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

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

**For reporting on
FFY 2019**

**Guam**



**PART C DUE
February 1, 2021**

**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 2019. 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 SPP and APR to the public are provided separately within this introduction section of Guam's FFY2019 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.**

Guam’s Department of Education (DOE) is a unitary system. The Part C Guam Early Intervention System (GEIS) is part of DOE’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. DOE 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 DOE'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.

**Technical Assistance System:**

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

DOE has a technical assistance system and 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, training, and support is 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.

As per OSEP’s June 23, 2020 Determination Letter, GEIS accessed technical assistance centers to provide consultation and support for improving performances on the following indicators: 1: Timely Provision of Services; 3C SS2: Early Childhood Outcomes-Appropriate Behaviors to Meet Their Needs; 4A: Family Involvement; and 8A: Early Childhood Transition. 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).

As a result, the following training and technical assistance activities include the GEIS actions taken:

•Training and support facilitated by Dr. Naomi Younggren, Consultant for the Early Childhood Technical Assistance Center (ECTA). Dr. Younggren worked closely with the GEIS staff and Guam CEDDERS in the development of Guam’s IFSP Rubric tool that was piloted from August 2020 through February 2021. The input gathered by the GEIS Teams were used to update the IFSP processes and forms.

• Training and support was provided by Dr. Laurie Vismara, Consultant, Early Start Denver Model (ESDM). Dr. Vismara provided technical assistance in the parent coaching practices of the ESDM. The service providers have been incorporating the ESDM coaching practices with parents.

•Training and support was provided by Guam CEDDERS, Early Childhood Consultant, Elaine Eclavea. Ms. Eclavea provided ongoing training and support on the - a) Facilitation of the Continuous Quality Improvement (CQI) Team Meetings. As a result, the CQI team developed a referral protocol, in efforts to decrease the number of refusals. The protocol provides a process for service providers to discuss with families, the importance of developmental monitoring and screening. This referral protocol is now part of the GEIS Intake to Referral procedures; b) Service Coordinator Training sessions. As a result, Service Coordinators have increased knowledge and skills sets around understanding IDEA, building relationships with families, child development, and the fundamentals of service coordination; c) Early Childhood Coaching Reflection Sessions. As a result, GEIS staff continues to refine their coaching skills in the facilitation of virtual tele intervention home visiting; and d) GEIS SSIP Virtual Parent Forum and the Parent Interactive Virtual Training Session. As a result, parents were provided tips and strategies on how to increase their child's expressive language skills.

• Technical assistance and support from Guam DOE's Compliance Monitoring Office on the General Supervision Part C requirements and the Monitoring System. As a result, GEIS staff are cognizant of the compliance requirements and the needs to ensure appropriate documentation.

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 assessed through 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 evidenced-based practices. The Program uses other ways such as, the review of data compiled from the training evaluations, observations, and feedback from parents, service providers, Guam Early Learning Council (GELC), and the Part C Guam Interagency Coordinating Council (GICC) members.

**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.**

As part of Guam DOE’s State Strategic Plan, several goals were developed to improve educational outcomes for all students. One such goal is that DOE 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 DOE School Calendar. The nine (9) professional days are designated specifically to the state-wide initiatives. Since the GEIS is a part of the DOE 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 presents all early childhood serving agencies. GEIS continues to partner and collaborate with all early childhood serving agencies in planning for professional development activities. Department of Public Health and Social Services (DPHSS) continues to be an excellent collaborator in supporting shared professional development activities. Some of these activities, include but not limited to, Parent Café, Strengthening Families/Protective Factors Framework, and the Learn The Signs, and GELC early childhood initiatives. Other collaborative technical assistance and professional development was provided through partnership with the Kariñu: Guam’s Early Childhood System of Care and Guam's Linking Action of Unmet Needs for Children's Health (LAUNCH) Program, the Guam Early Hearing Detection and Intervention (EHDI) Project, and the Preschool Development Grant (PDG) Birth to Five project. .

GEIS continues to provide training to build confidence and competences and to ensure these strategies are implemented to its fidelity. These training sessions include: 1) Routines Based Intervention, 2) Early Childhood Coaching, and 3) Infusing and using Child and Family Outcomes throughout the IFSP process by and ensuring that the quality components of intervention visits are documented. The Program continues to monitor these strategies through observations and data collection fidelity checks.

In addition, GEIS continues to provide training for parents on evidence-based strategies and shares the different tools and resources when working with infants and toddlers and their families.

**Stakeholder Involvement:**

**The mechanism for soliciting broad stakeholder input on 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 Systemic Improvement Plan (SSIP).**

An invitation was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
Part C APR Core Team meeting; July 20, 2020
PDG Early Learning Council (ELC) Leadership meeting: July 27, 2020
ICC Quarterly Meeting: Sept. 15, 2020
GEIS Continuous Quality Improvement (CQI) Team 1 meeting: Sept.16, 2020
GEIS CQI Team 2 meeting: Sept. 18, 2020
Guam Early Hearing Detection and Intervention (EHDI) Advisory Committee and Learning Committee Meeting: Sept. 22, 2020
Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

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

YES

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2018 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 2018 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 2018 APR in 2020, is available.**

The GEIS will report annually to the public as soon as practicable, but no later than 120 days following the submission of the FFY 2019 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 in 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

In the FFY 2019 SPP/APR, Guam must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, Guam must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, Guam must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since Guam's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP’s coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting Guam’s capacity to improve its SiMR data.

Guam's IDEA Part C determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State 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 2019 SPP/APR submission, due February 1, 2021, 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 2018 SPP/APR**

DOE have accessed the following technical assistance centers to provide consultation and support for the following indicators: 1, 3C SS2, 4A, and 8A that displayed slippages in the FFY 2018 APR. The Technical assistance, training, and support was based on program needs identified in improving timely services, child and family outcomes, and transition planning.

GEIS received technical assistance from the following:

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), (through the OSEP technical assistance calls, emails and access through training and technical assistance through Dr. Naomi Younggren, and through the University of Guam Center for Excellence in Developmental Disabilities Education, Research and Service (CEDDERS). In addition, technical assistance and support from Guam DOE's Compliance Monitoring Office on the General Supervision Part C requirements and the Monitoring System.

## Intro - OSEP Response

Guam's determinations for both 2019 and 2020 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 25, 2020 determination letter informed Guam that it must report with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which Guam received assistance; and (2) 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 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 the Guam's SPP/APR document.

The Department has imposed Specific Conditions on Guam's FFY 2020 IDEA Part C grant award and those Specific Conditions are in effect at the time of the determination.

## Intro - Required Actions

Guam's IDEA Part C determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 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 2020 SPP/APR submission, due February 1, 2022, 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 90.63% | 98.15% | 95.56% | 95.68% | 96.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 61 | 63 | 96.00% | 100% | 96.83% | 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.***

0

**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 as to 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, 2019 to June 30, 2020

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

The actual data for 2019-2020, 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.

For this reporting period, GDOE is receiving contractual OT from a local vendor, and needs to ensure they meet with child and family within the required timeframe. The vendor schedules with families their appointments. During this reporting, two (2) were seen by the OT beyond the timeframe for timely services.

**If needed, provide additional information about this indicator here.**

For this reporting period, GEIS performance was at 96.83% (61/63). There were 2 infants and toddlers with and IFSP who did not receive timely early intervention services due to the following Program delays:
Upon reviewing the child’s IFSP folder, the following are the reason for the untimely early intervention services:

•Child #1: Timely service was required on January 20, 2020 however, direct OT services was not able to schedule prior to the COVID- 19 pandemic that resulted in a “Stay Home Order”. The child exited GEIS in July 2020.

•Child #2: Direct OT services was delayed due to the OT schedule. Service should have commenced on March 6, however, service began on March 12, 2020.

Consultation services between GEIS service providers and OT continued during this period as a support to the child and family.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 4 | 4 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

**Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements***

In FFY 2018, the Guam Early Intervention System (GEIS) reported 96% (144/150) substantial compliance with Indicator 1. As reported in the FFY 2018 APR, there were six infants and toddlers who did not receive early intervention services timely, as indicated in their IFSPs. These reported noncompliance for Indicator 1 included five infants and toddlers receiving their required early intervention services over the timely service requirement and one infant/toddler reported as no longer in the jurisdiction of the program before receiving their required early intervention service.

In June 2019, the GDOE Compliance Monitoring Office (CMO) issued a written notification of findings of noncompliance to the Division of Special Education, GEIS for four individual instances of noncompliance with Indicator 1 timely services requirement. These four individual instances were included in the FFY 2018 APR Indicator 1 performance data.

The two individual instances of noncompliance reported in the FFY 2018 Indicator 1 performance data not identified by CMO as findings of noncompliance occurred after the date of the June 7, 2019 program data report reviewed by CMO to issue the written notification of findings of noncompliance and were within the FFY 2018 reporting period. As described in the FFY 2018 APR for Indicator 1, these two instances of noncompliance were corrected within the FFY 2018 reporting period. These two instances of noncompliance were part of the subsequent data reviewed by CMO to determine whether GEIS is correctly implementing the specific regulatory requirement, consistent with OSEP Memo 09-02.

The CMO verifies that each individual case of noncompliance is corrected through file reviews and program data reports. Consistent with OSEP Memo 09-02, CMO also reviews subsequent data through a review of program data reports to determine verified correction of noncompliance to ensure that GEIS is correctly implementing the timely services regulatory requirements based on updated data demonstrating 100% compliance.

In FFY 2019, the CMO verified that the GEIS demonstrated timely correction of the Indicator 1 timely services requirement. This occurred in the months of April 2020 and May 2020, which were within the one-year correction period. Verified correction included a review of subsequent data demonstrating 100% compliance with Indicator 1 timely services requirement, which demonstrated that the GEIS is correctly implementing the Indicator 1 timely services requirement.

**Describe how the State verified that each *individual case* of noncompliance was corrected**

The GDOE CMO verifies that each individual case of noncompliance is corrected through file reviews and program data reports. As reported in the FFY 2018 APR Indicator 1, the individual instances of noncompliance were documented as corrected or no longer in the jurisdiction of the program. Consistent with OSEP Memo 09-02, CMO also reviewed subsequent data through a review of program data reports to determine verified correction of noncompliance to ensure that the GEIS is correctly implementing the timely services requirement based on updated data demonstrating 100% compliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

Because Guam reported less than 100% compliance for FFY 2019, Guam must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2020 SPP/APR, that it has verified that, it 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 the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2019.

# 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 EDFacts 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** |
| --- | --- |
| 2005 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 99.30% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 100.00% |

**Targets: Description of Stakeholder Input**

An invitation was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
Part C APR Core Team meeting; July 20, 2020
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Guam Early Hearing Detection and Intervention (EHDI) Advisory Committee and Learning Committee Meeting: Sept. 22, 2020
Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 156 |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Total number of infants and toddlers with IFSPs | 157 |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 156 | 157 | 99.30% | 100.00% | 99.36% | Did Not Meet Target | No Slippage |

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

In this indicator, one (1) child and family received services at the Child Protective Office, as required by a court order.

## 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 was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
Part C APR Core Team meeting; July 20, 2020
PDG Early Learning Council (ELC) Leadership meeting: July 27, 2020
ICC Quarterly Meeting: Sept. 15, 2020
GEIS Continuous Quality Improvement (CQI) Team 1 meeting: Sept.16, 2020
GEIS CQI Team 2 meeting: Sept. 18, 2020
Guam Early Hearing Detection and Intervention (EHDI) Advisory Committee and Learning Committee Meeting: Sept. 22, 2020
Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

**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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A1** | 2013 | Target>= | 60.00% | 62.50% | 65.50% | 68.00% | 70.00% |
| **A1** | 100.00% | Data | 45.00% | 46.81% | 45.45% | 47.92% | 56.86% |
| **A1 AR** | 2006 | Target>= |  | 62.50% |  | 68.00% | 70.00% |
| **A1 AR** |  | Data | 100.00% | 100.00% |  | 100.00% | 100.00% |
| **A2** | 2013 | Target>= | 68.00% | 70.00% | 72.00% | 74.00% | 76.00% |
| **A2** | 100.00% | Data | 58.33% | 63.74% | 59.09% | 55.17% | 56.10% |
| **A2 AR** | 2006 | Target>= |  | 67.50% |  | 74.00% | 76.00% |
| **A2 AR** |  | Data | 100.00% | 100.00% |  | 100.00% | 100.00% |
| **B1** | 2013 | Target>= | 65.50% | 67.50% | 70.50% | 73.00% | 75.00% |
| **B1** | 100.00% | Data | 50.77% | 53.57% | 55.36% | 45.76% | 58.18% |
| **B1 AR** | 2006 | Target>= |  | 67.50% |  | 73.00% | 75.00% |
| **B1 AR** |  | Data | 100.00% | 100.00% |  | 100.00% | 100.00% |
| **B2** | 2013 | Target>= | 55.00% | 57.50% | 60.00% | 62.00% | 64.00% |
| **B2** | 100.00% | Data | 48.96% | 53.85% | 50.00% | 44.83% | 48.78% |
| **B2 AR** | 2006 | Target>= |  | 57.50% |  | 62.00% | 64.00% |
| **B2 AR** |  | Data | 90.90% | 100.00% |  | 100.00% | 100.00% |
| **C1** | 2013 | Target>= | 61.00% | 63.50% | 66.00% | 68.00% | 70.00% |
| **C1** | 100.00% | Data | 52.38% | 51.02% | 48.15% | 36.17% | 50.00% |
| **C1 AR** | 2006 | Target>= |  | 63.50% |  | 68.00% | 70.00% |
| **C1 AR** |  | Data | 100.00% | 100.00% |  | 100.00% | 100.00% |
| **C2** | 2013 | Target>= | 62.00% | 64.00% | 66.00% | 68.00% | 70.00% |
| **C2** | 100.00% | Data | 56.25% | 64.84% | 56.82% | 54.02% | 50.00% |
| **C2 AR** | 2006 | Target>= |  | 64.00% |  | 68.00% | 70.00% |
| **C2 AR** |  | Data | 100.00% | 100.00% |  | 100.00% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1 >= | 66.00% |
| A1 AR |  |
| Target A2 >= | 66.30% |
| A2 AR |  |
| Target B1 >= | 65.50% |
| B1 AR |  |
| Target B2 >= | 54.00% |
| B2 AR |  |
| Target C1 >= | 59.00% |
| C1 AR |  |
| Target C2 >= | 61.00% |
| C2 AR |  |

**FFY 2019 SPP/APR Data**

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

77

**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 | 1 | 1.30% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 20 | 25.97% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 13 | 16.88% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 19 | 24.68% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 24 | 31.17% |

| **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 | 0 | 0.00% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 0 | 0.00% |

| **Not including at-risk infants and toddlers** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 32 | 53 | 56.86% | 66.00% | 60.38% | Did Not Meet 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 | 43 | 77 | 56.10% | 66.30% | 55.84% | Did Not Meet Target | No Slippage |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 0 | 0 | 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 | 0 | 0 | 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 | 1 | 1.30% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 22 | 28.57% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 21 | 27.27% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 14 | 18.18% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 19 | 24.68% |

| **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 | 0 | 0.00% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 0 | 0.00% |

| **Not including at-risk infants and toddlers** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 35 | 58 | 58.18% | 65.50% | 60.34% | Did Not Meet 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 | 33 | 77 | 48.78% | 54.00% | 42.86% | Did Not Meet Target | Slippage |

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

GEIS Performance for this reporting period is 42.86% (33/77). Of the 77 infants and toddlers that exited, there were 33 or 42.86% that reached or maintained age expected skills the acquisition and use of knowledge and skills (including early language / communication). This is a slippage of 5.92% in comparison to FFY 2018 Performance of 48.78%. Guam did not meet the target of 54% for this year.

The stakeholder reviewed and analyzed specific data to such as age of entry, years of service, disability, race, or ethnicity as possible reasons why 21 or 27.3% of the children that exited were in category “c” - Children who improved functioning to a level nearer to same-age peers but did not reach it.

Age at entry:
o 1 out of 21 were enrolled in the program between 1 to 11 months of age;
o 7 were enrolled between 12 to 23 months of age; and
o 13 were enrolled before 24 to 36 months of age.

Service time:
o 14 out of the 21 received less than 11 months of services;
o 6 received between 12 to 23 months of services; and
o 1 received between 24 and 36 months of services.

Disability category:
o 7 were eligible as established condition.
o 14 with developmental delays

Ethnicity:
o 9 were Chamorro.
o 1 was Pohnpeian.
o 1 was Filipino.
o 1 was Yapese.
o 3 were Chuukese.
o 6 were all others.

Gender:
o 15 were males.
o 6 were females.

Reason for referral for early intervention services:
• 4 for hearing;
• 3 for prenatally drug exposed; and
• 14 for speech and language concerns.

At the Stakeholder input session, additional drill down data was requested to determine the number of actual services the children received, and the number identified in the IFSP. The purpose of this drill down data, is to determine if this may have contributed to the slippage of 5.29%. Based on the data review of 21 children that were in category “c”. There were 5 that received 80 to 100% of scheduled home visits; 4 received 70 to 50% of their home visits; and 11 children received less than 40% of visits. Of the number and range of cancellations by parents, there were 5 children that families had cancelled between 60 and 50% of the scheduled services; 3 children between 40 to 20%; 10 children had cancellation of services between 19 to 3%; and 2 children with no cancellations.

Upon review of the data, stakeholders discussed the possible reasons for the slippage that may be attributed to the following: 1) the late entry into accessing early intervention services; 2) the increase number of children identified as being eligible as ASD; and 3) the high number cancellations by parents of scheduled home visiting services.

The Stakeholder recommended that the Program use the CQI process to determine why families are cancelling services and develop strategies to reduce the number cancellations. Also discussed was that the Program would continue aggressively through social media to provide public awareness efforts to increase parental understanding of the importance of early identification and enrollment into GEIS

| **Just at-risk infants and toddlers/All infants and toddlers** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 0 | 0 | 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 | 0 | 0 | 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 | 1 | 1.30% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 25 | 32.47% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 8 | 10.39% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 24 | 31.17% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 19 | 24.68% |

| **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 | 0 | 0.00% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 0 | 0.00% |

| **Not including at-risk infants and toddlers** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 32 | 58 | 50.00% | 59.00% | 55.17% | Did Not Meet 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 | 43 | 77 | 50.00% | 61.00% | 55.84% | Did Not Meet Target | No Slippage |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 0 | 0 | 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 | 0 | 0 | 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 | 121 |
| 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. | 19 |

| **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.

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 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 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)**

There were no at-risk infants and toddlers exited at this reporting period.

## 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.

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

If the analysis shows that the demographics of the families responding are not representative of the demographics of infants, toddlers, and families enrolled 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.

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2005 | Target>= | 95.00% | 95.50% | 95.70% | 96.00% | 96.50% |
| A | 91.00% | Data | 96.23% | 96.05% | 96.83% | 100.00% | 94.87% |
| B | 2005 | Target>= | 90.00% | 90.50% | 91.00% | 92.00% | 94.00% |
| B | 84.00% | Data | 92.45% | 94.74% | 98.41% | 97.56% | 97.44% |
| C | 2005 | Target>= | 94.00% | 95.00% | 96.00% | 97.00% | 97.00% |
| C | 79.00% | Data | 98.11% | 100.00% | 98.41% | 100.00% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A>= | 98.00% |
| Target B>= | 98.00% |
| Target C>= | 100.00% |

**Targets: Description of Stakeholder Input**

An invitation was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
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GEIS CQI Team 2 meeting: Sept. 18, 2020
Guam Early Hearing Detection and Intervention (EHDI) Advisory Committee and Learning Committee Meeting: Sept. 22, 2020
Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

At the stakeholder input sessions, participants indicated that they were pleased with the overall high percentage of 90% or greater performance of GEIS for many years. Stakeholders further noted that GEIS is performing close to the national percentage of 95% for this indicator. The performance of GEIS was also verified at the parent input session and from the GEIS Tele-Intervention Survey that was disseminated in July – August 2020. Keep up the Good Job GEIS!!

Stakeholders discussed the following reasons that may have attributed to the low response rate: 1) the stress factors families are facing due to the global pandemic, and 2) families lack knowledge of how to navigate information through the internet.

In efforts to increase family engagement, due to the low return rate of parent surveys for this reporting period, GEIS, with support from Guam CEDDERS, mailed out 36 surveys to families that could not be reached by email or phone. The surveys included a self-addressed envelope for families to place the completed surveys to mail back to Guam CEDDERS. Of the 36 surveys mailed out, only 2 completed surveys were mailed back and 7 surveys were sent back due to an insufficient or undeliverable address provided. In monitoring the low response rates, the Program Coordinator sent out numerous reminders to Service Coordinators to contact parents and kindly remind them to complete the survey online. These are challenging and stressful times for many families. There were some families that relocated due to family hardships as a result from the global crisis.

Stakeholders also indicated caution should be noted in reviewing the performance percentage due to the small “n” number.

At the Stakeholder input session, participants discussed the possibility of changing the methodology of disseminating the survey to capture more families completing the survey after the IFSP meetings or prior to transitioning out of the program. The Program will further draft the change of protocol for the next reporting cycle.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 143 |
| Number of respondent families participating in Part C  | 22 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 22 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 22 |
| 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 | 20 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 22 |
| 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 | 21 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 22 |

| **Measure** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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) | 94.87% | 98.00% | 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) | 97.44% | 98.00% | 90.91% | Did Not Meet Target | 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) | 100.00% | 100.00% | 95.45% | Did Not Meet Target | Slippage |

**Provide reasons for part B slippage, if applicable**

For indicator 4B: The percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs, the performance for this reporting period is 20/22 or 90.91%. This is a slippage of 6.53% from FFY 2018 performance of 97.44%. The reason for the slippage may be due to the fact that these families were in the program for less than 6 months.

**Provide reasons for part C slippage, if applicable**

For indicator 4C: The percent of families participating in Part C who report that early intervention services have helped their children develop and learn, GEIS did not meet the target of 100% for this reporting period. GEIS performance for this indicator was 21/22 or 95.45% slippage of 4.55% from FFY 2018 performance of 100%. The reason for the slippage may be due to the fact that these families were in the program for less than 6 months.

| **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 families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program. | YES |

**Include the State’s analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.**

GEIS conducted an analysis of the demographics to determine whether the FFY 2019 survey response group was representative of the population served. A review by ethnicity revealed that the respondents were generally representative of the majority of the ethnic groups of the population of families that received the survey when examining breakdown by ethnicity.

Although there were many attempts to request for families to complete the survey there were 22 parents that completed the survey. Based on the analysis, there were 13 or 59% of Chamorro ethnicity; 5 or 23% Filipino, 2 or 9% are Chuukese; and 2 or 9% from other Pacific Islanders. The breakdown of ethnicities represent the demographics of children enrolled in Guam Early Intervention System. The families of infants and toddlers that were 24 to 36 months of age had the highest response at 14 or 64%; toddlers 12 to 23 months of age had 7 or 32%; and under 12 months of age had 1 or 5% of families that completed the survey. Persons completing the survey are as follows: 1) Parents were 18 or 82%; Grandparents were 2 or 9%; and 2 or 9% from foster parents.

A review by geographic location also indicated that the respondents were representative of a majority of the villages where the majority of infants and toddlers served reside. Representation of the survey results represented families living at the different regions of the island: 9 or 41% were families in the central part of Guam; 9 or 41% from the northern villages; and 4 or 18% were from families living in the southern villages.

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

Due to the COVID-19 Pandemic, the GEIS Program had experienced a low return rate of parent surveys for this reporting period. For this indicator, there were 22 out of 143 or (15%) families of infants and toddlers enrolled in the program that completed and returned the survey to the Program. Due to the COVID-19 pandemic, the GEIS Service Coordinators reached out to parents via email and phone requesting families to complete the online survey and was offered the option having the survey be conducted through a phone interview with a Guam CEDDERS staff. In addition, with support from Guam CEDDERS, 36 surveys were mailed out to families that could not be reached by email or phone. The surveys included a self-addressed envelope for families to place the completed surveys to mail back to Guam CEDDERS. Of the 36 surveys mailed out, only 2 completed surveys were mailed back and 7 surveys were sent back due to an insufficient or undeliverable address provided. In monitoring the low response rates, the Program Coordinator sent out numerous reminders to Service Coordinators to contact parents and kindly remind them to complete the survey online. These are challenging and stressful times for many families. There are some families that have had to relocate due to family hardship due to the global crisis. The Program continues to try to locate and update the families contact information.

## 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 compared to national data. (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 EDFacts 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 and compare the results to the target and to national data. 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 1.30% | 1.35% | 1.40% | 1.50% | 1.55% |
| Data | 1.61% | 1.65% | 0.99% | 0.86% | 1.13% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 1.31% |

Targets: Description of Stakeholder Input

An invitation was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
Part C APR Core Team meeting; July 20, 2020
PDG Early Learning Council (ELC) Leadership meeting: July 27, 2020
ICC Quarterly Meeting: Sept. 15, 2020
GEIS Continuous Quality Improvement (CQI) Team 1 meeting: Sept.16, 2020
GEIS CQI Team 2 meeting: Sept. 18, 2020
Guam Early Hearing Detection and Intervention (EHDI) Advisory Committee and Learning Committee Meeting: Sept. 22, 2020
Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 1 with IFSPs | 25 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 1 | 2,917 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 25 | 2,917 | 1.13% | 1.31% | 0.86% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

For FFY 2019, GEIS performance was at 25/2917 or 0.86% of infants birth to 1 with IFSP. There were 25 infants’ birth to 1 that was reported in the 618 data submitted in March 2020. This is a slippage of 0.27% from what was reported in FFY 2018 of 1.13%. GEIS did not meet the target of 1.31%.
GEIS reviewed data for this reporting period to determine any areas that the Program may need to look at the reasons for not meeting the target for this indicator. Based on the drill down data from 12/2/19 to the date this reported was submitted, there were 182 referrals for infants’ birth to 1, of which 16 or 8.79% resulted in a development of an IFSP. Based on the data, there were 31 children that passed screener; 3 children were not eligible for early intervention services; 2 children that have documentation of attempts to contact, however, there were no responses; 9 children have documentation indicating that families have refused services; and 115 that were on the pending list.

The stakeholders drilled this data down even further to determine that of the 115 pending cases due to hearing, there are 69 cases that requires audiological evaluations. These evaluations were delayed due to the COVID-19 pandemic. Since August 2020 and in partnership with the Guam Early Hearing Detection and Intervention (EHDI), appointments have been made with parents to bring their infants into the clinic for the audiological testing. Also noted by Stakeholders was the high number of families that have refused and/or do not show up for the testing. The stakeholders discussed the possible reasons for this may be attributed to the families’ fear of going out of their homes during this world crisis.

In efforts to reduce the refusal rate, the Program has been working for the past year in using a Continuous Quality Improvement (CQI) process to get to the root cause to why parents are refusing services and to determine the reasons for the high refusal rate. The CQI Team have developed an action plan to address this challenge. In August 2020, the Program implemented a “Referral Protocol” process or flow chart that staff will use to ensure that prior to parents refusing services, parents will be requested to complete the developmental screening and be informed of the results.

**Compare your results to the national data**

Based on the EDEN Submission System: SY 2019-2020 IDEA Part C Child Count and Settings Table, the national average for birth to one is at 1.37% and exceeds Guam Part C's performance at 0.86%.

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

In addition, GEIS is working closely with the Guam Early Learning Council (GELC) and has included numerous posts on the GELC Facebook pages to promote the importance of early identification and information to contact GEIS. Furthermore, the Program has revised the procedures for referral and intake in efforts to be intentional in sharing with parents the importance of developmental monitoring and screening by using the information from the Center for Disease Control and Prevention (CDC) the Learn The Signs Act Early materials. The GEIS staff is partnering with Guam’s Act Early Ambassador and the GELC Early Detection and Intervention Work Group to provide orientation and awareness to primary referral sources on the 4-Key Steps for Early Detection and Intervention that is part of the CDC national effort.

## 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 compared to national data. (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 EDFacts 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 and compare the results to the target and to national data. 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 1.85% | 1.90% | 1.95% | 2.00% | 2.03% |
| Data | 1.85% | 2.15% | 1.66% | 1.31% | 1.65% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 2.03% |

Targets: Description of Stakeholder Input

An invitation was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
Part C APR Core Team meeting; July 20, 2020
PDG Early Learning Council (ELC) Leadership meeting: July 27, 2020
ICC Quarterly Meeting: Sept. 15, 2020
GEIS Continuous Quality Improvement (CQI) Team 1 meeting: Sept.16, 2020
GEIS CQI Team 2 meeting: Sept. 18, 2020
Guam Early Hearing Detection and Intervention (EHDI) Advisory Committee and Learning Committee Meeting: Sept. 22, 2020
Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 3 with IFSPs | 157 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 3 | 8,690 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 157 | 8,690 | 1.65% | 2.03% | 1.81% | Did Not Meet Target | No Slippage |

**Compare your results to the national data**

Based on the EDEN Submission System: SY 2019-2020 IDEA Part C Child Count and Settings Table, the national average for birth to three is at 3.7% and exceeds Guam Part C's performance at 1.81%.

**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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 95.97% | 98.21% | 98.08% | 97.41% | 96.90% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 95 | 99 | 96.90% | 100% | 97.98% | Did Not Meet Target | No Slippage |

**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.**

2

**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, 2019 to June 30, 2020.

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

Of the 99 infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted, 95 were held within the 45-day timeline, two had documented delays attributed to exceptional family circumstances due to the global pandemic, and two eligible infants had their IFSP conducted after the 45-day timeline due to program delays.

Guam did not meet the 100% compliance for this indicator and reported 97.98% (97/99) for this compliance indicator.

The two (2) eligible infants that had their initial IFSP conducted after the 45 day timeline due to program delays were for the following reasons:

Child #1: Attempts to hold the meeting was scheduled twice. The parent cancelled the first meeting and the team rescheduled the meeting but it was cancelled by the Program due to team members being out sick, which resulted in the IFSP being completed 45 days late.

Child #2: An oversight by the service coordinator to schedule the intake with families resulted in a delay in scheduling the meeting. The IFSP was completed 6 days after the 45-day timeline.

All GEIS Service Coordinators staff with their IFSP teams monthly to discuss the status of cases. Printouts of cases, which indicate the 45-day “flag” date, is 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.

A CQI process will 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.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 5 | 5 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

**Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements***

In FFY 2018, the Guam Early Intervention System (GEIS) reported 96.90% (125/129) substantial compliance with Indicator 7. As reported in the FFY 2018 APR, there were four infants and toddlers who did not have their initial IFSP meeting conducted within the Part C 45-day timeline requirement. These reported noncompliance for Indicator 7 were corrected but over the Part C 45-day timeline requirement, as described in the FFY 2018 APR for Indicator 7.

In June 2019, the GDOE Compliance Monitoring Office (CMO) issued a written notification of noncompliance to the GEIS within the Division of Special Education for five individual instances of noncompliance with Indicator 1 timely services requirement. These five individual instances of noncompliance included the four individual instances reported in the FFY 2018 APR Indicator 7 performance data. The one remaining finding of noncompliance was verified by CMO as a parent delay or exceptional circumstance, which was not included as an individual instance of noncompliance in the FFY 2018 APR indicator 7 performance data.

The CMO verifies that each individual case of noncompliance is corrected through file reviews and program data reports. Consistent with OSEP Memo 09-02, CMO also reviews subsequent data through a review of program data reports to determine verified correction of noncompliance to ensure that GEIS is correctly implementing the timely services regulatory requirements based on updated data demonstrating 100% compliance.

In FFY 2019, the CMO verified that the GEIS demonstrated timely correction of the Indicator 7 Part C 45-day timeline requirement. Verification included a review of subsequent data demonstrating 100% compliance with Indicator 7 Part C 45-day timeline requirement, which demonstrated that the GEIS is correctly implementing the Indicator 7 Part C 45-day timeline requirement.

**Describe how the State verified that each *individual case* of noncompliance was corrected**

The GDOE CMO verifies that each individual case of noncompliance is corrected through file reviews and program data reports. The CMO also verified that the five individual instances of noncompliance included the four individual instances of noncompliance reported in FFY 2018 APR for Indicator 1 and one individual instance that was verified as a parent delay or exceptional circumstance. Consistent with OSEP Memo 09-02, CMO also reviewed subsequent data through a review of program data reports to determine verified correction of noncompliance to ensure that the GEIS is correctly implementing the Part C 45-day timeline requirement based on updated data demonstrating 100% compliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

## 7 - Required Actions

Because Guam reported less than 100% compliance for FFY 2019, Guam must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2020 SPP/APR, that it has verified that, it 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 the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2019.

# 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 98.68% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 98 | 98 | 98.68% | 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.**

0

**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, 2019 to June 30, 2020

**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 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 the data accurately reflect 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% (98/98) 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)**

In FFY 2018, GEIS reported 98.68% (75/76) substantial compliance with Indicator 8A requirement. As reported in FFY 2018 for Indicator 8A, the one individual instance of noncompliance was corrected within the reporting period. The GDOE Compliance Monitoring Office (CMO) did not issue a written notification of finding of noncompliance for the one (1) individual instance of noncompliance reported in the FFY 2018 indicator 8A performance data. In June 2019, the CMO conducted a GEIS program monitoring review of the IDEA Part C procedural requirements. At the time of the review, the one child reported in Indicator 8A as not receiving timely transition steps and services was not in the program’s jurisdiction. The child exited from receiving Part C early intervention services in January 2019 upon reaching age three, and therefore, was not listed in the June 2019 program data report that CMO reviewed. The CMO therefore did not issue a written notification of finding of noncompliance for Indicator 8A.

Although the CMO did not issue a finding of noncompliance for the one individual instance of noncompliance reported in the FFY 2018 APR for Indicator 8A, GEIS applied the requirements of OSEP memo 09-02 for ensuring verified correction of noncompliance. As described in the FFY 2018 APR Indicator 8A, the individual instance of noncompliance was verified as corrected within the FFY 2018 reporting period. GEIS also ensured verified correction through a review of updated data after the individual instance of noncompliance was reported in the FFY 2018 APR for Indicator 8A. GEIS reported 100% compliance data for FFY 2019 APR Indicator 8A, which demonstrates that the GEIS is correctly implementing the Indicator 8A specific regulatory requirement, consistent with OSEP memo 09-02.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 98.18% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 70 | 70 | 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

**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% (70/70) 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, 2019 to June 30, 2020

**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% (60/60) 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)**

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 98.11% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 59 | 63 | 100.00% | 100% | 93.65% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

The were 4 children who were potentially eligible to Part B where the transition conference was late. The reason for the slippage was due to the late scheduling by the service coordinators. This was an oversight by the two service coordinators in scheduling for the transition conferences. Transition conference was held for one (1) child at 35 months of age, before exiting the program. Transition conference was not held for three (3) children by the time they exited the program.

The GEIS Program Coordinator met individually with each Service Coordinators assigned to the cases and reviewed the procedures and steps to scheduling timely transition meetings. .The GEIS Program Coordinator will meet monthly with the service coordinators to ensure that those children that will be exiting have timely transition conference.

**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.**

0

**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 1, 2019 to June 30, 2020

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

For Indicator 8C, there were Sixty-three (63) that “exited” at the transition planning age with a referral to Part B and had a transition conference prior to their third birthday. Based on data, fifty-nine (59) had their transition conference at least 90 days prior to their third birthday. There were four (4) not done timely due to program delays; all were due to late scheduling with the families.

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 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8C - Prior FFY Required Actions

None

## 8C - OSEP Response

## 8C - Required Actions

Because Guam reported less than 100% compliance for FFY 2019, Guam must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, Guam must report, in the FFY 2020 SPP/APR, that it has verified that, it 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 the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why Guam did not identify any findings of noncompliance in FFY 2019.

# 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 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 EDFacts 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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1(a) Number resolution sessions resolved through settlement agreements | 0 |

**Targets: Description of Stakeholder Input**

An invitation was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
Part C APR Core Team meeting; July 20, 2020
PDG Early Learning Council (ELC) Leadership meeting: July 27, 2020
ICC Quarterly Meeting: Sept. 15, 2020
GEIS Continuous Quality Improvement (CQI) Team 1 meeting: Sept.16, 2020
GEIS CQI Team 2 meeting: Sept. 18, 2020
Guam Early Hearing Detection and Intervention (EHDI) Advisory Committee and Learning Committee Meeting: Sept. 22, 2020
Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= |  |

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  |  |  | N/A | N/A |

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

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

Guam Part C follows the Guam Part B due process hearing procedures.

In May 2021, Guam Part C will update its 618 Dispute Resolution: Section C to reflect that Guam Part C uses 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 2019. 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 EDFacts 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.

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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1 Mediations held | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

An invitation was sent to stakeholders to participate in stakeholder work sessions to attain input on the development of Guam’s FFY 2019 APR. This was given to all GICC members and early childhood providers.

The development of FFY 2019-2020 Part C SPP/APR, included stakeholder input sessions, involved the following:

The GICC, parents and early intervention providers served as the primary stakeholder groups for the development of the SPP/ APR. The GICC members consist of parents, representatives of various agencies, and other programs identified by the GICC. 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 GELC, the SSIP Core Leadership team, and Parents during a Parent Input Session:

GEIS Staff Meeting: June 24, 2020
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Early Learning Council meeting: Sept. 30, 2020
Early Learning Council Leadership Meeting: October 13, 2020
ICC and GEIS Stakeholder Input Session on the APR: January 12, 2021
Parent Input Session on the APR: January 15, 2021

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= |  |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 meditations sessions were held. There were no meditations held during this reporting period.

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

Guam reported fewer than ten mediations held in FFY 2019. 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 – Part C SSIP Indicator



# 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:**

Yolanda S. Gabriel

**Title:**

Assistant Superintendent

**Email:**

ysgabriel@gdoe.net

**Phone:**

6713001322

**Submitted on:**

04/27/21 7:34:18 PM

# ED Attachments

  