**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**

**Idaho**



**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**

Overall, the Federal Fiscal Year (FFY) 2019 Annual Performance reporting period remained relatively stable for the Idaho Infant Toddler Program (ITP) until COVID-19 came to our state.

While progress was made in some indicators, and held steady in others, we continue to face ongoing challenges with turnover in service coordinator and service provider staff and contractors.
In FFY 19, ITP experienced a 25% separation rate for service coordinators.
• State employees – 15%
• Contractors – 35%

In FFY 19, ITP experienced a 7% separation rate for service providers.
• State employees – 6%
• Contractors – 8%

Based on the numbers above, overall service provider turnover rate is down by 10% from FFY 18. However, service coordinator turnover, especially contractors, is higher than it has ever been with an overall 20% increase. We know this is due to a variety of factors including but not limited to:
• Caseload size
• Required paper work and tracking of the many essential timelines
• Providing services virtually instead of in-person
• Burnout of seasoned service coordinators

COVID-19 has made FFY 19 and beyond an incredibly difficult time for Idaho’s lead agency and the seven local regions. Trying to keep up with all requirements of the IDEA, Part C and staying healthy and safe has been a challenging and tall order for our service coordinators and service providers, especially those with underlying health conditions.

Idaho was fortunate in that prior to COVID-19 we worked with numerous other divisions, our deputy attorney general, and other states to develop the ability to provide virtual services using an in house (WebEx) HIPAA/FERPA compliant platform. However, when COVID-19 hit our state, the lead agency went into overdrive to finish and modify the Virtual Early Interventions Guidelines and many accompanying documents to ensure it met the needs for our regional programs. The regional programs did a phenomenal job of learning the guidelines and accompanying documents and transitioning families to virtual early intervention services. This was not an easy task and many service coordinators, providers, and families struggled in the beginning. Fortunately, the regions now have a good system in place and are doing well with providing virtual services.

COVID-19 had an impact on most, but not all of the indicators in FFY 19. However, indicator #3 was the hardest hit as it was extremely difficult for staff and contractors to explain the ECO process and review ECO related materials via WebEx and over the phone. Doing anything using a computer device or phone makes it harder for people to focus. It was extremely difficult to effectively and completely communicate the ECO information to families and this is reflected in the data for this indicator.

Another challenge we faced was that some families did not have access to the internet or to an electronic device. As a result, we ended up providing services over the phone to the best of our ability. Idaho’s COVID-19 numbers have spiked and are currently the highest they’ve ever been. We are seeing some virtual service fatigue by all parties involved.

The lead agency also worked on guidelines to provide services in-person, in phases, and under very specific conditions with the use of PPE. Unfortunately, Idaho has many citizens who give little credence to COVID-19, and thus do not believe in wearing masks, social distancing, etc. This has been an added complication to providing limited services in-person. Going into the winter season and having to be indoors adds another layer of challenges and complexities.

Time and resources continue to be dedicated to implementing and evaluating the State Systemic Improvement Plan (SSIP) strategies outlined in the implementation plan for Phase III. However, consistent turnover with increased caseloads, especially for service coordinators, continue to make it increasingly difficult for regional programs, service providers and service coordinators to pilot, implement, and scale up activities identified in the SSIP. Additionally, State Lead Agency staff continue to take on large volumes of work without any substantive new resources. Adding COVID-19 to this has been like adding fuel to the fire. Our lead agency and regional programs are stretched in many areas beyond capacity.

Additional information related to data collection and reporting

The Idaho Infant Toddler Program uses a web-based data system, ITPKIDS, to collect all child, family, and provider level data as required by IDEA, Part C. The regional service coordinators, providers, and administrative assistants are responsible for recording required data in the system.

Since it’s inception, the Infant Toddler Program has used Crystal Reports software to generate reports from ITPKIDS. Several years ago, the Division of Information Technology stopped supporting Crystal Reports and required programs to switch to TABLEAU software. ITP now uses TABLEAU to generate reports.

**General Supervision System**

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

The Infant Toddler Program uses specific quality indicators and compliance measures to determine regional performance of regulatory requirements and other standards identified by OSEP and the state of Idaho.

Advisory Council
Monitoring of agencies, organizations, and activities used by the state to implement Part C is completed by the Department with the advice and assistance of the Infant Toddler Coordinating Council and the Regional Early Childhood Committees.

Data System and Verification
The Idaho Infant Toddler Programs electronic data collection and management system is web-based and contains all collected child enrollment, demographic, and caregiver data, as well as service coordination provision, eligibility categories, and service categories. The data system has undergone extensive revisions to create improved capacity for data collection, analysis, report generation, and billing capabilities, and it continues to be enhanced. The data system provides real-time data to both regional and Central Office personnel and is used to: Report 618 data to OSEP; Respond to many compliance and performance indicators in each program’s self-assessment; Determine compliance and performance standards for SPP/APR indicators. The data system populates relevant local program compliance and performance indicators included in the Regional Annual Performance Report (RAPR). Central office generates reports and data is transferred and reviewed annually for the APR and RAPR. The Lead Agency uses Tableau software, to review the data at regular intervals to ensure accuracy, reliability, and non-duplication.

Family Survey
Idaho Infant Toddler Program uses results from the ECO FOS-R to help identify issues and areas for improvement.

Self-Assessment
Local programs complete annual regional assessments using a standardized tool called the RAPR. Self-assessment indicators developed by the state (focusing on both compliance and quality) are aligned with the SPP/APR and the state’s data system. The Lead Agency populates relevant self-assessment indicators with data from the data system, ECO FOS-R results, and child outcome data, and sends it to regional programs to complete other elements from targeted file reviews, regional complaint logs and other sources of information. Programs are required to use other data sources when completing the self-assessment and determining performance in meeting targets. The Lead Agency verifies regional programs’ self-assessment data and provides TA to programs to develop a negotiated corrective action plan, which identifies concrete steps/timelines to remediate system challenges and address areas of concern or desired growth, as well as areas of non-compliance as appropriate. To help achieve the targeted objectives, regional programs include baseline data and measurable, time-specific objectives and performance targets, as well as identified needs for TA and training in corrective action and enhancement plans. To implement corrective action plans, the hub/regional leadership team is responsible for:
• Ensuring the plan is implemented as developed
• Documenting that the activities listed are occurring within the timelines identified in the plan
• Reviewing progress quarterly and adjusting the plan and the activities as warranted
• For compliance issues, reporting performance data and status of record review findings in the plan
• Requesting specific technical assistance from Central Office to implement the plan and resolve system challenges and any identified areas of
 non-compliance
• Advising Central Office of barriers and possible solutions to implementation that are not controlled at the regional level

Technical Assistance for Monitoring
The Lead Agency provides TA to regional programs on the use of the web-based data system and in the development and implementation of CAPs. The Lead Agency can require specific TA if non-compliance and improvements are not addressed in a timely manner. Hub/regional leadership teams access TA from in-state and national experts as needed to ensure correction of non-compliance, improve performance in meeting targets, and enhance quality practices to improve outcomes for children and their families.

Analysis of Complaints and/or Due Process Resolutions for Monitoring and TA Purposes
All families are provided with information on complaint and dispute resolution processes, including the availability of mediation. Formal and informal complaints logs with resolutions are maintained by the Lead Agency When a family submits a complaint, they are informed about the procedural safeguards and advised how to submit a formal complaint in writing, should they choose to do so. Families are also informed about mediation and encouraged to consider it as an option for resolving a dispute. If a family requests mediation or due process, the Lead Agency contacts appropriate mediators/hearing officers, confirms arrangements, and facilitates connection between the family and the mediator/hearing officer. The Lead Agency investigates administrative complaints and aggregates data/results from formal/informal complaints and due process hearings to identify or emphasize areas that need attention or for managing provider contracts. When non-compliance or areas needing improvement are identified, CAPs are written, and the Lead Agency ensures that correction of non-compliance occurs. The Lead Agency also ensures the timely completion of findings/resolutions, and analyzes data to modify policies, procedures, and practices as warranted.

Data Collection for SPP/APR
Idaho's web-based data system is aligned with the SPP/APR indicators. The RAPR is completed annually by all regions, and findings are used in the development of the SPP/APR. Information about Complaints and Due Process Hearings are aggregated and analyzed. The ECO FOS-R results and child outcomes data also inform the SPP/APR.

Enforcement, Including Sanctions
The Infant Toddler Program enforces compliance and performance through the following measures:
• Reporting data to the public
• Using results of the program's self-assessment to identify non-compliance, target technical assistance, and support programs in developing
 meaningful and effective improvement plans
• Reviewing compliance or performance issues with the Infant Toddler Coordinating Council
• Identifying systemic non-compliance or low performance and ensuing corrective actions. These issues may be identified through review of
 data, program self-assessment, complaints, and due process activities.

In instances where correction of non-compliance does not occur within 12 months of identification, the Lead Agency will take one or more of the following enforcement actions:
• Advising the region of available sources for technical assistance
• Directing the use of regional program funds on areas where the region needs assistance
• Requiring the region to prepare a corrective action plan, and/or enter into a compliance agreement with upper level administrators
• Withholding of Part C funds from the region, in extreme circumstances, by the Lead Agency

Regional programs will impose the following hierarchy of monitoring and enforcement actions for contracted services:
• Monitoring of contracts at least every six months
• Releasing payments only upon receipt of documentation of actual service provision
• Denying or recouping payment for services for which non-compliance is documented
• Halting all new referrals until deficiency is substantially remediated by the contractor
• Amending the provider contract to shorten the term by revising the end date
• Terminating or choosing not to renew the provider contract

After written notification of impending enforcement action, the Contractor may elect to meet with Lead Agency staff to review the available data, the steps necessary to achieve compliance, and the requirements for demonstrating improvement sufficient to reverse any enforcement action imposed.

**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.**

Idaho has the following mechanisms in place to ensure timely delivery of high-quality, evidence-based technical assistance and support to regional early intervention programs:

 • Tri-annual in-person meetings with hub leadership.
 • Monthly hub leadership conference calls.
 • Regional Annual Performance Report.
 • Corrective Action Plans.
 • Periodic TA calls with each region.
 • Infant Toddler Program eManual.
 • Infant Toddler Program Key Information Data System (ITPKIDS) web-based data system and Crystal Reports/Tableau software.
 • Statewide evidence-based early intervention mentors.
 • Mentorship and reflective supervision with statewide mentors and multi-disciplinary teams.
 • Access to national experts Dathan Rush and M'Lisa Shelden for Idaho’s evidence-based practices model.

**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.**

Idaho Code, Title 16, Chapter 1 assures a system of personnel development that provides:

 • Interdisciplinary pre-service and in-service training.
 • Training of a variety of personnel needed to meet the requirements of Part C.
 • Training specific to implementing strategies for the recruitment and retention of early intervention service providers to:
 -Meet the interrelated social-emotional, health, developmental, and educational needs of eligible infants and toddlers.
 -Assist families in enhancing the development of their children, and in participating fully in the development and implementation of the
 Individualized Family Service Plan (IFSP).
 • Training personnel to work in rural and home-based settings.
 • Training personnel to coordinate transitions.
 • Training personnel in social-emotional development of young children.

The procedures and activities associated with training personnel to implement services for infants, toddlers and their families comprise a Comprehensive System of Personnel Development (CSPD). The CSPD Part C system includes the following criteria:
 • Annual update of the staffing and training needs assessment that identifies statewide personnel development needs.
 • Development of a statewide plan for addressing personnel development needs.
 • Assurance that in-service training relates to the topics and competencies identified in needs assessments.
 • Provision of specialized orientation to newly hired or contracted professionals, as well as specialized continued education to long-term
 practitioners.
 • Dissemination of information regarding pre-service and in-service training courses, workshops, webinars, and conferences.
 • In-service training coordinated through the hub/regional Infant Toddler Program to public health and private providers, primary referral
 sources, professionals, and service coordinators regarding requirements for:
 o Child Find
 o Multidisciplinary evaluation/assessment
 o Individualized Family Service Plan/Service Coordination
 o Procedural Safeguards
 o Understanding the basic components of the Idaho Early Intervention System
 o Meeting the interrelated social or emotional, health, developmental, and educational needs of Part C eligible children
 o Assisting families in enhancing the development of their children by encouraging and facilitating full participation in the
 development and implementation of their Individualized Family Service Plans

Ongoing training to Part C providers is offered in each hub/region. An online eManual has been provided for procedures on child find, evaluation and assessment, individualized family service plans and transition, and procedural safeguards. Training in these components is required for all providers and is available as needed. Early intervention providers are provided training in the principles of evidence-based practices for infants and toddlers with disabilities and their families. Online training modules support key principles in early intervention quality practices in service coordination and IFSPs.

Additionally, regional/hub supervisors regularly contact and train groups and individual primary referral sources to orient them to the Infant Toddler Program, and share information regarding the benefits of early intervention, risks and eligibility criteria, how to make referrals, and procedural requirements. Pediatric and medical groups, the Idaho Perinatal Project, parent organizations, child care providers, Family and Community Services child protection workers, Maternal and Infant Early Childhood Home Visitors, and Special Nutrition Program for Women, Infants, and Children (WIC) clinicians are examples of target audiences included in the program's outreach efforts.

Parent education activities are facilitated by Idaho Parents Unlimited (IPUL), the Parent Training Information Center, and Regional Early Childhood Committees. Idaho Parents Unlimited, through their regional consultants, offers training on IFSP development, resource identification and coordination, parent rights, etc. Idaho Parents Unlimited also sponsors a semi-annual parent conference with a wide variety of sessions concerning parenting and disability issues.

Central Office staff hold regular technical assistance and coordination meetings with the Infant Toddler Program’s regional/hub leaders. Additionally, the lead agency arranges technical assistance contacts with each region to assist with program coordination.

The Department of Health and Welfare and the Infant Toddler Coordinating Council recognize the expertise of professionals for addressing pre-service and in-service training needs. National professional organizations and their Idaho chapters or affiliates assist organizations in implementing the Part C Comprehensive System of Personnel Development (CSPD).

Idaho has a Consortium for the Preparation of Early Childhood Professionals made up of faculty from each institution of higher education in the state, and representatives from various early childhood agencies and professional organizations. The Consortium facilitates coordination of university programs for the Early Childhood/Early Childhood Special Education Blended Certificate and articulation from two-year to four-year programs. Additionally, the Consortium partners with the Department of Health and Welfare to coordinate internship placements and to promote the use of evidence-based practice training in pre-service programs.

**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).**

The Central Office Infant Toddler Program staff identified the need for stakeholder input regarding new SPP indicator targets, including the newly added FFY 19 targets. Staff met to review the previous SPP indicator targets and actual data to identify potential starting points for the new FFY 2013-2018 and newly added FFY 19 targets. Central Office staff presented their findings during a tri-annual Hub Leadership meeting. During this meeting, resource limitations, the ongoing increase in referrals and enrollment, and the new and continuing SSIP requirements were discussed, as well as how to effectively maintain/improve the SPP Performance Indicators. Using the information from the discussion, draft targets were identified for each SPP indicator to take forward first to the EC3’s Infant Toddler Program Committee and then to the full Early Childhood Coordinating Council. For the new FFY 19 targets, the draft targets were identified for each SPP indicator to take forward to the Infant Toddler Coordinating Council.

1. Indicator #2 - Idaho has made steady progress during the previous federal fiscal years to ensure services were being provided in a child’s natural environment. Additionally, Idaho has strong policies and procedures in place and has developed contract language to ensure continued progress.

2. Indicator #3 – Idaho has met few targets in the previous Federal Fiscal Year for this indicator. We believe the State Systemic Improvement Plan (SSIP) will have positive long-term impacts in this area. Idaho may have to reset the baseline and targets for this indicator based on the newly updated ECO process, tools, and resources that have been implemented statewide.

3. Indicator #4 – A new baseline and targets were set in the FFY 2015 SPP/APR. The new baseline was set using the 2nd and 3rd quarters’ data
and new targets were set based on continued efforts to solidify the new family survey process. Realistic gains are expected to be made by FFY18. Idaho continues to work on improving the Family Survey response rate, which may impact existing targets and actual data reported in the future.

4. Indicators #5 and #6 – During the previous federal fiscal years for these indicators, Idaho remained fairly steady, until the 2008 recession. As a result, the state put measures in place to increase the number of birth-to-one-year-olds and birth-to-three-year-olds being served, with great
success. We anticipate making slow and steady progress but know this is a potential area of concern due to the program’s resource capacity.

5. Indicator #9 – Not applicable for Idaho Part C.

6. Indicator #10 – Idaho has not received any mediation requests during the previous federal fiscal years.

7. Indicator #11 – Idaho submitted the baseline and SPP targets when submitting Indicator #11 in April of 2017.

FFY 2013-2018 Targets
The Early Childhood Coordinating Council’s Infant Toddler Program Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members asked whether the SSIP would impact the current level of success in meeting performance indicators. There may be some impact on performance, but we want to move forward and do our best to continue to make slow and steady progress.

The Infant Toddler Program Committee accepted the newly proposed targets and recommended we present them to the full Early Childhood Coordinating Council for review and approval.

The Infant Toddler Program Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with the FFY 2013-2018 SPP targets, to the Early Childhood Coordinating Council, with a rationale for how the new targets were identified. Council members fully approved the new targets, especially in light of the program’s current resource capacity and additional work required to complete the SSIP to improve child outcome results.

FFY 2019 Targets
The Infant Toddler Coordinating Council’s Executive Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members inquired whether the increase in referrals and enrolled children, continued shortage of resources, high contractor turnover and work being completed for the SSIP would impact current performance. While we have done a good job so far, program staff and contractors continue to feel the pressure. We will continue to do the best we can with the challenges presented. The Executive Committee accepted the newly proposed targets and recommended we present them to the full Infant Toddler Coordinating Council.

The Executive Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with FFY 2013-2018 targets and the newly proposed FFY 2019 targets to the Infant Toddler Coordinating Council, with rationale for how the new targets were identified. Council members unanimously approved the new FFY 2019 targets.

**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.**

Idaho posted results on the performance of all seven regions and the state for the FFY 2019 SPP/APR on the Idaho Department of Health and Welfare's website (https://publicdocuments.dhw.idaho.gov/WebLink/Browse.aspx?id=4731&dbid=0&repo=PUBLIC-DOCUMENTS. Note: Not compatible with Internet Explorer) on February 1, 2021 for any member of the public to access as we submit the FFY 2019 SPP/APR to OSEP. Additionally, the results were reviewed and shared through other forums such as meetings with the hub and regional supervisors, program managers, and Infant Toddler Coordinating Council.

## Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State 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 the State'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 the State’s capacity to improve its SiMR data.

**Response to actions required in FFY 2018 SPP/APR**

## Intro - OSEP Response

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 the State 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 State’s SPP/APR documents.

## Intro - Required Actions

OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 11 attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

## Intro - State Attachments



# 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 | 72.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 95.77% | 93.08% | 88.98% | 93.08% | 86.67% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,076 | 2,545 | 86.67% | 100% | NVR | 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.***

193

**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).**

In Idaho, the criteria for timely receipt of early intervention services is defined as the actual start date being equal to or less than the date the service to be initiated as written in the IFSP as decided by the IFSP team including the parent following parental consent.

**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).**

The full FFY 2019 reporting year: July 1, 2019 – June 30, 2020

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

A statewide report encompassing all new services projected to start in FFY 2019 was generated from the ITPKIDS web-based data system. Idaho uses several methods to ensure the accuracy of timely service data, including:
 • Hub leaders use reports on a weekly-to-monthly basis to identify any missing or inaccurate data.
 • Central Office generates reports for the annual R-APR, SPP/APR, and Corrective Action Plan processes to identify missing or
 inaccurate data.
 • The program's data system, ITPKIDS, allows only one Projected Start Date and one Actual Start Date to be recorded for a service.
 • The Infant Toddler Program data analyst provides program managers and hub leaders with quarterly and annual summary reports
 on timeliness and identifies any necessary data cleanup.
 • The Infant Toddler Program data analyst and central office staff analyze reports at various intervals to determine causes.

Necessary modifications are made in ITPKIDS when inaccuracies are identified. Infant Toddler Program central office staff and data analyst
work together to identify state- or local-level patterns or trends. When patterns are identified, actions to rectify the issues include but are not limited to the following:
 • Staff training using ITPKIDS through videos, user guides, and supervisor-led trainings upon hire.
 • Collection of qualitative information regarding the data via discussion of issues at quarterly hub leadership meetings so that hub
 leaders can inform their local staff and contractors.
 • In-person, phone, or email communication with hub leaders identifying data areas to be addressed and necessary follow up.
 • ITPKIDS business team discusses potential modifications to the system to prevent future issues.

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

In Idaho, exceptional family circumstances were included as timely when calculating the percentage of children receiving timely services.

Statewide, 193 children experienced delays in timely service delivery due to exceptional family/extenuating circumstances. Examples of family circumstances include:
• Coronavirus
• Unable to contact family
• Family declined service
• Family no show
• Conflict with family scheduling appointment
• Child/family illness or hospitalization
• Family request for later service start date

Statewide, 276 children experienced a delay in timely services due to an agency reason. Examples of agency reasons for delay include:
• High caseload/therapist unavailable
• Issues with staff/contractors transitioning from in-person to virtual services
• Staff/contractor turnover
• Delay in evaluation
• Therapist ill
• Interpretation/translation issue

COVID 19
Of the services provided to children in FFY 19, Idaho does not believe that COVID-19 impacted data validity and reliability. However, many families did not want to receive services virtually, affecting the total completeness of our data. We observed that the number of children Idaho was serving continued to grow at high rates. However, once COVID-19 hit and we moved to virtual services, referrals and enrollment numbers decreased. Our service coordinators continued to check in with families who chose not to exit the program and put their services on hold. Some families eventually decided to start receiving virtual services as they realized the pandemic was not ending anytime soon, some families chose to exit the program and receive services from private clinics who were still providing services in-person, and some families decided to exit the program due to the other challenges they experienced related to COVID-19.

When COVID-19 hit, a new service delay reason of “Coronavirus” was added to our database and is used when a family
 1. has an extenuating circumstance related to COVID-19 that leads to the service being late,
 2. chooses not to receive a service due to concerns about COVID-19, or
 3. withdraws from the program due to concerns about COVID-19.

This was Idaho’s attempt to track how COVID-19 impacted our program and services we provide, to mitigate the impact on data collection.

**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** |
| --- | --- | --- | --- |
| 2 | 2 | 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***

Idaho demonstrated that it corrected two findings of noncompliance identified in FFY 18. Consistent with the requirements in OSEP Memo 09-02, Idaho reports verification that the two EIS regional programs with noncompliance in FFY 18: (1) have corrected each individual case of non-compliance, unless the child is no longer within the jurisdiction of the program; and (2) are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through onsite monitoring or a State data system.

In FFY 18, 346 children did not receive services in a timely manner. These 346 children were located across all 7 regional EIS programs. Two (2) of the 7 regional EIS programs were issued findings of noncompliance in FFY 18, four (4) of the regional programs were not issued findings due to achieving pre-finding correction (performing at 100% and correcting all child specific noncompliance) during the RAPR review process, and one (1) of the regional programs had one (1) instance of noncompliance from FFY 17 that was corrected in FFY 18 (refer to the Correction of Findings of Noncompliance Identified Prior to FFY 2018 section below for additional information). The RAPR review process occurs prior to issuing findings of noncompliance (see prong 2 correction below).

For Prong 2 (EIS program level) correction, subsequent review of data (completed later than June 30, 2018 and generated from the ITPKIDS web-based data system) was used to verify that the 7 regional EIS programs were correctly implementing the timely services requirement in FFY 2018, including the one region with ongoing noncompliance from FFY 17 corrected in FFY 18 (refer to the Correction of Findings of Noncompliance Identified Prior to FFY 2018 section below for additional information). Details of this analysis include:

• 2/7 regional EIS programs that were issued findings of noncompliance were verified as correcting noncompliance within one year of written findings by reviewing one new month of indicator 1 data for the program.
 o The review revealed that both programs were at 100% for this requirement.

• 1 of the 7 regional programs with an outstanding finding of noncompliance from (FFY 17) was verified as correcting noncompliance within two years of written finding by reviewing one new month of indicator 1 data for the program. (Refer to the Correction of Findings of Noncompliance Identified Prior to FFY 2018 section below for additional information).

• 4/7 regional EIS programs achieved pre-finding correction by reviewing one new month of Indicator 1 data during the FFY 18 RAPR review process. (None of the 4 programs were issued a finding of noncompliance since they also corrected child-specific noncompliance prior to issuing a written notification of findings.)
 o The review revealed that each of the four programs were at 100% for this requirement.

To support the correction of noncompliance for all 7 programs, the following were implemented:
• Policies and procedures were reviewed, and staff/contractors received TA on regulatory requirements.
• Regional hub leaders and human services supervisor received intensive TA on a regular basis.
• Fill ITP staff and contractor vacancies that was delayed due to COVID-19.

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

For Prong 1 (individual child level) correction, data from ITPKIDS was used to verify child-specific correction for the 346 children who did not receive timely services in FFY 2018 by determining that: 1) the child received the service although untimely; 2) the family declined the service before it was provided: or 3) the child never started the service prior to exiting the program.

Correction of each individual incidence of noncompliance is verified through ITPKIDS. ITPKIDS captures the Projected and Actual Start Dates for every new service initiated in an IFSP. If the Actual Start Date is later than the Projected Start Date, ITPKIDS requires users to record a Delay Reason before they can save the service record.

Central Office staff generate and review timely service reports (using data from ITPKIDS described above) during the annual R-APR, SPP/APR, Corrective Action Plan process, and at other necessary intervals, to verify that each individual instance of non-compliance is corrected unless the child is no longer within the jurisdiction of the EIS program, the family declined services, or the EIS program was unable to make contact with the family.

**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** |
| --- | --- | --- | --- |
| FFY 2017 | 1 | 1 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Idaho demonstrated that it corrected the one instance of noncompliance identified in FFY 17 in FFY 18. Consistent with the requirements in OSEP Memo 09-02, Idaho reports verification that the one EIS regional program with noncompliance in FFY 17: (1) has corrected each individual case of non-compliance, unless the child is no longer within the jurisdiction of the program; and (2) 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 onsite monitoring or a State data system.

In FFY 17, one regional program had 15 children that did not receive services in a timely manner. This regional EIS program was issued a finding of noncompliance in FFY 17 during the RAPR review process. However, the program with was able to correct their finding of noncompliance in FFY18.

For Prong 2 (EIS program level) correction, subsequent review of data (completed later than June 30, 2019 and generated from the ITPKIDS web-based data system) was used to verify that the regional EIS program was correctly implementing the timely services requirement in FFY 2019. The analysis of this data revealed:

• The regional EIS program with FFY 17 noncompliance was verified as correcting noncompliance in FFY 18, by reviewing one new month of
 indicator 1 data for the program.
• The review revealed that the program was at 100% for this requirement.

The one regional program was also supported in correcting the noncompliance through the following steps:
• Policies and procedures were reviewed, and staff/contractors received TA on regulatory requirements.
• Hub leaders and human services received regular TA from the state Lead Agency on a regular basis regarding the regulatory requirements and
 their processes and procedures to meet the requirements

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

For Prong 1 (individual child level correction), data from ITPKIDS was used to verify child-specific correction for the 15 children who did not receive timely services in FFY 17 and who were located in the regional EIS program that was issued a finding of noncompliance in FFY 17. The state verified that:

• 14/15 children received the services, although untimely.
• 1 child was no longer in the program.

Correction of each individual incidence of noncompliance is verified through ITPKIDS. ITPKIDS captures the Projected Start Date and Actual Start Date for every new service initiated in an IFSP. If the Actual Start Date is later than the Projected Start Date, ITPKIDS requires users to record a Delay Reason before they can save the service record.

Central Office staff generate and review timely service reports (using data from ITPKIDS described above) during the annual R-APR, SPP/APR, Corrective Action Plan process, and at other necessary intervals, to verify that each individual instance of non-compliance is corrected unless the child is no longer within the jurisdiction of the EIS program, the family declined services, or the EIS program was unable to make contact with the family.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

OSEP cannot determine whether the data are valid and reliable. The State must report timely provision of services consistent with the Measurement Table. However, Idaho reports that its criteria for timely receipt of early intervention services is defined as the actual start date being equal to or less than the date the service to be initiated as written in the IFSP as decided by the IFSP team including the parent following parental consent. Therefore, OSEP cannot determine whether the State met its target.

## 1 - Required Actions

In its FFY 2020 SPP/APR, the State must report timely provision of services, including its criteria for timely receipt of early intervention services, consistent with the Measurement Table.

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (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, the State must describe the specific actions that were taken to verify the correction.

If the State 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 the State 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 | 92.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= | 95.30% | 95.50% | 95.70% | 95.90% | 96.00% |
| Data | 99.17% | 99.90% | 99.89% | 99.80% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 96.50% |

**Targets: Description of Stakeholder Input**

The Central Office Infant Toddler Program staff identified the need for stakeholder input regarding new SPP indicator targets, including the newly added FFY 19 targets. Staff met to review the previous SPP indicator targets and actual data to identify potential starting points for the new FFY 2013-2018 and newly added FFY 19 targets. Central Office staff presented their findings during a tri-annual Hub Leadership meeting. During this meeting, resource limitations, the ongoing increase in referrals and enrollment, and the new and continuing SSIP requirements were discussed, as well as how to effectively maintain/improve the SPP Performance Indicators. Using the information from the discussion, draft targets were identified for each SPP indicator to take forward first to the EC3’s Infant Toddler Program Committee and then to the full Early Childhood Coordinating Council. For the new FFY 19 targets, the draft targets were identified for each SPP indicator to take forward to the Infant Toddler Coordinating Council.

1. Indicator #2 - Idaho has made steady progress during the previous federal fiscal years to ensure services were being provided in a child’s natural environment. Additionally, Idaho has strong policies and procedures in place and has developed contract language to ensure continued progress.

2. Indicator #3 – Idaho has met few targets in the previous Federal Fiscal Year for this indicator. We believe the State Systemic Improvement Plan (SSIP) will have positive long-term impacts in this area. Idaho may have to reset the baseline and targets for this indicator based on the newly updated ECO process, tools, and resources that have been implemented statewide.

3. Indicator #4 – A new baseline and targets were set in the FFY 2015 SPP/APR. The new baseline was set using the 2nd and 3rd quarters’ data
and new targets were set based on continued efforts to solidify the new family survey process. Realistic gains are expected to be made by FFY18. Idaho continues to work on improving the Family Survey response rate, which may impact existing targets and actual data reported in the future.

4. Indicators #5 and #6 – During the previous federal fiscal years for these indicators, Idaho remained fairly steady, until the 2008 recession. As a result, the state put measures in place to increase the number of birth-to-one-year-olds and birth-to-three-year-olds being served, with great
success. We anticipate making slow and steady progress but know this is a potential area of concern due to the program’s resource capacity.

5. Indicator #9 – Not applicable for Idaho Part C.

6. Indicator #10 – Idaho has not received any mediation requests during the previous federal fiscal years.

7. Indicator #11 – Idaho submitted the baseline and SPP targets when submitting Indicator #11 in April of 2017.

FFY 2013-2018 Targets
The Early Childhood Coordinating Council’s Infant Toddler Program Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members asked whether the SSIP would impact the current level of success in meeting performance indicators. There may be some impact on performance, but we want to move forward and do our best to continue to make slow and steady progress.

The Infant Toddler Program Committee accepted the newly proposed targets and recommended we present them to the full Early Childhood Coordinating Council for review and approval.

The Infant Toddler Program Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with the FFY 2013-2018 SPP targets, to the Early Childhood Coordinating Council, with a rationale for how the new targets were identified. Council members fully approved the new targets, especially in light of the program’s current resource capacity and additional work required to complete the SSIP to improve child outcome results.

FFY 2019 Targets
The Infant Toddler Coordinating Council’s Executive Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members inquired whether the increase in referrals and enrolled children, continued shortage of resources, high contractor turnover and work being completed for the SSIP would impact current performance. While we have done a good job so far, program staff and contractors continue to feel the pressure. We will continue to do the best we can with the challenges presented. The Executive Committee accepted the newly proposed targets and recommended we present them to the full Infant Toddler Coordinating Council.

The Executive Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with FFY 2013-2018 targets and the newly proposed FFY 2019 targets to the Infant Toddler Coordinating Council, with rationale for how the new targets were identified. Council members unanimously approved the new FFY 2019 targets.

**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 | 2,142 |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Total number of infants and toddlers with IFSPs | 2,143 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,142 | 2,143 | 100.00% | 96.50% | 99.95% | Met Target | No Slippage |

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

Idaho continues to excel in providing early intervention services in a child’s natural environment due to strict staff requirements and required contract language.

## 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)**

NO

**Targets: Description of Stakeholder Input**

The Central Office Infant Toddler Program staff identified the need for stakeholder input regarding new SPP indicator targets, including the newly added FFY 19 targets. Staff met to review the previous SPP indicator targets and actual data to identify potential starting points for the new FFY 2013-2018 and newly added FFY 19 targets. Central Office staff presented their findings during a tri-annual Hub Leadership meeting. During this meeting, resource limitations, the ongoing increase in referrals and enrollment, and the new and continuing SSIP requirements were discussed, as well as how to effectively maintain/improve the SPP Performance Indicators. Using the information from the discussion, draft targets were identified for each SPP indicator to take forward first to the EC3’s Infant Toddler Program Committee and then to the full Early Childhood Coordinating Council. For the new FFY 19 targets, the draft targets were identified for each SPP indicator to take forward to the Infant Toddler Coordinating Council.

1. Indicator #2 - Idaho has made steady progress during the previous federal fiscal years to ensure services were being provided in a child’s natural environment. Additionally, Idaho has strong policies and procedures in place and has developed contract language to ensure continued progress.

2. Indicator #3 – Idaho has met few targets in the previous Federal Fiscal Year for this indicator. We believe the State Systemic Improvement Plan (SSIP) will have positive long-term impacts in this area. Idaho may have to reset the baseline and targets for this indicator based on the newly updated ECO process, tools, and resources that have been implemented statewide.

3. Indicator #4 – A new baseline and targets were set in the FFY 2015 SPP/APR. The new baseline was set using the 2nd and 3rd quarters’ data
and new targets were set based on continued efforts to solidify the new family survey process. Realistic gains are expected to be made by FFY18. Idaho continues to work on improving the Family Survey response rate, which may impact existing targets and actual data reported in the future.

4. Indicators #5 and #6 – During the previous federal fiscal years for these indicators, Idaho remained fairly steady, until the 2008 recession. As a result, the state put measures in place to increase the number of birth-to-one-year-olds and birth-to-three-year-olds being served, with great
success. We anticipate making slow and steady progress but know this is a potential area of concern due to the program’s resource capacity.

5. Indicator #9 – Not applicable for Idaho Part C.

6. Indicator #10 – Idaho has not received any mediation requests during the previous federal fiscal years.

7. Indicator #11 – Idaho submitted the baseline and SPP targets when submitting Indicator #11 in April of 2017.

FFY 2013-2018 Targets
The Early Childhood Coordinating Council’s Infant Toddler Program Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members asked whether the SSIP would impact the current level of success in meeting performance indicators. There may be some impact on performance, but we want to move forward and do our best to continue to make slow and steady progress.

The Infant Toddler Program Committee accepted the newly proposed targets and recommended we present them to the full Early Childhood Coordinating Council for review and approval.

The Infant Toddler Program Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with the FFY 2013-2018 SPP targets, to the Early Childhood Coordinating Council, with a rationale for how the new targets were identified. Council members fully approved the new targets, especially in light of the program’s current resource capacity and additional work required to complete the SSIP to improve child outcome results.

FFY 2019 Targets
The Infant Toddler Coordinating Council’s Executive Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members inquired whether the increase in referrals and enrolled children, continued shortage of resources, high contractor turnover and work being completed for the SSIP would impact current performance. While we have done a good job so far, program staff and contractors continue to feel the pressure. We will continue to do the best we can with the challenges presented. The Executive Committee accepted the newly proposed targets and recommended we present them to the full Infant Toddler Coordinating Council.

The Executive Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with FFY 2013-2018 targets and the newly proposed FFY 2019 targets to the Infant Toddler Coordinating Council, with rationale for how the new targets were identified. Council members unanimously approved the new FFY 2019 targets.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A1** | 2009 | Target>= | 60.60% | 61.00% | 61.50% | 63.00% | 65.00% |
| **A1** | 64.60% | Data | 58.11% | 56.65% | 57.95% | 52.38% | 51.36% |
| **A2** | 2009 | Target>= | 55.70% | 56.00% | 56.50% | 57.00% | 57.50% |
| **A2** | 53.30% | Data | 55.80% | 55.70% | 56.07% | 51.63% | 54.00% |
| **B1** | 2009 | Target>= | 64.20% | 64.80% | 65.20% | 65.60% | 67.20% |
| **B1** | 67.10% | Data | 61.07% | 60.43% | 61.18% | 57.02% | 55.81% |
| **B2** | 2009 | Target>= | 50.40% | 50.80% | 51.20% | 51.60% | 52.00% |
| **B2** | 50.40% | Data | 47.56% | 47.95% | 46.23% | 42.54% | 45.17% |
| **C1** | 2009 | Target>= | 70.20% | 70.60% | 71.00% | 71.40% | 71.80% |
| **C1** | 70.20% | Data | 65.65% | 65.75% | 65.86% | 64.30% | 61.47% |
| **C2** | 2009 | Target>= | 58.20% | 58.60% | 59.00% | 59.40% | 59.80% |
| **C2** | 58.20% | Data | 57.39% | 58.28% | 56.54% | 55.49% | 55.58% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1>= | 65.00% |
| Target A2>= | 57.50% |
| Target B1>= | 67.70% |
| Target B2>= | 52.00% |
| Target C1>= | 71.80% |
| Target C2>= | 59.80% |

 **FFY 2019 SPP/APR Data**

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

1,427

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

| **Outcome A Progress Category** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 3 | 0.21% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 531 | 37.21% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 134 | 9.39% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 351 | 24.60% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 408 | 28.59% |

| **Outcome A** | **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 | 485 | 1,019 | 51.36% | 65.00% | 47.60% | Did Not Meet Target | 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 | 759 | 1,427 | 54.00% | 57.50% | 53.19% | Did Not Meet Target | No Slippage |

**Provide reasons for A1 slippage, if applicable**

• Two systemic improvements are affecting the social-emotional outcomes. First, all staff and contractors completed a rich curriculum of social emotional trainings last year, which no doubt increased their scrutiny of children’s social-emotional behaviors and their stringent application of standards in measuring social-emotional outcomes. We expect that training will also result in improved social-emotional coping among children and families. Second, Idaho is still seeing the results of our several-years’ focus to improve the accuracy of ECO measurement. At the outset of this effort, we expected evaluators’ increased accuracy would both reduce error variability and lower outcome ratings until a stable baseline is achieved. Since 2016, we have seen a general decline in both social-emotional A1 and A2 proportions, consistent with the impact of increased scrutiny and tightened measurement standards. Also, in a hopeful turn, that trend reversed last year for A2, showing an upswing in FFY2019. This apparent reversal of the downward trend is consistent with improved social emotional functioning, which could be expected to manifest in A2 scores first, because this composite includes children starting at age level. Their growth may be easier to measure and could be the first to show the beneficial effects of both improved interactions and greater measurement accuracy.

• We will continue to monitor our ECO measures with increased focus and scrutiny this coming fiscal year, conducting in-depth analyses to discover the effect of process improvements on both accuracy (reduction of error variability) and on measured growth. We will seek to understand the scores’ fluctuations – the amount of error versus true score they represent. Analyses will help us hone the program’s processes to increase their benefit. Specifically, for our FFY 19 SSIP process, Idaho will compare scores from before versus after implementation of the new ECO processes to help establish new baselines and targets for FFY 20-25.

• Yet, we remain mindful that two evolving processes may change the nature of our expectations. First, the proportion of “both-measure” children, those whose entry and exit scores will both have been conducted using the improved processes, will continue to increase over the coming 24 months. During that same time, we will see our improved ECO and social-emotional processes stabilize and become fully embedded throughout our professional culture. Our process adherence has already achieved a laudable 88%-90% fidelity level, according to our first measure. Providers are making efforts to increase process fidelity, which will be measured statewide this year. By the end of the next 24 months with improved fidelity and all exits involving “both-measure” children, we expect to capture a full-state measure of our baseline entry and exit measures, and their resulting progress comparisons. We will examine both variability and average scores to test our hypotheses, comparing the “both-measure” children with the “neither-measure” children (those for whom neither their entry nor exit measures were conducted before the new processes). These before-versus-after comparisons (of entry scores alone, exit scores alone, and outcome scores) will help us understand the nature and extent of the initiative’s effects, and help us identify opportunities for improvements.

• Idaho’s ECO scores are generally tracking with, but below, the national averages, which have also declined over the years. Idaho would like to learn more about the experiences and dynamics of other states to help understand our own.

• COVID-19 has also been a factor of unknown magnitude. We’ve received anecdotal reports, supported by findings of our statewide COVID-19 impact survey, that the remote service delivery (via WebEx or phone) has made it harder for families to understand and participate in the ECO processes and use the required tools and resources. Those barriers have made ECO measurement more difficult, and potentially lowered scores.

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 3 | 0.21% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 600 | 42.05% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 239 | 16.75% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 392 | 27.47% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 193 | 13.52% |

| **Outcome B** | **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 | 631 | 1,234 | 55.81% | 67.70% | 51.13% | Did Not Meet Target | 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 | 585 | 1,427 | 45.17% | 52.00% | 41.00% | Did Not Meet Target | Slippage |

**Provide reasons for B1 slippage, if applicable**

• The systemic improvement program to improve ECO processes is affecting the knowledge-acquisition outcomes. Idaho is still seeing the results of our several-years’ focus to improve the accuracy of ECO measurement. At the outset of this effort, we expected evaluators’ increased accuracy would both reduce error variability and lower outcome ratings until a stable baseline is achieved. Since 2016, we have seen a general decline in both knowledge-acquisition B1 proportions, consistent with the impact of increased scrutiny and tightened measurement standards.

• We will continue to monitor our ECO measures with increased focus and scrutiny this coming fiscal year, conducting in-depth analyses to discover the effect of process improvements on both accuracy (reduction of error variability) and on measured growth. We will seek to understand the scores’ fluctuations – the amount of error versus true score they represent. Analyses will help us hone the program’s processes to increase their benefit. Specifically, for our FFY 19 SSIP process, Idaho will compare scores from before versus after implementation of the new ECO processes to help establish new baselines and targets for FFY 20-25.

• Yet, we remain mindful that two evolving processes may change the nature of our expectations. First, the proportion of “both-measure” children, (those whose entry and exit scores will both have been conducted using the improved processes), will continue to increase over the coming 24 months. During that same time, we will see our improved ECO and social-emotional processes stabilize and become fully embedded throughout our professional culture. Our process adherence has already achieved a laudable 88%-90% fidelity level, according to our first measure. Providers are making efforts to increase process fidelity, which will be measured statewide this year. By the end of the next 24 months with improved fidelity and all exits involving “both-measure” children, we expect to capture a full-state measure of our baseline entry and exit measures, and their resulting progress comparisons. We will examine both variability and average scores to test our hypotheses, comparing the “both-measure” children with the “neither-measure” children (those for whom neither their entry nor exit measures were conducted before the new processes). These before-versus-after comparisons (of entry scores alone, exit scores alone, and outcome scores) will help us understand the nature and extent of the initiative’s effects, and help us continue to improve.

• Idaho’s ECO scores are generally tracking with, but below, the national averages, which have also declined over the years. Idaho would like to learn more about the experiences and dynamics of other states to help understand our own.

• COVID-19 has also been a factor of unknown magnitude. We’ve received anecdotal reports, supported by findings of our statewide COVID-19 impact survey, that the remote service delivery (via WebEx or phone) has made it harder for families to understand and participate in the ECO processes and use the required tools and resources. Those barriers have made ECO measurement more difficult, and potentially lowered scores.

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

• The systemic improvement program to improve ECO processes is affecting the knowledge-acquisition outcomes. Idaho is still seeing the results of our several-years’ focus to improve the accuracy of ECO measurement. At the outset of this effort, we expected evaluators’ increased accuracy would both reduce error variability and lower outcome ratings until a stable baseline is achieved. Since 2016, we have seen a general decline in both knowledge-acquisition B2 proportions, consistent with the impact of increased scrutiny and tightened measurement standards.

• We will continue to monitor our ECO measures with increased focus and scrutiny this coming fiscal year, conducting in-depth analyses to discover the effect of process improvements on both accuracy (reduction of error variability) and on measured growth. We will seek to understand the scores’ fluctuations – the amount of error versus true score they represent. Analyses will help us hone the program’s processes to increase their benefit. Specifically, for our FFY 19 SSIP process, Idaho will compare scores from before versus after implementation of the new ECO processes to help establish new baselines and targets for FFY 20-25.

• Yet, we remain mindful that two evolving processes may change the nature of our expectations. First, the proportion of “both-measure” children, those whose entry and exit scores will both have been conducted using the improved processes, will continue to increase over the coming 24 months. During that same time, we will see our improved ECO and knowledge-acquisition processes stabilize and become fully embedded throughout our professional culture. Our process adherence has already achieved a laudable 88%-90% fidelity level, according to our first measure. Providers are making efforts to increase process fidelity, which will be measured statewide this year. By the end of the next 24 months with improved fidelity and all exits involving “both-measure” children, we expect to capture a full-state measure of our baseline entry and exit measures, and their resulting progress comparisons. We will examine both variability and average scores to test our hypotheses, comparing the “both-measure” children with the “neither-measure” children (those for whom neither their entry nor exit measures were conducted before the new processes). These before-versus-after comparisons (of entry scores alone, exit scores alone, and outcome scores) will help us understand the nature and extent of the initiative’s effects, and help us continue to improve.

• Idaho’s ECO scores are generally tracking with, but below, the national averages, which have also declined over the years. Idaho would like to learn more about the experiences and dynamics of other states to help understand our own.

• COVID-19 has also been a factor of unknown magnitude. We’ve received anecdotal reports, supported by findings of our statewide COVID-19 impact survey, that the remote service delivery (via WebEx or phone) has made it harder for families to understand and participate in the ECO processes and use the required tools and resources. Those barriers have made ECO measurement more difficult, and potentially lowered scores.

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 3 | 0.21% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 443 | 31.04% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 169 | 11.84% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 532 | 37.28% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 280 | 19.62% |

| **Outcome C** | **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 | 701 | 1,147 | 61.47% | 71.80% | 61.12% | 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 | 812 | 1,427 | 55.58% | 59.80% | 56.90% | Did Not Meet Target | No Slippage |

**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 | 2,092 |
| 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. | 631 |

| **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.**

Child outcome data is required to be collected for all children enrolled in our program who receive early intervention services for six months or longer. The following includes the newly updated ECO instruments and procedures used to gather data for this indicator. These have been scaled up statewide as part of our State Systemic Improvement Plan efforts:

Family Communication

Entry ECO Ratings
 At a minimum, regions must provide and discuss these with families using one of the following communication resources:
 • ECO Family Flyer
 OR
 • ECO Family Guide

In addition, the Child Outcomes Step by Step video is available for families to access using the link in the ECO Family Flyer or on the ITP webpage.

Exit ECO Ratings
At a minimum, regions must use one of the following communication resources to prepare the family/caregiver for the exit ECO rating process:
 • ECO Family Flyer
 OR
 • ECO Family Guide

In addition, the Child Outcomes Step by Step video is available for families to access using the link listed in the ECO Family Flyer, ECO Family Guide, or on the ITP webpage.

Information Gathering

Entry ECO Ratings
At a minimum, regions must complete an approved ECO Anchor Assessment tool as defined in the ITP eManual

 AND

At a minimum, regions must complete the following ECO information-gathering tools to learn about the child’s functioning across settings and situations:

For Preemies and Infants
 • Use the ECO Parent Questionnaire for Preemies/Infants

 AND

For Older Infants and Toddlers
Use either the
 • ECO Guiding Questions
 OR
 • ECO Parent Questionnaire for Toddlers

Exit ECO Ratings
At a minimum, regions must complete an approved ECO Anchor Assessment tool as defined in the ITP eManual.
 • Circumstances such as loss of contact, unexpected family/caregiver move, etc. warrant a review of the child’s file in place of an ECO
 Anchor Assessment.

 AND

At a minimum, regions must complete the following:
 • Use the information gathered from the ECO Anchor Assessment with the family/caregiver to discuss the child’s current level of
 functioning
 • Review medical records
 • Review IFSP outcomes
 • Review of all evaluations/assessments

Determining ECO Ratings

Entry/Exit ECO Ratings
At a minimum, regions must use one of the following ECO rating tools to ensure the 7-point scale is consistently and accurately used during the rating process with families:

 • ECO Decision Tree (with or without rating numbers)
 OR
 • ECO Ratings and Definitions (with or without rating numbers)
 OR
 • ECO Ratings and Definitions – Buckets (with or without rating numbers).

In addition, if an anchor assessment tool other than the MEISR is used to gather information for entry or exit ECO ratings, the ECO Crosswalk MUST be used to complete the age anchoring process. In this instance, regions must have a process to ensure that teams understand both the sequence and milestones in which children acquire skills and the age range in which they are acquired.

If the MEISR is used as an anchor assessment, it is not necessary to use the ECO Crosswalk. Use of the MEISR provides an age anchoring opportunity and the ability to view the child’s functioning in different settings.

An optional tool to summarize/compile/organize information gathered from the ECO tools and anchor assessment is the Child Outcome
Summary Worksheet.

Documentation
Entry/Exit ECO Ratings
All regions must use the Child Outcome Summary Form to document the ECO ratings and attach in ITPKIDS.

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

COVID-19
Idaho knows COVID-19 impacted the data completeness, validity, and reliability of ECO data for FFY 19. Many families chose not to continue receiving services from the Infant Toddler Program when COVID-19 hit and we moved to the provision of virtual services. We also know that staff and contractors voiced concerns about how difficult it was to engage families in the ECO process when providing virtual or telephonic services.

Idaho did its best to provide the ECO materials via email or through the regular mail system prior to completion of the ECO process. However, with many families being hard hit from COVID-19, completing the ECOs was low on their priority list. Idaho did the best we could to complete the entry and exit ECO processes using virtual and telephonic measures, but we know this indicator was impacted the most by COVID-19.

## 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 | 2015 | Target>= | 66.00% | 92.93% | 92.93% | 93.00% | 94.00% |
| A | 92.93% | Data | 97.10% | 92.93% | 92.11% | 94.67% | 94.21% |
| B | 2015 | Target>= | 63.00% | 92.68% | 92.68% | 93.00% | 94.00% |
| B | 92.68% | Data | 95.65% | 92.68% | 92.98% | 94.33% | 95.75% |
| C | 2015 | Target>= | 77.00% | 90.98% | 90.98% | 92.00% | 93.00% |
| C | 90.98% | Data | 94.20% | 90.98% | 92.98% | 95.33% | 95.37% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A>= | 95.00% |
| Target B>= | 94.50% |
| Target C>= | 94.00% |

**Targets: Description of Stakeholder Input**

The Central Office Infant Toddler Program staff identified the need for stakeholder input regarding new SPP indicator targets, including the newly added FFY 19 targets. Staff met to review the previous SPP indicator targets and actual data to identify potential starting points for the new FFY 2013-2018 and newly added FFY 19 targets. Central Office staff presented their findings during a tri-annual Hub Leadership meeting. During this meeting, resource limitations, the ongoing increase in referrals and enrollment, and the new and continuing SSIP requirements were discussed, as well as how to effectively maintain/improve the SPP Performance Indicators. Using the information from the discussion, draft targets were identified for each SPP indicator to take forward first to the EC3’s Infant Toddler Program Committee and then to the full Early Childhood Coordinating Council. For the new FFY 19 targets, the draft targets were identified for each SPP indicator to take forward to the Infant Toddler Coordinating Council.

1. Indicator #2 - Idaho has made steady progress during the previous federal fiscal years to ensure services were being provided in a child’s natural environment. Additionally, Idaho has strong policies and procedures in place and has developed contract language to ensure continued progress.

2. Indicator #3 – Idaho has met few targets in the previous Federal Fiscal Year for this indicator. We believe the State Systemic Improvement Plan (SSIP) will have positive long-term impacts in this area. Idaho may have to reset the baseline and targets for this indicator based on the newly updated ECO process, tools, and resources that have been implemented statewide.

3. Indicator #4 – A new baseline and targets were set in the FFY 2015 SPP/APR. The new baseline was set using the 2nd and 3rd quarters’ data
and new targets were set based on continued efforts to solidify the new family survey process. Realistic gains are expected to be made by FFY18. Idaho continues to work on improving the Family Survey response rate, which may impact existing targets and actual data reported in the future.

4. Indicators #5 and #6 – During the previous federal fiscal years for these indicators, Idaho remained fairly steady, until the 2008 recession. As a result, the state put measures in place to increase the number of birth-to-one-year-olds and birth-to-three-year-olds being served, with great
success. We anticipate making slow and steady progress but know this is a potential area of concern due to the program’s resource capacity.

5. Indicator #9 – Not applicable for Idaho Part C.

6. Indicator #10 – Idaho has not received any mediation requests during the previous federal fiscal years.

7. Indicator #11 – Idaho submitted the baseline and SPP targets when submitting Indicator #11 in April of 2017.

FFY 2013-2018 Targets
The Early Childhood Coordinating Council’s Infant Toddler Program Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members asked whether the SSIP would impact the current level of success in meeting performance indicators. There may be some impact on performance, but we want to move forward and do our best to continue to make slow and steady progress.

The Infant Toddler Program Committee accepted the newly proposed targets and recommended we present them to the full Early Childhood Coordinating Council for review and approval.

The Infant Toddler Program Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with the FFY 2013-2018 SPP targets, to the Early Childhood Coordinating Council, with a rationale for how the new targets were identified. Council members fully approved the new targets, especially in light of the program’s current resource capacity and additional work required to complete the SSIP to improve child outcome results.

FFY 2019 Targets
The Infant Toddler Coordinating Council’s Executive Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members inquired whether the increase in referrals and enrolled children, continued shortage of resources, high contractor turnover and work being completed for the SSIP would impact current performance. While we have done a good job so far, program staff and contractors continue to feel the pressure. We will continue to do the best we can with the challenges presented. The Executive Committee accepted the newly proposed targets and recommended we present them to the full Infant Toddler Coordinating Council.

The Executive Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with FFY 2013-2018 targets and the newly proposed FFY 2019 targets to the Infant Toddler Coordinating Council, with rationale for how the new targets were identified. Council members unanimously approved the new FFY 2019 targets.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 1,928 |
| Number of respondent families participating in Part C  | 233 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 229 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 233 |
| 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 | 229 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 233 |
| 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 | 225 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 233 |

| **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) | 94.21% | 95.00% | 98.28% | 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) | 95.75% | 94.50% | 98.28% | Met Target | No Slippage |
| C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2) | 95.37% | 94.00% | 96.57% | Met Target | No Slippage |

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

| **Question** | **Yes / No** |
| --- | --- |
| Was a collection tool used? | YES |
| If yes, is it a new or revised collection tool?  | NO |
| The demographics of the 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.**

Idaho uses the ECO Family Outcomes Survey-Revised (FOS-R) to gather family outcomes data required by the Office of Special Education Programs (OSEP). Central Office directly manages the survey process, analysis, and summarization of the data.

This indicator represents findings of the FOS-R survey conducted by the Idaho Infant Toddler Program (ITP) to address indicator #4, the “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.”

The survey administered by ITP includes seventeen questions with a 5-point rating scale which assesses the extent to which families have achieved each outcome item, ranging from 1 = Not at all Helpful to 5 = Extremely Helpful. The survey measures the extent to which early intervention helped families achieve positive outcomes specified in Indicator #4. Idaho’s Central Office data analyst used the recommended FOS-R calculation method to calculate the data reported to OSEP.

In conjunction with the 6-month review, Service Coordinators send families a text message or email invitation to complete the Family Survey electronically and explain the importance of obtaining feedback to assist with program improvement. If families want to complete a hard copy of the survey, they are instructed to contact Central Office to handle their request.

Families complete the survey using a link to “Key Survey,” an online tool used by the Department of Health and Welfare to create and manage surveys and other documents, or by requesting a hard copy of the survey from Central Office. A unique child identifier randomly generated by the program’s web-based data system, ITPKIDS, is associated with each survey, providing anonymity and enabling tracking of respondent demographics. This identifier is also used to eliminate duplicate responses and to ensure that responses are valid (based on the requirement that surveys be given only at 6-month IFSP reviews).

Idaho used results from July 1, 2019 – June 30, 2020 to report data for FFY 2019. The survey is available in English and Spanish. Sampling was not used in the distribution process. All 1,931 families of a child with a 6-month IFSP review in FFY 2019 were asked to take the survey; 233 did so, achieving a 12.1% response rate, down by 1.5 percentage points from FFY 2018.
The response rates by regions ranged from 2.4% to 24.6% represent reliable differences from the statewide average of 12.1% – the survey respondents are not equally representative by region.

The following sections report state-level FFY 2019 numbers of families invited to complete the Family Survey and proportions responding.

By child race-ethnicity:
Asian - 0% responding of 0.9% invited
African American – 4.0% responding of 1.3% invited
Hispanic – 5.2% responding of 13.9% invited
Mixed – 3.5% responding of 4.4% invited
Native American – 10.0% responding of 0.5% invited
Pacific Islander - 0% responding of 0.1% invited
White – 14.1% responding of 78.9% invited

The proportion of whites responding (14.1%) is reliably different from the proportion of all invited families responding (12.1%), as are the responding proportions of mixed race (3.5%) and Hispanics (5.2%) - Family Survey respondents are not representative by these race-ethnicity categories. The numbers invited to participate in other categories are too small to allow reliable interpretation of their varying response rates. Nonetheless, the Idaho Infant Toddler Program takes all disparities – reliable and apparent - seriously. We continuously monitor our activities and outcomes by categories of race-ethnicity, age, gender, and geographic location. We remain vigilant in our work and committed to erasing service disparities and reversing adverse impact experienced by underserved groups. With the Family Survey, we have undertaken a large methodology shift to improve the overall response rate and achieve full representation of all families’ views and needs by minimizing participation barriers (see below).

By child age category:
Birth - 1 year old – 11.9% responding of 20% invited
1-2 year old - 13.8% responding of 29.4% invited
2-3 year old – 11.2% responding of 50.6% invited
Respondents do not differ reliably by the age of their children - the Family Survey respondents are representative by child age.

By child gender:
Female – 13.2% responding of 39.9% invited
Male – 11.3% responding of 60.1% invited
The responding proportions of families of children of differing ages do not differ reliably – the family survey respondents are representative by child gender.

Prior to COVID-19, Idaho was actively working on putting together processes and procedures to implement the pilot completed in FFY 2019 in all seven regions to improve the Family Survey response rate. However, with the COVID-19 pandemic, all action for this project was put on hold. However, a new report was developed for Central Office and regional staff to identify families who have not yet returned a Family Survey to the Infant Toddler Program. These staff members will run the report and make follow up calls to these families as resources permit and track the results using a standardized protocol and process. In addition to increased response rates, we will evaluate the effectiveness of the ethnic response rates for increased representativeness of the groups underrepresented. Furthermore, Idaho will work with stakeholders to obtain additional strategies to assure representation of all groups. An internal secured shared drive with limited access has been set up to store the results and ensure the confidentiality of the data. The goal is to implement this new process in January of 2021. With this new process, Idaho anticipates a higher overall response rate with better representation from all race/ethnicity categories.

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

COVID-19
Idaho’s Family Survey response rate went down by 1.5% in FFY 19 and looking at FFY 20 data, it continues to decline. We know COVID-19 has had an impact on data completeness, validity, and reliability. Many regions’ data went down in indicator 4A, but not in indicators 4B and 4C.

We believe COVID-19 had an impact on this as trying to explain procedural safeguards to families virtually and telephonically is a challenging task to complete, similar to indicator #3. The attention span of people during a pandemic is reduced, and describing procedural safeguards to a family when not face to face is a tough task.

One thing Idaho did to mitigate the impact was to reformat our procedural safeguards booklet into a PDF document with a better table of contents that makes it easier for our service coordinators to refer families to each section.

## 4 - Prior FFY Required Actions

None

## 4 - OSEP Response

The State reported that the data for this indicator were collected from a response group that was representative of the population. However, in its narrative, the State reported "The proportion of whites responding (14.1%) is reliably different from the proportion of all invited families responding (12.1%), as are the responding proportions of mixed race (3.5%) and Hispanics (5.2%) - Family Survey respondents are not representative by these race-ethnicity categories. The numbers invited to participate in other categories are too small to allow reliable interpretation of their varying response rates." Therefore, OSEP is unclear whether the response group was representative of the population. OSEP notes that the State did not include strategies or improvement activities to address this issue in the future.

## 4 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

# 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 | 1.75% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 1.66% | 1.68% | 1.70% | 1.73% | 1.76% |
| Data | 1.51% | 1.66% | 1.36% | 1.50% | 1.57% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 1.76% |

Targets: Description of Stakeholder Input

The Central Office Infant Toddler Program staff identified the need for stakeholder input regarding new SPP indicator targets, including the newly added FFY 19 targets. Staff met to review the previous SPP indicator targets and actual data to identify potential starting points for the new FFY 2013-2018 and newly added FFY 19 targets. Central Office staff presented their findings during a tri-annual Hub Leadership meeting. During this meeting, resource limitations, the ongoing increase in referrals and enrollment, and the new and continuing SSIP requirements were discussed, as well as how to effectively maintain/improve the SPP Performance Indicators. Using the information from the discussion, draft targets were identified for each SPP indicator to take forward first to the EC3’s Infant Toddler Program Committee and then to the full Early Childhood Coordinating Council. For the new FFY 19 targets, the draft targets were identified for each SPP indicator to take forward to the Infant Toddler Coordinating Council.

1. Indicator #2 - Idaho has made steady progress during the previous federal fiscal years to ensure services were being provided in a child’s natural environment. Additionally, Idaho has strong policies and procedures in place and has developed contract language to ensure continued progress.

2. Indicator #3 – Idaho has met few targets in the previous Federal Fiscal Year for this indicator. We believe the State Systemic Improvement Plan (SSIP) will have positive long-term impacts in this area. Idaho may have to reset the baseline and targets for this indicator based on the newly updated ECO process, tools, and resources that have been implemented statewide.

3. Indicator #4 – A new baseline and targets were set in the FFY 2015 SPP/APR. The new baseline was set using the 2nd and 3rd quarters’ data
and new targets were set based on continued efforts to solidify the new family survey process. Realistic gains are expected to be made by FFY18. Idaho continues to work on improving the Family Survey response rate, which may impact existing targets and actual data reported in the future.

4. Indicators #5 and #6 – During the previous federal fiscal years for these indicators, Idaho remained fairly steady, until the 2008 recession. As a result, the state put measures in place to increase the number of birth-to-one-year-olds and birth-to-three-year-olds being served, with great
success. We anticipate making slow and steady progress but know this is a potential area of concern due to the program’s resource capacity.

5. Indicator #9 – Not applicable for Idaho Part C.

6. Indicator #10 – Idaho has not received any mediation requests during the previous federal fiscal years.

7. Indicator #11 – Idaho submitted the baseline and SPP targets when submitting Indicator #11 in April of 2017.

FFY 2013-2018 Targets
The Early Childhood Coordinating Council’s Infant Toddler Program Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members asked whether the SSIP would impact the current level of success in meeting performance indicators. There may be some impact on performance, but we want to move forward and do our best to continue to make slow and steady progress.

The Infant Toddler Program Committee accepted the newly proposed targets and recommended we present them to the full Early Childhood Coordinating Council for review and approval.

The Infant Toddler Program Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with the FFY 2013-2018 SPP targets, to the Early Childhood Coordinating Council, with a rationale for how the new targets were identified. Council members fully approved the new targets, especially in light of the program’s current resource capacity and additional work required to complete the SSIP to improve child outcome results.

FFY 2019 Targets
The Infant Toddler Coordinating Council’s Executive Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members inquired whether the increase in referrals and enrolled children, continued shortage of resources, high contractor turnover and work being completed for the SSIP would impact current performance. While we have done a good job so far, program staff and contractors continue to feel the pressure. We will continue to do the best we can with the challenges presented. The Executive Committee accepted the newly proposed targets and recommended we present them to the full Infant Toddler Coordinating Council.

The Executive Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with FFY 2013-2018 targets and the newly proposed FFY 2019 targets to the Infant Toddler Coordinating Council, with rationale for how the new targets were identified. Council members unanimously approved the new FFY 2019 targets.

**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 | 406 |
| 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 | 22,106 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 406 | 22,106 | 1.57% | 1.76% | 1.84% | Met Target | No Slippage |

**Compare your results to the national data**

Idaho placed 1st in the nation when ranked among other states with Category C eligibility criteria. Idaho served 1.84% of the state’s infants birth to one years of age. This figure is .47% above the national average of 1.37% for all 50 states, D.C., and P.R.

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

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

**Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs 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 | 2.90% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 2.77% | 2.78% | 2.81% | 2.85% | 2.91% |
| Data | 2.66% | 2.85% | 2.74% | 2.92% | 3.04% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 2.95% |

Targets: Description of Stakeholder Input

The Central Office Infant Toddler Program staff identified the need for stakeholder input regarding new SPP indicator targets, including the newly added FFY 19 targets. Staff met to review the previous SPP indicator targets and actual data to identify potential starting points for the new FFY 2013-2018 and newly added FFY 19 targets. Central Office staff presented their findings during a tri-annual Hub Leadership meeting. During this meeting, resource limitations, the ongoing increase in referrals and enrollment, and the new and continuing SSIP requirements were discussed, as well as how to effectively maintain/improve the SPP Performance Indicators. Using the information from the discussion, draft targets were identified for each SPP indicator to take forward first to the EC3’s Infant Toddler Program Committee and then to the full Early Childhood Coordinating Council. For the new FFY 19 targets, the draft targets were identified for each SPP indicator to take forward to the Infant Toddler Coordinating Council.

1. Indicator #2 - Idaho has made steady progress during the previous federal fiscal years to ensure services were being provided in a child’s natural environment. Additionally, Idaho has strong policies and procedures in place and has developed contract language to ensure continued progress.

2. Indicator #3 – Idaho has met few targets in the previous Federal Fiscal Year for this indicator. We believe the State Systemic Improvement Plan (SSIP) will have positive long-term impacts in this area. Idaho may have to reset the baseline and targets for this indicator based on the newly updated ECO process, tools, and resources that have been implemented statewide.

3. Indicator #4 – A new baseline and targets were set in the FFY 2015 SPP/APR. The new baseline was set using the 2nd and 3rd quarters’ data
and new targets were set based on continued efforts to solidify the new family survey process. Realistic gains are expected to be made by FFY18. Idaho continues to work on improving the Family Survey response rate, which may impact existing targets and actual data reported in the future.

4. Indicators #5 and #6 – During the previous federal fiscal years for these indicators, Idaho remained fairly steady, until the 2008 recession. As a result, the state put measures in place to increase the number of birth-to-one-year-olds and birth-to-three-year-olds being served, with great
success. We anticipate making slow and steady progress but know this is a potential area of concern due to the program’s resource capacity.

5. Indicator #9 – Not applicable for Idaho Part C.

6. Indicator #10 – Idaho has not received any mediation requests during the previous federal fiscal years.

7. Indicator #11 – Idaho submitted the baseline and SPP targets when submitting Indicator #11 in April of 2017.

FFY 2013-2018 Targets
The Early Childhood Coordinating Council’s Infant Toddler Program Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members asked whether the SSIP would impact the current level of success in meeting performance indicators. There may be some impact on performance, but we want to move forward and do our best to continue to make slow and steady progress.

The Infant Toddler Program Committee accepted the newly proposed targets and recommended we present them to the full Early Childhood Coordinating Council for review and approval.

The Infant Toddler Program Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with the FFY 2013-2018 SPP targets, to the Early Childhood Coordinating Council, with a rationale for how the new targets were identified. Council members fully approved the new targets, especially in light of the program’s current resource capacity and additional work required to complete the SSIP to improve child outcome results.

FFY 2019 Targets
The Infant Toddler Coordinating Council’s Executive Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members inquired whether the increase in referrals and enrolled children, continued shortage of resources, high contractor turnover and work being completed for the SSIP would impact current performance. While we have done a good job so far, program staff and contractors continue to feel the pressure. We will continue to do the best we can with the challenges presented. The Executive Committee accepted the newly proposed targets and recommended we present them to the full Infant Toddler Coordinating Council.

The Executive Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with FFY 2013-2018 targets and the newly proposed FFY 2019 targets to the Infant Toddler Coordinating Council, with rationale for how the new targets were identified. Council members unanimously approved the new FFY 2019 targets.

**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 | 2,143 |
| 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 | 67,530 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,143 | 67,530 | 3.04% | 2.95% | 3.17% | Met Target | No Slippage |

**Compare your results to the national data**

Idaho placed 8th in the nation when ranked among other states with Category C eligibility criteria. Idaho served 3.17% of the state’s infants birth to three years of age. This figure is .53% below the national average of 3.7% for all 50 states, D.C., and P.R.

**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 | 90.30% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 96.59% | 97.68% | 93.61% | 94.45% | 91.94% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,398 | 2,062 | 91.94% | 100% | 92.63% | 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.**

512

**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).**

The full FFY 2019 reporting year – July 1, 2019 – June 30, 2020

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

Timely Individualized Family Service Plans (IFSPs) are calculated based on the actual number of days between the date of referral and the date of the child's initial Individualized Family Service Plan meeting. In Idaho, the 45-day clock to complete the initial Individualized Family Service Plan begins the date a referral is received. A statewide report encompassing all initial Individualized Family Service Plans completed on 7/1/19 through 6/30/2020 was generated from the ITPKIDS database.

Idaho has a number of methods to ensure compliance with the 45-day timeline, including:
• Monthly reports run by hub leaders identify missing or inaccurate data.
• Reports run by Central Office staff during the Regional Annual Performance Report, State Performance Plan/Annual Performance Report, and
 Corrective Action Plan processes identify missing or inaccurate data.
• Calculation in ITPKIDS of the timeliness of an initial Individualized Family Service Plan based on the referral date. If the initial Individualized
 Family Service Plan date is greater than 45 days from the referral date, ITPKIDS requires the user to record a late reason.
• Only members of the Central Office ITPKIDS business team may modify a referral or Individualized Family Service Plan date recorded in the
 database.
• An ITPKIDS query captures the dates of initial IFSPs for a specified period of time.
• Reports run by Infant Toddler Program data analyst and hub leaders identify referrals currently greater than 45 days that do not have an initial
 IFSP recorded in ITPKIDS.
• Reports run by Infant Toddler Program data analyst and Central Office identify incorrect 45-day late reasons recorded by users.

Corrections are made in ITPKIDS when data inaccuracies are identified. Infant Toddler Program Central Office staff and data analyst work together to identify any state or local error patterns or trends. When patterns are identified, actions to rectify the issues include, but are not limited to, the following:
• Staff training through ITPKIDS training videos, user guides, and supervisor-led training upon hire.
• Collection of qualitative information regarding the data via discussion of issues at triannual Statewide Leadership meetings for hub leaders
 to inform their local staff and contractors.
• In-person, phone, or email communication from Central Office with hub leaders identifying data areas to be addressed and actions needed.
• The ITPKIDS business team discusses and implements potential modifications to the data system when needed to prevent future issues.
• If necessary, the ITPKIDS training videos and user guides are modified.

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

In Idaho, exceptional family circumstances were included as timely when calculating the percentage of children receiving timely services.

Statewide, five hundred and twelve (512) children experienced delays in IFSP due to exceptional family/extenuating circumstances. Examples of family circumstances include but are not limited to:
• COVID-19
• Unable to contact family
• Family declined service
• Family no show
• Conflict with family scheduling appointment
• Child/family illness or hospitalization
• Family request for later service start date

Statewide, one hundred and fifty-two (152) children experienced delays in IFSPs due to agency reasons. Examples of agency reasons for delay include but are not limited to:
• Conflict with agency scheduling appointment
• Staff/contractor unavailability
• High referrals/caseloads (high referrals were prior to COVID-19)
• Staff/contractor turnover
• Delay in receiving documentation to determine eligibility (compounded by COVID-19)

COVID 19
Of the IFSPs developed in FFY 19, Idaho does not believe that COVID-19 impacted data validity and reliability. However, once COVID-19 hit Idaho, the number of referrals, children enrolled, and IFSPs declined, affecting the total completeness of our data. We observed that the number of children Idaho was serving continued to grow at high rates, but once COVID-19 hit, referrals and enrollment numbers went down.

When COVID-19 hit, a new service delay reason of “Coronavirus” was added to our database and is used when a family
 1. has an extenuating circumstance related to COVID-19 that leads to the IFSP being late,
 2. chooses not to move forward with developing an IFSP due to concerns about COVID-19, or
 3. withdraws from the program due to concerns about COVID-19.

This was Idaho’s attempt to track how COVID-19 impacted our program and services we provide, to mitigate the impact on data collection.

**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** |
| --- | --- | --- | --- |
| 3 | 3 | 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***

Idaho demonstrated that it corrected all findings of non-compliance identified in FFY 2018, consistent with the requirements of OSEP Memo 09-02. Specifically, Idaho reports verification that three programs with non-compliance in FFY 2018: (1) have corrected each individual case of non-compliance, unless the child is no longer within the jurisdiction of the program; and (2) are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through onsite monitoring or a State data system.

In FFY 18, 174 children did not have an IFSP implemented within the 45-day timeline. These 174 children were located across all 7 regional programs. Three (3) of the 7 regional programs were issued findings of noncompliance, whereas 4 regional programs were not issued findings due to achieving pre-finding correction (performing at 100% and correcting all child-specific noncompliance) during the RAPR review process. The RAPR review process occurs prior to issuing written findings (see Prong 2 correction below).

For Prong 2 (EIS program level) correction, subsequent review of data (completed later than June 30, 2019 and generated from the ITPKIDS web-based data system) was used to verify that programs were correctly implementing the 45-day timeline requirement in FFY 18. The data analysis revealed the following:

 • The 3 regional EIS programs that had findings issued to them were verified as correcting noncompliance within one year of written findings by
 reviewing one new month of indicator 7 data for each program.
 -The review revealed that each of the 3 programs were at 100% for this requirement.

 • The additional 4 regional EIS programs achieved pre-finding correction during the FFY 18 RAPR review process by reviewing one new
 month of indicator 7 data and were not issued findings of noncompliance. (These programs were not issued a finding of noncompliance
 since they also corrected child-specific noncompliance prior to issuing a written notification of findings.)
 -The review of additional data revealed that each of the 4 programs were at 100% for this requirement prior to issuing written findings.

To support correction of noncompliance, the following activities were also implemented:
• Policies and procedures were reviewed, and staff/contractors received TA on regulatory requirements. Additionally, Service Coordination hub leaders and regional supervisors worked very closely with their staff and contractors to ensure they understand and Implement all aspects of ensuring an IFSP is developed within 45 days of receiving a referral.

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

For Prong 1 (individual child level) correction, data from ITPKIDS was used to verify child-specific correction for the 174 children who did not have an IFSP implemented within the 45-day timeline or who had an IFSP developed, although untimely.

Correction of each individual incidence of non-compliance is verified through ITPKIDS. ITPKIDS captures the referral date and initial IFSP date. It also calculates the 45-day timeline based on the referral date, so service coordinators are able to keep on track. If the initial IFSP date is greater than 45 days from the referral date, ITPKIDS requires users to record a Delay Reason before they can save the IFSP.

Central Office staff generate and review timely services reports (using the data from ITPKIDS described above) during the annual R-APR, SPP/APR, and Corrective Action Plan processes, and at other necessary intervals, to verify that each individual instance of non-compliance is corrected unless the child is no longer within the jurisdiction of the EIS program, the family declined services, or the EIS program was unable to make contact with the family.

**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 the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (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, the State must describe the specific actions that were taken to verify the correction.

If the State 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 the State 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 | 79.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 97.14% | 98.10% | 92.38% | 92.38% | 92.23% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 100 | 105 | 92.23% | 100% | 95.24% | Did Not Meet 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).**

To obtain data for indicators 8A, 8B, and 8C, the Central Office data analyst pulled a random file sample from the ITPKIDS web-based data system within the full FFY 2019 reporting year (July 1, 2019 – June 30, 2020).

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

The following processes describe how this indicator accurately reflects data for infants and toddlers with Individualized Family Service Plans (IFSPs) for the full reporting period:

 1. The Central Office data analyst pulled a random file sample from the data system (ITPKIDS) within the FFY 2019 reporting year.
 2. A state lead agency program specialist sent instructions with the list of child names to each region to complete the file review for
 indicators 8A, 8B, and 8C.
 3. Hub leaders or supervisors completed the file review and submitted the results to the lead agency.
 4. The state lead agency program specialist and Part C Coordinator reviewed the results, clarified any questions, and calculated the
 results.
 5. The state lead agency program specialist and Part C Coordinator used data from ITPKIDS to review and verify findings of the file
 review.

To ensure accuracy of the file sample pulled from ITPKIDS, the ITP data analyst and hub leaders run reports on a regular basis to identify any children over the age of three for whom an exit record does not exist in the data system.

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

In Idaho, exceptional family circumstances were included as timely when calculating the percentage of children with a timely development of IFSP transition steps and services.

Statewide, no (0) children experienced delays in the development of IFSP transition steps and services due to exceptional family/extenuating circumstances.

Statewide, 5 children experienced delays in the development of IFSP transition steps and services due to an agency reason. Examples of agency reasons for delay include:
• No IFSP transition steps and services developed in IFSP.
• Transition steps and services in IFSP, but not complete.
• Transition steps and services discussed at annual IFSP meeting, but not documented in IFSP.

COVID 19
Of the IFSPs developed in FFY 19, Idaho does not believe that COVID-19 impacted data validity and reliability. However, once COVID-19 hit Idaho, the number of referrals, children enrolled, and IFSP declined, affecting the total completeness of our data. We observed that the number of children Idaho was serving continued to grow at high rates, but once COVID-19 hit, referrals and enrollment numbers went down thus affecting the number of IFSPs with transition steps and services in them.

When COVID-19 hit, a new service delay reason of “Coronavirus” was added to our database and is used when a family
 1. has an extenuating circumstance related to COVID-19 that leads to the IFSP being late,
 2. chooses not to move forward with developing an IFSP due to concerns about COVID-19, or
 3. withdraws from the program due to concerns about COVID-19.

This was Idaho’s attempt to track how COVID-19 impacted our program and services we provide, to mitigate the impact on data collection.

**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***

Idaho demonstrated that it corrected all findings of non-compliance identified in FFY 18, consistent with the requirements in OSEP Memo 09-02. Specifically, Idaho reports verification that the EIS programs with noncompliance identified in FFY 18: (1) have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program; and (2) are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through onsite monitoring or the state’s data system.

In FFY 18, 8 children did not 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. These 8 children were located in four regional EIS programs. Four (4) of the 7 regional EIS programs were issued findings of noncompliance, whereas 3 regional EIS programs were not issued findings due to achieving 100% for indicator 8A in FFY 18 reviews during the RAPR process. The RAPR review process occurs prior to issuing written findings (see Prong 2 correction below).

For Prong 2 (EIS program level) correction, subsequent file review samples (completed later than June 30, 2020 and generated from the ITPKIDS web-based data system) were used to verify that the regional EIS programs were correctly implementing the IFSP 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 in FFY 2018. The data revealed the following:

• The 4 regional EIS programs who had findings issued were verified as correcting noncompliance within one year of written findings by
 reviewing one new month of indicator 8A data for each program.
 -The review revealed that each of the 4 programs were at 100% for this requirement.

To support correction of noncompliance, the following activities were implemented:
• Policies and procedures were reviewed, and staff/contractors received TA on regulatory requirements.

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

For Prong 1 (individual child level) correction, data from the FFY 18 file sample reviews (also contained in ITPKIDS) was used to verify child-specific correction for 8 children who did not 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 due to:
• Not having transition steps and services identified in their IFSP prior to exiting the program
• Not having their transition steps and services developed in the child’s IFSP prior to 9 months before the child’s third birthday and the
 transition steps and services were not reviewed again with the family prior to the child turning three years of age
• Transition steps and services in their IFSP being developed later than the required timelines.

Correction of each individual instance of noncompliance is normally verified through ITPKIDS or file reviews generated by ITPKIDS. However, the eight children identified without transition steps and services in their IFSP in FFY 2018 exited prior to correction. Therefore, it was not possible to verify correction for these children.

Even though Idaho was not able to correct each instance of noncompliance, local programs revisited the transition policies, timelines, and work lists in the ITPKIDS web-based data system with new and existing staff/contractors to ensure a full understanding of the requirements and timelines for this indicator. As part of the corrective action process, regions identified strategies in their corrective action plan that included reviewing regional policies regarding transition, reviewing IFSPs, and providing training to staff related to required IFSP transition steps and services. Some regions have also updated exiting processes to ensure every child has 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.

**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

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (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, the State must describe the specific actions that were taken to verify the correction.

If the State 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 the State did not identify any findings of noncompliance in FFY 2019.

# 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 | 87.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 99.04% | 99.05% | 95.19% | 97.14% | 93.20% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 97 | 105 | 93.20% | 100% | 92.38% | Did Not Meet 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**

Idaho does not have an “Opt Out” policy for families.

**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).**

To obtain data for indicators 8A, 8B, and 8C, the Central Office data analyst pulled a random file sample from the ITPKIDS web-based data system within the full FFY 2019 reporting year (July 1, 2019 – June 30, 2020).

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

The following processes describe how this indicator accurately reflects data for infants and toddlers with Individualized Family Service Plans (IFSPs) for the full reporting period:
 1. The Central Office data analyst pulled a random file sample from the data system (ITPKIDS) within the FFY 2019 reporting year.
 2. A state lead agency program specialist sent instructions with the list of child names to each region to complete the file review for
 indicators 8A, 8B, and 8C.
 3. Hub leaders or supervisors completed the file review and submitted the results to the lead agency.
 4. The state lead agency program specialist and Part C Coordinator reviewed the results, clarified any questions, and calculated the
 results.
 5. The state lead agency program specialist and Part C Coordinator used data from ITPKIDS to review and verify findings of the file
 review.

To ensure accuracy of the file sample pulled from ITPKIDS, the ITP data analyst and hub leaders run reports on a regular basis to identify any children over the age of three for whom an exit record does not exist in the data system.

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

In Idaho, exceptional family circumstances were included as timely when calculating the percentage of children with a timely notification to the SEA and LEA where the child resides.

Statewide, no (0) children experienced delays in the timely SEA/LEA notification due to exceptional family/extenuating circumstances.

Statewide, eight (8) children experienced delays in SEA/LEA timely notification due to an agency reason. The Infant Toddler Program has had a statewide centralized process in place for many years in which two staff members are responsible to notify the SEA and appropriate LEA once a child is deemed eligible for Part C and may be potentially eligible for special education services under Part B of the Individuals with Disabilities Education Act (IDEA). With two staff being responsible to notify the SEA and appropriate LEA, there was potential for error. Once identified, the State Lead Agency moved the process to one staff being responsible for the notification. We are confident this modification will resolve the issue encountered.

COVID-19
The SEA/LEA Notification Process remained the same for the Idaho Infant Toddler Program. Additionally, the Part C Coordinator worked with the Part B Coordinator to identify any potential changes to the Part B system as a result of COVID-19. We were informed that Part B Special Education Directors were informed that they still had to meet all Part B requirements, including receipt of the Notifications from Part C.

Data completeness was impacted by the smaller number of children served and services being provided since the pandemic started. However, there were no impacts to the validity and reliability of our existing SEA/LEA Notification process. Additionally, we did not have to take any steps to mitigate any impacts regarding data collection. Additionally, the Infant Toddler Program had no control over what and if the Part B local school districts did with the notifications that were sent to them.

**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** |
| --- | --- | --- | --- |
| 2 | 2 | 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***

Idaho demonstrated that it corrected all findings of non-compliance identified in FFY 18, consistent with the requirements in OSEP Memo 09-02. Specifically, Idaho reports verification that the EIS programs with noncompliance identified in FFY 18: (1) have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program; and (2) are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through onsite monitoring or the state’s data system.

In FFY 18, 7 children did not have the SEA and LEA notification sent at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services in FFY 2018. These 7 children were located in 2 of the 7 regional EIS programs.

• The two regional EIS programs were issued findings of noncompliance during FFY 2018 RAPR file review, which occurs prior to issuing written findings

For Prong 2 (EIS program level) correction, subsequent file review samples (completed no later than June 30, 2020 and generated from the ITPKIDS web-based data system) were used to verify that the regional EIS programs were correctly implementing the SEA and LEA notification sent at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services in FFY 18. The data analysis revealed:

• The 2 regional EIS programs who had findings issued were verified as correcting noncompliance within one year of written findings by reviewing one new month of indicator 8B data for each program.
 -The review revealed that each of the 2 programs were at 100% for this requirement.

To support correction of noncompliance, the following activities were implemented:
• Policies and procedures were reviewed, and TA on regulatory requirements was provided on a regular basis to staff/contractors, hub leaders, and human services supervisors.

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

For Prong 1 (individual child level) correction, data from the FFY 18 file sample reviews (also contained in ITPKIDS) was used to verify child-specific correction for the 7 children (located in two of Idaho’s seven regional EIS programs) who did not have the SEA and LEA notification sent at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services. The state verified 4/7 children had their SEA and LEA Notification sent, although late, and 3/7 children were no longer in the program.

Correction of each individual incidence of noncompliance is verified through ITPKIDS. ITPKIDS captures the SEA/LEA Notification date for all Part B Potentially Eligible children enrolled in the Infant Toddler Program as well as corresponding Transition notes completed by the centralized SEA/LEA Notification staff.

Central Office reviews the results from the transition file review using ITPKIDS to verify that each individual instance of non-compliance is corrected unless the child is no longer within the jurisdiction of the EIS program.

**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

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (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, the State must describe the specific actions that were taken to verify the correction.

If the State 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 the State did not identify any findings of noncompliance in FFY 2019.

# 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 | 84.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 90.38% | 79.05% | 85.58% | 92.38% | 96.12% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 76 | 105 | 96.12% | 100% | 78.10% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

During FFY 19, service coordination turnover had a large impact on Idaho Infant Toddler Programs ability to either complete transition conference timely or remember to invite a representative from the child’s school district to the Part C Transition meeting. In FFY 18, six of the seven regions experienced service coordinator turnover (12% state staff and 18% contractors) for a total separation rate of 15%. In FFY 19, all seven regions experienced service coordinator turnover (15% state staff and 35% contractors) for a total separate rate of 25%. The West Hub (regions 3 and 4) were the hardest hit with turnovers and they serve the highest number of children in Idaho. With these high separation rates and having to hold positions open due to budgetary constraints related to COVID-19, caseloads in many areas are well over 100 children per service coordinator. Even seasoned service coordinators are having a hard time keeping up with timelines and requirements. Despite this situation, it is worth noting that 4 out of 7 regions achieved 100% for indicator 8C in FFY 19.

COVID-19 has also made it extremely difficult to schedule Part C Transition meetings with school district representatives as every school district does things differently and continually changed processes/procedures as the number of COVID-19 cases in Idaho rose.

Some of the school districts were not invited for Part B potentially eligible children even though the transition conference was held timely. Some were held untimely. This is a direct impact of the turnover, high caseloads, and consistently having new service coordinators to train.

**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.**

6

**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).**

To obtain data for indicators 8A, 8B, and 8C, the Central Office data analyst pulled a random file sample from the ITPKIDS web-based data system within the full FFY 2019 reporting year (July 1, 2019 – June 30, 2020).

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

The following processes describe how this indicator accurately reflects data for infants and toddlers with Individualized Family Service Plans (IFSPs) for the full reporting period:

 1. The Central Office data analyst pulled a random file sample from the data system (ITPKIDS) within the FFY 2019 reporting year.
 2. A state lead agency program specialist sent instructions with the list of child names to each region to complete the file review for
 indicators 8A, 8B, and 8C.
 3. Hub leaders or supervisors completed the file review and submitted the results to the state lead agency.
 4. The state lead agency program specialist and Part C Coordinator reviewed the results, clarified any questions, and calculated the
 results.
 5. The state lead agency program specialist and Part C Coordinator used data from ITPKIDS to review and verify findings of the file
 review.

To ensure accuracy of the file sample pulled from ITPKIDS, the ITP data analyst and hub leaders run reports on a regular basis to identify any children over the age of three for whom an exit record does not exist in the data system.

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

In Idaho, exceptional family circumstances were included as timely when calculating the percentage of children with a timely transition conference held.

Statewide, six (6) children experienced delays in holding a timely transition conference due to exceptional family/extenuating circumstances. Examples of family circumstances include:

• Conflict with family scheduling transition conference
• Child/family illness or hospitalization
• Family indecisiveness
• Family request to hold transition conference at a later date

Statewide, twenty-three (23) children experienced delays in holding a timely transition conference due to an agency reason. Examples of agency reasons for delay include:

• SC's were late on Part C transition conference timeline (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).
• Child's case transitioned to brand new SC resulting in missing the required transition conference timeline (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).
• Insufficient documentation to verify delay was due to family reason.
• Transition meeting was held timely, but the school district was not invited.
• Transition meeting was held timely, but the school district was not notified timely.

COVID-19
The Part C Transition Conference process remained the same for the Idaho Infant Toddler Program. Additionally, the Part C Coordinator worked with the Part B Coordinator to identify any potential changes to the Part B system as a result of COVID-19. We were informed that Part B Special Education Directors were informed that they still had to meet all Part B requirements, including participating in the Part C Transition Conference.

It was reported that many school district representatives did not attend the Part C Transition Conference as schools grappled with how to handle the COVID-19 pandemic. However, we continued to hold the conferences with or without the Part B representative being invited/present in adherence with the IDEA, Part C requirements.

Fewer transition conferences were held due to the downturn in the number of children referred and served by our program since the pandemic started. However, there were no impacts to the validity and reliability of our existing Part C Transition Conference process. Additionally, we did not have to take any steps to mitigate any impacts regarding data collection. Again, the Infant Toddler Program had no control over how the Part B local school districts responded to invitations to the Part C Transition Conference.

**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** |
| --- | --- | --- | --- |
| 2 | 2 | 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***

Idaho demonstrated that it corrected two findings of noncompliance identified in FFY 18. Consistent with the requirements in OSEP Memo 09-02, Idaho reports verification that the two EIS regional programs with noncompliance in FFY 18: (1) have corrected each individual case of non-compliance, unless the child is no longer within the jurisdiction of the program; and (2) are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through onsite monitoring or a State data system.

In FFY 18, 4 children did not have the Part C transition conference held 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. These 4 children were located in 3 of the 7 regional EIS programs. Two (2) of the 7 regional EIS programs were issued findings of noncompliance, 4 regional EIS programs were not issued findings due to achieving 100% for indicator 8C, and the remaining regional program had ongoing noncompliance and was not issued a new finding in FFY 18. (refer to the Correction of Findings of Noncompliance Identified Prior to FFY 2017 section below for additional information) corrected in FFY 18 review during the RAPR process. The RAPR review process occurs prior to issuing written findings (see Prong 2 correction below).

For Prong 2 (EIS program level) correction, subsequent review of data (completed later than June 30, 2018 and generated from the ITPKIDS web-based data system) was used to verify that 2 of the 3 of the regional EIS programs were correctly implementing the timely services requirement in FFY 2018 (refer to the Correction of Findings of Noncompliance Identified Prior to FFY 2018 section below for additional information). The data analysis revealed:

• The 2 regional EIS programs who had findings issued were verified as correcting noncompliance within one year of written findings by reviewing one new month of indicator #8C data for each program. The review revealed that each of the 2 programs were at 100% for this requirement.

• The 1 regional EIS program with an outstanding finding of noncompliance from (FFY 17) was not verified as being corrected within two years of the original written finding by reviewing several months of indicator 8C data for the program (refer to the Correction of Findings of Noncompliance Identified Prior to FFY 2018 section below for additional information).

To support the correction of noncompliance, the following activities were implemented:
• Policies and procedures were reviewed, and staff/contractors, hub leaders, and human services supervisors received TA on regulatory requirements on a regular basis, especially the region with continued noncompliance from FFY 17.

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

For Prong 1 (individual child level) correction, data from the FFY 18 file sample reviews (also contained in ITPKIDS) was used to verify child-specific correction for 4 children who did not have the Part C transition conference held 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, and showed the transition conference was held, although untimely.

Correction of each individual incidence of noncompliance is verified through ITPKIDS. ITPKIDS captures the SEA/LEA Notification date for all Part B Potentially Eligible children enrolled in the Infant Toddler Program as well as corresponding Transition notes completed by the centralized SEA/LEA Notification staff.

Central Office reviews the results from the transition file review using ITPKIDS to verify that each individual instance of non-compliance is corrected unless the child is no longer within the jurisdiction of the EIS program.

**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** |
| --- | --- | --- | --- |
| FFY 2017 | 1 | 0 | 1 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

One of Idaho’s 7 regional EIS programs has not yet corrected their FFY 17 noncompliance (subsequent data- not at 100%) within two years of written findings. A corrective action plan with strategies to reach and sustain compliance was developed in FFY 17. The regional EIS program continues to submit required data pulled from a random file sample from ITPs data system to report on activities completed to correct their outstanding finding of noncompliance monthly.

The local early intervention program with not-yet-corrected FFY 17 noncompliance continues to experience high caseloads and continues to encounter high SC staff and contractor turnover, lengthy vacancies, and difficulty recruiting service coordinators. This program is located in the Treasure Valley, the most urban area of Idaho with the most competition for service coordinators with the highest number of children served by ITP in the state.

This outstanding finding of noncompliance is not a systemic issue, but a resource and capacity issue. The hub leaders and supervisors in this program continue to try and find efficiencies, but with high service coordinator contractor turnover, lengthy vacancies, and recruitment challenges, it continues to remain an uphill battle. They continually train new and existing staff and contractors on the requirement to conduct 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. This program also continues to work on ensuring that a Part B representative is invited to the transition conference for children who are Part B potentially eligible.

Central office works with and provides regular technical assistance to this region to assist with problem solving and ensuring all transition requirements are understood and being implemented correctly.

## 8C - Prior FFY Required Actions

None

## 8C - OSEP Response

## 8C - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2017 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 and the EIS program or provider with remaining noncompliance identified in FFY 2017: (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, the State must describe the specific actions that were taken to verify the correction.

If the State 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 the State 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.**

YES

**Provide an explanation of why it is not applicable below.**

Indicator #9 is not applicable as Part B due process procedures have not been adopted by Idaho Part C.

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

This Indicator is not applicable to the State.

## 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

The Central Office Infant Toddler Program staff identified the need for stakeholder input regarding new SPP indicator targets, including the newly added FFY 19 targets. Staff met to review the previous SPP indicator targets and actual data to identify potential starting points for the new FFY 2013-2018 and newly added FFY 19 targets. Central Office staff presented their findings during a tri-annual Hub Leadership meeting. During this meeting, resource limitations, the ongoing increase in referrals and enrollment, and the new and continuing SSIP requirements were discussed, as well as how to effectively maintain/improve the SPP Performance Indicators. Using the information from the discussion, draft targets were identified for each SPP indicator to take forward first to the EC3’s Infant Toddler Program Committee and then to the full Early Childhood Coordinating Council. For the new FFY 19 targets, the draft targets were identified for each SPP indicator to take forward to the Infant Toddler Coordinating Council.

1. Indicator #2 - Idaho has made steady progress during the previous federal fiscal years to ensure services were being provided in a child’s natural environment. Additionally, Idaho has strong policies and procedures in place and has developed contract language to ensure continued progress.

2. Indicator #3 – Idaho has met few targets in the previous Federal Fiscal Year for this indicator. We believe the State Systemic Improvement Plan (SSIP) will have positive long-term impacts in this area. Idaho may have to reset the baseline and targets for this indicator based on the newly updated ECO process, tools, and resources that have been implemented statewide.

3. Indicator #4 – A new baseline and targets were set in the FFY 2015 SPP/APR. The new baseline was set using the 2nd and 3rd quarters’ data
and new targets were set based on continued efforts to solidify the new family survey process. Realistic gains are expected to be made by FFY18. Idaho continues to work on improving the Family Survey response rate, which may impact existing targets and actual data reported in the future.

4. Indicators #5 and #6 – During the previous federal fiscal years for these indicators, Idaho remained fairly steady, until the 2008 recession. As a result, the state put measures in place to increase the number of birth-to-one-year-olds and birth-to-three-year-olds being served, with great
success. We anticipate making slow and steady progress but know this is a potential area of concern due to the program’s resource capacity.

5. Indicator #9 – Not applicable for Idaho Part C.

6. Indicator #10 – Idaho has not received any mediation requests during the previous federal fiscal years.

7. Indicator #11 – Idaho submitted the baseline and SPP targets when submitting Indicator #11 in April of 2017.

FFY 2013-2018 Targets
The Early Childhood Coordinating Council’s Infant Toddler Program Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members asked whether the SSIP would impact the current level of success in meeting performance indicators. There may be some impact on performance, but we want to move forward and do our best to continue to make slow and steady progress.

The Infant Toddler Program Committee accepted the newly proposed targets and recommended we present them to the full Early Childhood Coordinating Council for review and approval.

The Infant Toddler Program Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with the FFY 2013-2018 SPP targets, to the Early Childhood Coordinating Council, with a rationale for how the new targets were identified. Council members fully approved the new targets, especially in light of the program’s current resource capacity and additional work required to complete the SSIP to improve child outcome results.

FFY 2019 Targets
The Infant Toddler Coordinating Council’s Executive Committee met to review and discuss the proposed targets identified during the Hub Leadership meeting. Committee members inquired whether the increase in referrals and enrolled children, continued shortage of resources, high contractor turnover and work being completed for the SSIP would impact current performance. While we have done a good job so far, program staff and contractors continue to feel the pressure. We will continue to do the best we can with the challenges presented. The Executive Committee accepted the newly proposed targets and recommended we present them to the full Infant Toddler Coordinating Council.

The Executive Committee, along with the Part C Coordinator, presented information on previous targets and actual data, along with FFY 2013-2018 targets and the newly proposed FFY 2019 targets to the Infant Toddler Coordinating Council, with rationale for how the new targets were identified. Council members unanimously approved the new FFY 2019 targets.

**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)**

Idaho has not received any mediation requests since the inception of the SPP/APR. As a result, Idaho is not required to establish a baseline and targets if the number of mediations is less than 10 in a Federal Fiscal Year.

COVID-19
There were no effects related to COVID-19 regarding data completeness, validity, reliability and data collection for this indicator.

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2019. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 10 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role**

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:**

Dave Jeppesen

**Title:**

Director of Idaho Department of Health and Welfare

**Email:**

dave.jeppesen@dhw.idaho.gov

**Phone:**

208-334-5500

**Submitted on:**

04/27/21 11:02:55 AM

# ED Attachments

**  **