may bring up and concerns or recommendation of how to improves early intervention services and supports.
2. GEIS continues to implement the Early Childhood Coaching model in their interactions with families at home visting sessions. This s the primary model used by service provider to enhance the parents capacity in strategies that would promote early literacy, language, and communication skills within the child’s daily routine. GEIS continues to use the EI Visit Coaching Framework that provides a structure for planning and conducting intervention visits. This framework is called the FLARE which stands for the following:
-Functional IFSP Outcomes to Guide Intervention
-Learning More to Ensure a Deeper Understanding
-Action and Trying Strategies
-Reflection and Responsive Feedback
-End Visit Planning for Between and Next Visit Action
3. Routine-based Interviews RBI: RBI is a needs assessment and is an evidence-based practice designed to help families decide on outcomes/goals for their individualized plans, to provide a description of child and family functioning, and to establish an immediately positive relationship between the family and the professional.
4. The Early Start Denver Model (ESDM) Family Coaching: The aim of ESDM Parent Coaching is to provide parents/caregivers with tools and strategies to teach and engage their child through play and everyday routines such as mealtimes, bathing, dressing.
5. The eleven DEC practices identified are aligned to the coherent strategies that supports GEIS's SiMR

**Describe the data collected to monitor fidelity of implementation and to assess practice change.**

A1: Performance:
• Know about services in the community at 88.33%
• know where to go for support to meet my family's needs at 88.33%
• know where to go for support to meet my child's needs at 91.20%
• It was easy to find out about early intervention services that are available in the community at 85.18%.
• It was easy to get my child and family involved with early intervention services at 92.59%.
• GEIS has been helpful in connecting my child and family with other services or programs that can help us at 96.29%.
• I am comfortable asking for services and supports that my child and family needs at 100%.
• I know who to call if I have problems with the services and supports my child and family are receiving at 88.89%.
• Over the past months/years, GEIS has helped me and/my family understand the roles of people who work with my child and family at 96.30%.
A1: Performance Rating: Overall performance: 92.65% or 3=Strong Performance

A2: Percent increase in number/types of community partners accessed by parents/families to support their child's early language/communication and early literacy development
A2: Performance: Of the 39 partners listed, families reported 19 connections with agencies/ organization (19 out of 27 respondents or 70.37%).
A2: Rating for Performance: 2 = Moderate Performance

A3: Percent % increase in parents reporting they support their child's early learning language/communication development
A3: Performance: : Of the total % of survey items from 20 to 28 = 854.05 divide by 9 (items) =
Overall average is 94.89%
A3: Rating of Performance: 3= Strong Performance

B: Percent of EI/EC providers demonstrating knowledge of evidenced-based practices related to early language/communication and early literacy.
B: Performance: 47 responses from participants that indicate adequate or advance / total of 63 responses (47/63 = 74.60%)
B: Rating Performance: 2=Moderate Performance

C: Percent of community partners coordinating to promote early learning language/communication
C: Performance: Coordinated Activities = 48%; Integrated = 24% Overall Percentage: 72%
C: Rating Performance: 2 = Moderate Performance

D: Percent of EI/EC administrators reporting adequate support to EI/EC providers related to early language/communication and early literacy.
D: Performance: 23/24 = 95.83 % of Administrators indicated adequate support
D: Rating Performance: 3=STRONG PERFORMANCE

E: Percent of EI/EC providers implementing evidenced-based practices related to early learning language/communication and early literacy with fidelity
E: Performance: 8 observations (with 2 checklists Family Centered Practices; and
Everyday Child Learning Opportunities were completed) indicating: Overall performance was at 91.8% practices observed.
E: Rating Performance: 3=STRONG PERFORMANCE

F: Percent increase of children improving on their measurable goals regarding early language/communication and early literacy.
F: Performance: Of the 35/48 children exiting, there were a total of 148 communication and cognitive goals.
Of which 85 were met and 59 emerging = 144. 144/148 = 97.3%
F: Rating Performance: 3=STRONG PERFORMANCE

G: Percent increase of children making "greater than expected" growth in acquisition and use of knowledge and skills (including early language/communication) by the time they exit the Guam Early Intervention System
G: Performance: Of the 40 infants and toddlers that exited, 24 reported substantially increased their rate of growth in the use of knowledge and skills in language and communication. 24 / 40 = 60%
G: Rating Performance: 3=Strong Performance

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

GEIS did not collect any additional data for this reporting period.

**Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.**

GEIS stakeholders agreed to continue to implement the existing SSIP Implementation Plan.

**Does the State intend to continue implementing the SSIP without modifications? (yes/no)**

YES

**If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.**

Due to loss of 6 service providers in May and June 2021, GEIS has prioritize professional development activities to support the 5 new service providers in the areas of Early Childhood Coaching, Routines based Interviews, Early Child Outcomes and the Early Start Denver Model.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

An invitation to attend the Guam Part C Guam Early Intervention System (GEIS) Stakeholder In-Person and Virtual Input Sessions on Guam’s Part C State Performance Plan was sent to parents, service providers, and community partners encouraging their participation in the development of Guam’s FFY 2021-2022 SPP/APR/SSIP, including members of the Guam Interagency Coordinating Council (GICC), Preschool Development Grant Birth-5 Project, Guam Early Learning Council (GELC) leadership and workgroups, and parents of children in the GEIS, The GICC members consist of parents, representatives of various agencies, and other programs identified by the council.

A meeting was scheduled with GEIS staff to document ways in which information can be shared with parents to encourage their participation in the SPP/APR process. The following activities were conducted by GEIS in efforts to increase the capacity of diverse groups of parents: 1) Flyers and emails were sent to parents and all interested stakeholders, announcing focus group forum sessions and large stakeholder sessions; 2) Service Coordinators shared information of the importance of their participation during home visiting sessions, sent via WhatsApp and phone call reminders; 3) The Guam Early Learning Council Facebook page media announced the sessions; 4) information was sent to parents through other parent organizations such as Autism Community Together (ACT); and 5) to encourage participation, parents were informed that gas vouchers would be provided. In addition, prior to submitting the final SPP/APR, electronic and hard copies of the drafted SPP/APR and the power point presentation were made available to all participants for review of input incorporated into the SPP/APR.

On August 10, 2022, GEIS staff reviewed the primary data for the APR FFY 2021 and provided input on the the types of activities and methods for gathering stakeholder input. At this meeting, staff agreed to break up the indicators into 3 cluster areas for review by the GICC at the September 15, 2022 Quarterly meeting.

On September 15, 2022, the GICC Quarterly meeting was held to review the APR FFY 2021 data and information. GEIS staff, in collaboration with the GICC, developed a plan of ways to send information to parents requesting them to attend indicator cluster stakeholder sessions, as parents have lived experience in receiving early intervention services and supports from GEIS. Through this discussion, GEIS staff recommended that the Stakeholder Virtual Input Sessions on the Part C State Performance Plan be broken down into 3 Cluster groups. These Cluster groups included – a) Cluster 1: Child Find and Public Awareness included information pertaining to indicators 5 and 6. b) Cluster 2: Timely Service included indicators 1, 7, and 8 compliance indicators; and c) Cluster 3: Child and Family Outcomes included indicators 3, 4, and Indicator 11 SSIP State Systemic Improvement Plan.

With technical assistance from Guam CEDDERS, each in-person and virtual input sessions reviewed the IDEA requirement including the requirements for ensuring parent participation, current performance for each indicator, and gathered feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

There was a total of 60 stakeholders who attended the indicator cluster stakeholder meetings held on October 4, 5, 6, 2022 and 2 large stakeholder sessions held on November 17 and December 3, 2022. The two (2) large stakeholder meetings (November 17 and December 3, 2022) were held in the evening and on a Saturday to accommodate more parents. These large sessions used infographics to provide a picture of each indicator in efforts to increase stakeholder understanding. Using a Parent Café’ model, stakeholders were placed in small groups to discuss strategies and ideas to improve performance that would result in positive outcomes for the child and family.

The Stakeholders who were in attendance at these five input sessions comprised of 10 parents, 5 GICC members, 28 GEIS staff, and 13 community partners. These sessions included a review of performance for each indicator and focused discussion to gather feedback and recommendations for possible revisions to results targets and required explanation of slippage for relevant indicators.

At the large stakeholder input sessions, infographics were used to provide a visual depiction of each indicator as a mechanism for increasing greater understanding of each indicator, and how each person present will be asked to provide input on the following: 1) Review performance for each indicator, 2) if there was a slippage in the performance, stakeholders provided input on the improvement activities, 3) provided suggestions and recommendations on how we could “Make things better” and to improve the outcomes. The facilitator for the session then asked stakeholders to commit to the process and to share how they may engage in the conversation. Stakeholders who attended these in-person/virtual sessions included parents, service providers, members of the GICC, the Guam Early Learning Council (GELC) members, community partners, and the GEIS SSIP Core Leadership team. At each session, Stakeholders were acknowledged for their presence and participation at the meeting and that their input on the improvement activities will target improved outcomes for children and their families.

**Describe the specific strategies implemented to engage stakeholders in key improvement efforts.**

Additional Stakeholder Involvement:
GEIS held 4 sessions targeting parent training called “Family Learning Sessions” and a “Strengthening Families – Parent Café’ that allow them to learn specific strategies to support their child’s expressive language skills. In addition, this session provided an opportunity for parents to share their concerns, if any, and to provide feedback to GEIS on how we could improve services and support.

1. On August 26, 2021, GEIS with technical assistance with Guam CEDDERS facilitated the GEIS Strengthening Families – Parent Café. The Theme the Parent Cafe: You are Not Alone provided an opportunity for parents to engage with other parents during Café Conversations to discuss questions related to relationships and support. The overall purpose of the Café was to 1) Provide program updates and support available; b) Share EI’s Plan for In-Person Home Visits; and c) Strengthening Families: Parent Café Theme: You Are NOT Alone. There were twelve (12) parents that attended the Parent Café’ along with 6 GEIS staff that were Café Host. At the sessions, parents provided feedback on the plan for the in-person home visits, and shared how they access help to support the needs of their child and family. The Café was a wonderful opportunity for parents to meet other parents and in knowing that they are not alone and can access other resources and supports.

2. On November 10, 2021, GEIS with technical support from Guam CEDDERS facilitated the GEIS Family Learning Session with a focus on “Turn Taking.” The purpose of the session is to share proven strategies to respond sensitively to your child’s communication cues, so that their child is Heard! The strategy highlighted was on “Turn Taking.” Parent reviewed what “Turn Taking” looks like and watched a short snippet of turn taking in action. After participants reviewed the refrigerator indicating the goal: Turn-taking and dyadic engagement occurs throughout the session, the activity, and the day. After the video, parents shared their experiences and how they encourage turn-taking. Overall, each parent had the opportunity to share and learn from each other. There were 5 parents that attended the session.

3. On March 9, 2022, GEIS staff with technical assistance with Guam CEDDERS, facilitation of the GEIS Family Learning Session: Singing Songs and Rhymes. The purpose of the session is to share proven strategies to respond sensitively to your child’s communication cues, so that their child is Heard! The strategy highlighted was on “Singing Songs and Rhymes.” The GEIS staff shared what is “Singing Songs and Rhymes” and presented the 10 Ways Babies Learn When We Sing to Them taken from the National Association of the Education of Young Children (NAYAC) Association. These tips include - bonding, transitions, language, new words, rhythm, and rhyme, play, family fun, singing names, listening skills, and love. Afterwards, parents watched a short video entitled: Encouraging your Child to Talk and reviewed the refrigerator list indicating the goal: for Singing Songs and Rhymes. At the session, there were 16 parents and 5 GEIS staff who attended this virtual interactive session. In small groups, parents shared their experiences and how they encouraged singing songs and rhymes. Overall, each parent had the opportunity to share and learn from each other. In addition, there was an open session provided for families to share anything they would like to share or questions.

4. On April 27, 2022, GEIS staff with technical assistance with Guam CEDDERS facilitation of the GEIS Family Learning Session: Reading Books. The purpose of the session is sharing proven strategies to encourage your child to talk through Reading Books. The GEIS staff shared 13 Ways Babies Learn When We Read to Them from the National Association of the Education of Young Children (NAYAC). In addition, parents were asked to watch a video of a parent reading to his child and what it looks like when reading books. Next, the “Refrigerator List” was shared as a reminder of what to do to encourage your child to pay attention when reading a book. Parents were engaged in small group discussion of what they have done to encourage their child to read. This small group interactive activity allows parents to learn from each other. Overall, each parent had the opportunity to share and learn from each other. There were five (5) parents and 4 GEIS staff who attended this virtual interactive session.

**Were there any concerns expressed by stakeholders during engagement activities? (yes/no)**

NO

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

None

**Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.**

None

**Describe any newly identified barriers and include steps to address these barriers.**

New barriers were the loss of half of GEIS personnel which required the program to prioritize professional development activities for the newly hired staff. This also impacted the caseloads and timely completions on IFSPs and services as indicated in indicators 1 and 7.

**Provide additional information about this indicator (optional).**

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

## 11 - Required Actions

# Certification

**Instructions**

**Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.**

**Certify**

**I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.**

**Select the certifier’s role**

Designated Lead Agency Director

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.**

**Name:**

Tom Babauta

**Title:**

Assistant Superintendent of Special Education

**Email:**

tcbabauta@gdoe.net

**Phone:**

(671)300-2296

**Submitted on:**

04/25/23 4:32:02 PM

# Determination Enclosures

## RDA Matrix

**Guam**

2023 Part C Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[1]](#footnote-2)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 74.11% | Needs Assistance |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 8 | 5 | 62.50% |
| **Compliance** | 14 | 12 | 85.71% |

**2023 Part C Results Matrix**

**I. Data Quality**

**(a) Data Completeness: The percent of children included in your State’s 2021 Outcomes Data (Indicator C3)**

|  |  |
| --- | --- |
| Number of Children Reported in Indicator C3 (i.e., outcome data) | 48 |
| Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data) | 96 |
| Percentage of Children Exiting who are Included in Outcome Data (%) | 50 |
| **Data Completeness Score[[2]](#footnote-3)** | 1 |

**(b) Data Anomalies: Anomalies in your State’s FFY 2021 Outcomes Data**

|  |  |
| --- | --- |
| **Data Anomalies Score**[[3]](#footnote-4) | 2 |

**II. Child Performance**

**(a) Data Comparison: Comparing your State’s 2021 Outcomes Data to other States’ 2021 Outcomes Data**

|  |  |
| --- | --- |
| **Data Comparison Score[[4]](#footnote-5)** | 1 |

**(b) Performance Change Over Time: Comparing your State’s FFY 2021 data to your State’s FFY 2020 data**

|  |  |
| --- | --- |
| **Performance Change Score[[5]](#footnote-6)** | 1 |

| **Summary Statement Performance** | **Outcome A: Positive Social Relationships SS1 (%)** | **Outcome A: Positive Social Relationships SS2 (%)** | **Outcome B: Knowledge and SkillsSS1 (%)** | **Outcome B: Knowledge and SkillsSS2 (%)** | **Outcome C: Actions to Meet Needs SS1 (%)** | **Outcome C: Actions to Meet NeedsSS2 (%)** |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY 2021**  | 55.26% | 39.58% | 60.00% | 33.33% | 55.26% | 43.75% |
| **FFY 2020**  | 36.17% | 45.59% | 46.30% | 39.71% | 46.00% | 47.06% |

**2023 Part C Compliance Matrix**

| **Part C Compliance Indicator[[6]](#footnote-7)** | **Performance (%)**  | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 1: Timely service provision** | 98.50% | N/A | 2 |
| **Indicator 7: 45-day timeline** | 72.85% | N/A | 0 |
| **Indicator 8A: Timely transition plan** | 100.00% | N/A | 2 |
| **Indicator 8B: Transition notification** | 100.00% | N/A | 2 |
| **Indicator 8C: Timely transition conference** | 96.00% | N/A | 2 |
| **Timely and Accurate State-Reported Data** | 100.00% |  | 2 |
| **Timely State Complaint Decisions** | N/A |  | N/A |
| **Timely Due Process Hearing Decisions** | N/A |  | N/A |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

**Appendix A**

**I. (a) Data Completeness:**

**The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)**

Data completeness was calculated using the total number of Part C children who were included in your State’s FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State’s Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State’s FFY 2021 IDEA Section 618 Exit Data.

|  |  |
| --- | --- |
| **Data Completeness Score** | **Percent of Part C Children included in Outcomes Data (C3) and 618 Data** |
| **0** | **Lower than 34%** |
| **1** | **34% through 64%** |
| **2** | **65% and above** |

**Appendix B**

**I. (b) Data Quality:**

**Anomalies in Your State's FFY 2021 Outcomes Data**

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e[[7]](#footnote-8)[[8]](#footnote-9). In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State’s data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

|  |  |
| --- | --- |
| **Outcome A** | **Positive Social Relationships** |
| **Outcome B** | **Knowledge and Skills** |
| **Outcome C** | **Actions to Meet Needs** |

|  |  |
| --- | --- |
| **Category a** | **Percent of infants and toddlers who did not improve functioning** |
| **Category b** | **Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers** |
| **Category c** | **Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it** |
| **Category d** | **Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers** |
| **Category e** | **Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers** |

**Expected Range of Responses for Each Outcome and Category, FFY 2021**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome\Category** | **Mean** | **StDev** | **-1SD** | **+1SD** |
| **Outcome A\Category a** | 1.43 | 1.62 | -0.19 | 3.05 |
| **Outcome B\Category a** | 1.26 | 2.27 | -1.01 | 3.53 |
| **Outcome C\Category a** | 1.14 | 1.59 | -0.45 | 2.73 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome\Category** | **Mean** | **StDev** | **-2SD** | **+2SD** |
| **Outcome A\ Category b** | 23.62 | 8.94 | 5.75 | 41.49 |
| **Outcome A\ Category c** | 20.32 | 12.69 | -5.05 | 45.69 |
| **Outcome A\ Category d** | 27.33 | 9.46 | 8.42 | 46.24 |
| **Outcome A\ Category e** | 27.3 | 15.11 | -2.92 | 57.52 |
| **Outcome B\ Category b** | 25.16 | 9.76 | 5.65 | 44.68 |
| **Outcome B\ Category c** | 28.73 | 12.11 | 4.5 | 52.95 |
| **Outcome B\ Category d** | 31.76 | 8.06 | 15.64 | 47.87 |
| **Outcome B\ Category e** | 13.09 | 8.56 | -4.02 | 30.21 |
| **Outcome C\ Category b** | 20.27 | 8.49 | 3.29 | 37.26 |
| **Outcome C\ Category c** | 23.01 | 13.08 | -3.16 | 49.17 |
| **Outcome C\ Category d** | 34.09 | 8.09 | 17.9 | 50.28 |
| **Outcome C\ Category e** | 21.49 | 15.06 | -8.62 | 51.6 |

|  |  |
| --- | --- |
| **Data Anomalies Score** | **Total Points Received in All Progress Areas** |
| 0 | 0 through 9 points |
| 1 | 10 through 12 points |
| 2 | 13 through 15 points |

**Anomalies in Your State’s Outcomes Data FFY 2021**

|  |  |
| --- | --- |
| **Number of Infants and Toddlers with IFSP’s Assessed in your State** | **48** |

| **Outcome A — Positive Social Relationships** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 0 | 17 | 12 | 9 | 10 |
| **Performance (%)** | 0.00% | 35.42% | 25.00% | 18.75% | 20.83% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome B — Knowledge and Skills** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 0 | 16 | 16 | 8 | 8 |
| **Performance (%)** | 0.00% | 33.33% | 33.33% | 16.67% | 16.67% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome C — Actions to Meet Needs** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 0 | 17 | 10 | 11 | 10 |
| **Performance (%)** | 0.00% | 35.42% | 20.83% | 22.92% | 20.83% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

|  | **Total Score** |
| --- | --- |
| **Outcome A** | 5 |
| **Outcome B** | 5 |
| **Outcome C** | 5 |
| **Outcomes A-C** | 15 |

|  |  |
| --- | --- |
| **Data Anomalies Score** | 2 |

**Appendix C**

**II. (a) Data Comparison:**

**Comparing Your State’s 2021 Outcomes Data to Other States’ 2021 Outcome Data**

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement[[9]](#footnote-10). Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

*Summary Statement 1: Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.*

*Summary Statement 2: The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.*

**Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021**

| **Percentiles** | **Outcome A SS1** | **Outcome A SS2** | **Outcome B SS1** | **Outcome B SS2** | **Outcome C SS1** | **Outcome C SS2** |
| --- | --- | --- | --- | --- | --- | --- |
| **10** | 43.42% | 36.60% | 54.62% | 29.02% | 55.14% | 36.15% |
| **90** | 82.74% | 69.30% | 79.34% | 55.52% | 85.72% | 76.15% |

|  |  |
| --- | --- |
| **Data Comparison Score** | **Total Points Received Across SS1 and SS2** |
| **0** | 0 through 4 points |
| **1** | 5 through 8 points |
| **2** | 9 through 12 points |

**Your State’s Summary Statement Performance FFY 2021**

| **Summary Statement (SS)** | **Outcome A: Positive Social Relationships SS1** | **Outcome A: Positive Social Relationships SS2** | **Outcome B: Knowledge and Skills SS1** | **Outcome B: Knowledge and Skills SS2** | **Outcome C: Actions to meet needs SS1** | **Outcome C: Actions to meet needs SS2** |
| --- | --- | --- | --- | --- | --- | --- |
| **Performance (%)** | 55.26% | 39.58% | 60.00% | 33.33% | 55.26% | 43.75% |
| **Points** | 1 | 1 | 1 | 1 | 1 | 1 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2(\*)** | 6 |

|  |  |
| --- | --- |
| **Your State’s Data Comparison Score** | 1 |

**Appendix D**

**II. (b) Performance Change Over Time:**

**Comparing your State’s FFY 2021 data to your State’s FFY 2020 data**

The Summary Statement percentages in each Outcomes Area from the previous year’s reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of p<=.05. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of ‘0’, ‘1’, or ‘2’ for each State is based on the total points awarded. Where OSEP has approved a State’s reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of ‘N/A’ for this element.

**Test of Proportional Difference Calculation Overview**

The summary statement percentages from the previous year’s reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of p<=.05. The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

e.g., C3A FFY2021% - C3A FFY2020% = Difference in proportions

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on[[10]](#footnote-11)

Sqrt[([FFY2021% \* (1-FFY2021%)] / FFY2021N) + ([FFY2022% \* (1-FFY2022%)] / FFY2022N)] = Standard Error of Difference in Proportions

Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.

Difference in proportions /standard error of the difference in proportions = z score

Step 4: The statistical significance of the z score is located within a table and the *p* value is determined.

Step 5: The difference in proportions is coded as statistically significant if the *p* value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

|  |  |
| --- | --- |
| **Indicator 3 Overall Performance Change Score** | **Cut Points for Change Over Time in Summary Statements Total Score** |
| **0** | Lowest score through 3 |
| **1** | 4 through 7 |
| **2** | 8 through highest |

| **Summary Statement/ Child Outcome** | **FFY 2020 N** | **FFY 2020 Summary Statement (%)** | **FFY 2021 N** | **FFY 2021 Summary Statement (%)** | **Difference between Percentages (%)** | **Std Error** | **z value** | **p-value** | **p<=.05** | **Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SS1/Outcome A: Positive Social Relationships** | 47 | 36.17% | 38 | 55.26% | 19.09 | 0.1069 | 1.7868 | 0.074 | NO | 1 |
| **SS1/Outcome B: Knowledge and Skills** | 54 | 46.30% | 40 | 60.00% | 13.70 | 0.1030 | 1.3308 | 0.1833 | NO | 1 |
| **SS1/Outcome C: Actions to meet needs** | 50 | 46.00% | 38 | 55.26% | 9.26 | 0.1071 | 0.8648 | 0.3872 | NO | 1 |
| **SS2/Outcome A: Positive Social Relationships** | 68 | 45.59% | 48 | 39.58% | -6.00 | 0.0929 | -0.6464 | 0.518 | NO | 1 |
| **SS2/Outcome B: Knowledge and Skills** | 68 | 39.71% | 48 | 33.33% | -6.37 | 0.0903 | -0.7059 | 0.4803 | NO | 1 |
| **SS2/Outcome C: Actions to meet needs** | 68 | 47.06% | 48 | 43.75% | -3.31 | 0.0938 | -0.3529 | 0.7242 | NO | 1 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2** | **6** |

|  |  |
| --- | --- |
| **Your State’s Performance Change Score** | **1** |

## Data Rubric

**Guam**

**FFY 2021 APR**[[11]](#footnote-12)

|  | **Part C Timely and Accurate Data -- SPP/APR Data** |  |
| --- | --- | --- |
| **APR Indicator** | **Valid and Reliable** | **Total** |
| **1** | 1 | 1 |
| **2** | 1 | 1 |
| **3** | 1 | 1 |
| **4** | 1 | 1 |
| **5** | 1 | 1 |
| **6** | 1 | 1 |
| **7** | 1 | 1 |
| **8A** | 1 | 1 |
| **8B** | 1 | 1 |
| **8C** | 1 | 1 |
| **9** | 1 | 1 |
| **10** | 1 | 1 |
| **11** | 1 | 1 |
|  | **Subtotal** | 13 |
| **APR Score Calculation** | **Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right. | 5 |
|  | **Grand Total** - (Sum of Subtotal and Timely Submission Points) = | 18 |

|  |  | **618 Data[[12]](#footnote-13)** |  |  |
| --- | --- | --- | --- | --- |
| **Table** | **Timely** | **Complete Data** | **Passed Edit Check** | **Total** |
|  **Child Count/Settings Due Date: 4/6/22** | 1 | 1 | 1 | 3 |
| **Exiting Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Dispute Resolution Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
|  |  |  | **Subtotal** | 9 |
| **618 Score Calculation** |  |  | **Grand Total** (Subtotal X 2) = | 18.00 |

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 18 |
| B. 618 Grand Total | 18.00 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 36.00 |
| Total N/A Points in APR Data Table Subtracted from Denominator | 0 |
| Total N/A Points in 618 Data Table Subtracted from Denominator | 0.00 |
| **Denominator** | 36.00 |
| D. Subtotal (C divided by Denominator\*) = | 1.0000 |
| E. Indicator Score (Subtotal D x 100) = | 100.00 |

**\*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APR and 618 -Timely and Accurate State Reported Data**

**DATE: February 2023 Submission**

**SPP/APR Data**

**1) Valid and Reliable Data** - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

**Part C 618 Data**

**1) Timely** – A State will receive one point if it submits counts/ responses for an entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

|  |  |  |
| --- | --- | --- |
| **618 Data Collection** | **EMAPS Survey** | **Due Date** |
| Part C Child Count and Setting | Part C Child Count and Settings in EMAPS | 1st Wednesday in April |
| Part C Exiting | Part C Exiting Collection in EMAPS | 1st Wednesday in November |
| Part C Dispute Resolution  | Part C Dispute Resolution Survey in EMAPS | 1st Wednesday in November |

**2) Complete Data** – A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. State-level data include data from all districts or agencies.

**3) Passed Edit Check –** A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).

## Dispute Resolution



## How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP’s IDEA Website.  How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

[https://sites.ed.gov/idea/how-the-department-made-determinations/](https://nam10.safelinks.protection.outlook.com/?url=https%3A%2F%2Fsites.ed.gov%2Fidea%2Fhow-the-department-made-determinations%2F&data=05%7C01%7Cdan.royal%40aemcorp.com%7C56561a053eed4e4dffea08db4cd0ea7f%7C7a41925ef6974f7cbec30470887ac752%7C0%7C0%7C638188232405320922%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=REJfNg%2BRs0Gk73rS2KzO2SIVRCUhHLglGd6vbm9wEwc%3D&reserved=0)

1. For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part C." [↑](#footnote-ref-2)
2. Please see Appendix A for a detailed description of this calculation. [↑](#footnote-ref-3)
3. Please see Appendix B for a detailed description of this calculation. [↑](#footnote-ref-4)
4. Please see Appendix C for a detailed description of this calculation. [↑](#footnote-ref-5)
5. Please see Appendix D for a detailed description of this calculation. [↑](#footnote-ref-6)
6. The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: <https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf> [↑](#footnote-ref-7)
7. Numbers shown as rounded for display purposes. [↑](#footnote-ref-8)
8. Values based on data for States with summary statement denominator greater than 199 exiters. [↑](#footnote-ref-9)
9. Values based on data for States with summary statement denominator greater than 199 exiters. [↑](#footnote-ref-10)
10. Numbers shown as rounded for display purposes. [↑](#footnote-ref-11)
11. In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table. [↑](#footnote-ref-12)
12. In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a ‘0’. An N/A does not negatively affect a State's score; this is because 2 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table. [↑](#footnote-ref-13)