**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**

**Illinois**

U.S. Department of Education seal

**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**

Illinois is pleased to indicate with the submission of the FFY19/SFY20 State Performance Plan/Annual Performance Report that in this reporting year, the state continues to move forward in ensuring the citizens are afforded appropriate and viable services with a focus on those required by law. Illinois continues to engage stakeholders in reviewing APR data and planning for improvement. While some Indicators showed minor decreases, we feel that this may actually be indicative of better data quality and increased understanding of system policies and practices.   
Illinois has also received much needed technical assistance and support from the Office Special Education Program (OSEP) State Lead and our Early Childhood Technical Assistance partners to develop strategies for addressing our longstanding non-compliance. Attached is the FFY19/SFY20 Prior Indicator 09 Findings document with our progress. We have also worked with the OSEP funded technical assistance centers, the Center for IDEA Early Childhood Data Systems (DaSy) and the Early Childhood Technical Assistance Center (ECTA), to improve data quality and the child outcomes summary process. We are also working with them to identify specific strategies for correcting longstanding noncompliance at several Child and Family Connections (CFC) offices. Illinois continues to enhance systems and practices to address the compliance indicators and has dedicated efforts to supporting practice in Illinois' Early Intervention (EI) system which will be demonstrated in future APRs.

Additional information related to data collection and reporting

Due to Illinois' decision to utilize October data as our representative month for most indicators, we do not feel that COVID-19 substantially impacted the completeness or reliability of our data. We do anticipate, however, that COVID-19 will impact both the indicators that use October 2020 as the representative month as well as those that use a full year of data (Indicators 3 and 4) in next year's submission. We do acknowledge, though, that COVID-19 substantially impacted our ability to provide support to local programs related to the correction of longstanding noncompliance. We have continued meeting with technical assistance providers from DaSy and ECTA to refine and further develop a process for investigating and addressing longstanding noncompliance for the three compliance indicators. While we were able to implement portions of this plan, e.g. subsequent reviews of data subsets, we were not able to engage CFCs in an enhanced level of support. Both lead agency staff and program resources were instead devoted to addressing the changing needs of the program due to the pandemic. Sheltering orders and other strategies to mitigate the spread of the virus required many system-wide adaptions, e.g. new guidelines specific to OSEP guidance on delivering services during the pandemic, new strategies for interacting with families, authorization and reporting changes to capture accurate information about service delivery. For this reason, we were not able to move our process forward in the way we had anticipated.

**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 Illinois Department of Human Services (Department) serves as Illinois' Lead Agency. The Bureau of Early Intervention (Bureau) has staff allocated for general administration and supervision for compliance with the requirements set forth in the Individuals with Disabilities Education Act (IDEA) Part C. Illinois enacted the Early Intervention Services System Act (Act) (325 ILCS20 et. seq.) which establishes a statewide system of coordinated, comprehensive, interagency and interdisciplinary programs to be used in planning, implementation, coordination and evaluation of the statewide system of locally based early intervention services. As authorized and required by the Act, the Department promulgated detailed rules and regulations to reflect the intent of federal regulations contained in IDEA Part C. They are set forth in the Illinois Administrative Code (89 IL Admin. Code 500 et. seq.).  
  
The Department, through its EI Bureau, sets and disseminates policies and procedures for the provision of EI services through administrative rule, the Child and Family Connections Procedure Manual, the EI Provider Handbook, administrative contracts and payee agreements, and the State of Illinois Infant/Toddler & Family Rights under IDEA booklet. Again, in FFY19, there were no substantive changes to policy or procedure.  
  
There are 25 Child & Family Connections (CFC) offices covering all geographic areas of Illinois, and Cornerstone remains the statewide data system that collects and stores child and family information, generates authorizations for services, and interfaces with other systems to track and produce payments. The Bureau relies extensively on this data system to monitor the performance of the 25 CFC offices. The monthly review of performance measures are, in turn, shared back with the CFC offices. Annually, based on the review of these performance measures, the Bureau issues a letter of Findings of Noncompliance and Determinations to each CFC. Accordingly, each CFC office is required to address findings of noncompliance by developing a corrective action plan (CAP)/improvement plan to be implemented within one year. Additionally, each CFC office has a Determination Scorecard based on their performance. The CFC's scorecard guides monitoring, technical assistance, training and CAP reporting.  
  
Dispute Resolution is handled by staff in the Bureau. Resources are provided to parents both as they enter and while they are engaged in Early Intervention to assist them in understanding their rights for Dispute Resolution. Online forms and contact information are part of the process that makes information available through various avenues. Translation for Spanish-speaking families is also available. The Bureau accepts and dispositions all Dispute Resolutions, including Mediation and Due Process Hearings. The Bureau has an inter-agency agreement with the Illinois Department of Healthcare and Family Services for impartial and unbiased officials to organize the Due Process Hearings when needed. The State adopted Mediation and Due Process procedures in 34 CFR §300.506 through §300.512 and developed procedures that meet the requirements of §303.440. Several Legal staff within the Department are available to facilitate the development and negotiation of all resolution session agreements. An electronic database is in place to track Due Process complaints.  
  
Multiple other functions of supervising the Early Intervention system are performed through contracted partners. There are five contracts covering the Illinois Early Intervention Monitoring, Credentialing, Clearinghouse, Training/Professional Development and Centralized Billing/Family Fees components.  
  
The Illinois EI Monitoring Program (http://www.earlyinterventionmonitoring.org/) conducts monitoring activities of the CFC offices and EI direct service providers. CFC offices and credentialed and/or enrolled service providers are monitored through on and off-site file reviews. In a given year, all 25 CFC offices and approximately 65 percent of the approximately 4,500 EI direct service providers that billed for services during the preceding fiscal year are subject to the compliance monitoring process. EI Monitoring additionally provides each CFC office a focused verification monitoring review at a minimum of once every three years or upon the request of the Bureau. The focused verification monitoring review includes 1) an in-depth file review; 2) CFC Program Manager and CFC Service Coordinator interviews; and 3) Family, Service Provider, and Stakeholder surveys. Through file reviews (on and offsite) and annual monitoring visits, the EI Monitoring Program assesses compliance with determinations relating to administrative processes and procedures. The number of files to be reviewed is determined by the size of the CFC office’s caseload for a one-month time-period and the number of children transitioning from the EI program during the designated time-period. During this review, the EI Monitoring Program identifies any areas of noncompliance, documents the correction of noncompliance, and provides technical assistance as necessary. The provision of technical assistance is an integral part of this monitoring process, and issues are addressed immediately upon the completion of an onsite monitoring visit. Annually, 65% of the EI service providers receive a compliance monitoring review. EI providers who were previously monitored could be scheduled for subsequent compliance monitoring based upon the outcome of the previous review. The EI Monitoring Program randomly selects 10% of the EI service provider's caseload for file reviews for payees with less than 700 cases. EI Providers with caseloads of more than 700 cases are monitored annually using a random selection of 5% of their caseloads, with a minimum of 70 files reviewed. The EI Monitoring Program also safeguards the rights of families to receive appropriate services and supports by investigating parent billing complaints submitted to the Bureau or to the EI Central Billing Office, who is our contracted billing agent, regarding the appropriate billing of services. The EI Monitoring Program continues to be a major stakeholder in the work of the State Systemic Improvement Plan (SSIP) as well which Illinois will explain within its SSIP submission in April 2021.  
  
The Department contracts with the EI Central Billing Office, CBO, (http://www.eicbo.info/) to process paper and electronic service provider claims and to create provider claim summaries as part of the fee-for-service delivery system; generate vouchers; submit Medicaid claims to the Illinois Department of Healthcare and Family Services (HFS); and, prepare and forward claims for federal matching funds. In addition, the CBO maintains insurance coverage information, including waivers and exemptions, provides insurance billing services, and invoices, collects and updates the family participation fee accounts. They also provide the family with an Explanation of Benefits (EOB), which accounts for all monthly provider claims to families. The CBO maintains the linkage between EI data systems and Cornerstone for direct service authorizations.

**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.**

Illinois’ system for technical assistance encompasses the Bureau and its contract entities. These vital partners support the delivery of high quality and evidence-based technical assistance. Monthly meetings with the EI Contracted Partners provide current and informed supports to the various partners to disseminate within their interactions with EI participants, providers, local community partners and families currently being served or those interested in the program. Illinois benefits from its relationship with state and national recognized leaders in early childhood development and education that contribute a wealth of knowledge and expertise.  
  
The Bureau supports technical assistance as a key function described in the contracts with the local CFC offices, the EI Training Program, the EI Monitoring Program, the EI Clearinghouse, the EI Central Billing Office, and the EI Credentialing program. The Bureau’s website and its contractual partners’ websites ensure the availability of Illinois-specific as well as national information and resources to EI providers, the CFCs, stakeholders and families.  
  
Each CFC office houses Local Interagency Council (LIC) activities to provide technical assistance to its provider community. The needs are assessed through current events and/or needs assessments. The technical assistance is supported through responses to phone calls and emails, provider meetings, and activities of the LIC. In addition, each CFC office has a required contract with a developmental pediatric consultant for specific services to implement quality assurance activities such as periodic participation in IFSP meetings, consultation on requests for IFSP service changes, technical assistance and training to EI providers and services coordinators to address local system needs, specific disabilities, specific family situations, and outreach to primary referral sources. Each CFC also houses a social emotional consultant for the purposes of reflective consultation to the CFC Program Manager, individuals or groups consultation as well as coordination of components including overseeing the implementation of social emotional screening and specialized assessment and/or offering support to IFSP teams when needed.  
  
Most functions of the EI Monitoring Program and the EI Central Billing Office are described in the General Supervision System section. Other partners, such as the EI Training Program, the EI Clearinghouse, and Provider Connections are described in the Professional Development section. All are very important sources of technical assistance for the Illinois EI system. In addition, the EI Training Program’s contract includes an EI Ombudsman position. The Ombudsman works with the Bureau, CFC offices and EI providers to ensure fidelity with EI laws, rule, policies, practice and procedures, and promotes the highest attainable evidence-based practices that support the key principles of Illinois’ Early Intervention Program. Illinois’ EI Ombudsman is also thoroughly involved in multiple, national activities centered on early childhood development including such activities as the workgroup for establishing the DEC's Recommended Practices and the aRPy Ambassador program through the Early Childhood Technical Assistance Center!  
  
To best support our CFCs, Bureau staff meet monthly with CFC managers to provide clarification to policies and procedures and address questions and concerns. During the pandemic, an additional monthly meeting has been added for additional support to the CFCs. EI contract partners are also welcome to help support the CFCs as well during these monthly calls or face-to-face meetings. EI contractual administrative entities (outside of the CFCs) and Bureau staff also meet monthly to leverage resources, coordinate efforts, and identify additional strategies to meet system needs for technical assistance. Designated Bureau staff provide responses to all inquiries from CFC offices and EI Providers usually via the telephone or email. Informational memos are posted on all available EI websites (DHS and contractual partners) and distributed via email to CFC managers. Updates to manuals and/or documents are provided to all partners and posted on partners' websites to help support the population we serve. During the pandemic, frequent updates were posted on Partners' websites to keep stakeholders informed about changing conditions and system responses.   
  
The Bureau continues to request and receive technical assistance from a number of national and regional resources, including the IDEA Data Center (IDC), ECTA, DaSy, and OSEP. The Bureau staff have participated in several cross-state learning collaboratives and other learning communities and have also benefited from technical assistance partners' assistance in the development and implementation of the SSIP.   
  
The Bureau has continued to receive technical assistance from their OSEP State Lead to support resolution of long standing noncompliance. The attached Response Table outlines the historical correction with a narrative of the practices Illinois has chosen to address noncompliance and ensure quality services are delivered in accordance with Part C regulations to all eligible Illinois children and families.  
  
In response to our Needs Assistance determination, Illinois has availed itself of many technical assistance opportunities. The technical assistance that Illinois received has helped us update many facets of our transition process, examples include revising the parent transition guide to reflect current practice, updating the notification timing to LEAs, updating the IFSP Transition Steps and Services page to reflect desired practice, and creating and distributing a list of available professional development related to transition across several systems. Illinois also changed its performance contracting to increase attention to, and feedback on, transition practices. Additionally, EI did a very intensive data dive for Indicator 1 data to determine the root causes for service delays. Causes were varied and included things such as provider shortage, unsafe neighborhoods, and rural distance challenges. We also investigated whether race/ethnicity was leading to inequities in regard to which children received timely services. We were also able to gain clarification on who should be counted as delayed and increased the data accuracy around children waiting for services. The technical assistance received also included ongoing work to help Illinois address longstanding non-compliance. Technical assistance has been critical in improving our understanding of how to assess the current status of findings, the general supervision components that exist to support improved practice, the options for addressing individualized needs to help support best practice, and the importance of consistent approaches for monitoring correction plans at the effected CFCs. This past year's technical assistance supported the transitions needed for implementing services during the pandemic and helped us streamline and adapt our plans for addressing longstanding noncompliance.

**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.**

The Early Intervention Services System Act (Act) (325 ILCS20 et. seq.) and the Illinois Administrative Code (89 IL Admin. Code 500 et. seq.) require and define a system of personnel development and personnel standards to ensure that EI providers are effectively providing services that improve results for infants and toddlers with disabilities and their families. EI families, service providers, and primary referral sources have access to a wealth of information provided through various EI specific websites as well as through online (both synchronous and asynchronous) and face-to-face training opportunities (pre-pandemic).  
  
For credentialing matters, Illinois contracts with the EI Provider Connections office (http://www.wiu.edu/ProviderConnections/) to coordinate the credentialing process and the enrollment of service providers in compliance with state and federal requirements. The Illinois Department of Healthcare and Family Services (HFS), our Medicaid state lead, implemented a new enrollment system for all Medicaid providers in Illinois. This system greatly impacted the EI providers and CFC offices who provide services to Medicaid-eligible children. The EI CBO submits reimbursement claims on their behalf as part of our fee-for-service practice. A dedicated Bureau staff member and EI Provider Connections staff meet quarterly to address system issues and support the smoothest transition to the new system for EI providers. The HFS system is finalizing its Phase 2 work in EI and the workgroup continues to prepare required cross-walk instructions and guidance.  
  
EI Provider Connections processes credential and enrollment applications to comply with the HFS system and maintains a system of credentialing which ensures new providers are qualified and prepared with appropriate pediatric experience and education to provide services to infants and toddlers with developmental delays or disabilities and their families. This office ensures that individuals providing EI services have documentation on file of all applicable licenses, degrees, education and/or certification, EI systems overview training, background checks, documentation of consultation, and all other requirements. In addition, they provide technical assistance on the credentialing and enrollment process and verify that the individuals maintain competencies through documentation of continuing professional education and ongoing professional development at credential renewal every three years.  
  
Illinois also contracts with the University of Illinois Early Intervention Training Program (EITP) (http://eitp.education.illinois.edu/) to provide a comprehensive system of personnel development, using a variety of methodologies that include face-to-face, virtual, and online training modules, and to coordinate with other entities to offer a broad calendar of EI training events. These efforts ensure that service providers and CFC staff enter the EI system with an understanding of the basic components of the EI services system, evidence-based practices and Illinois’ EI key principles. Additional and ongoing efforts are in place to focus on continually expanding competencies and to provide information on evidence-based practices, specifically in four core knowledge areas: development of young children, working with families of young children with developmental disabilities and delays, intervention strategies and activities for young children with special needs, and assessment of young children with special needs. The EITP also works to coordinate with other professional entities to provide training on transition services for children exiting the EI system. The EITP develops, publishes and distributes a quarterly newsletter for EI service providers and uses social media to reinforce important system messages/information.  
  
The EITP coordinates the family outcomes process which includes a project coordinator that compiles and mails surveys to all families who have exited the EI program and upon request, assists families in completing the survey (including those who are Spanish speaking). The coordinator also facilitates the Child and Family Outcomes Workgroup and represents the EI program on all child and family outcomes activities. The EITP is a major stakeholder in the work of SSIP.  
  
The EI Clearinghouse (http://www.eiclearinghouse.org/) collects research-based and best-practice early intervention information to share with families to support their children’s growth and development. They provide current, up-to-date information and reference materials for parents to learn more about typical child development and specific disabilities, and for educators and EI professionals to improve competencies in the evaluation and treatment of children with developmental disabilities and delays. Additional resources in English and in Spanish are available to EI families, providers, stakeholders and primary referral sources. They are tasked with maintaining Illinois’ EI Central Directory, operating and maintaining a free EI lending library, generating parent newsletters, information notes, podcasts, and resource links to support evidence-based practices, and general contact and program information. The EI Clearinghouse serves as a communication link between the EI Program and the families served by the program through a family friendly, bilingual (English-Spanish) website. This past year, the EI Clearinghouse received grants to purchase technology items to lend to families. This allowed some families to access services in a way that would not have been possible without this technology. The EI Clearinghouse is also a stakeholder in the work of the SSIP.

**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).**

Illinois Interagency Council on Early Intervention (IICEI):  
Pursuant to 34 CFR §303.600 - 303.605, the IICEI is a Governor-appointed advisory board that meets the federal requirements for a State Interagency Coordinating Council. The membership of the council includes parents, public and private service providers of the Early Intervention (EI) system, a member from the State legislature, a personnel preparation representative, and representatives from various designated State agencies and programs. Its membership also includes representatives from advocacy organizations, Child and Family Connections (CFC) managers, and a designee from the Illinois Early Learning Council. The IICEI discusses program and Bureau specific challenges and opportunities, reviews and approves the annual performance report (APR), helps determine the setting of State Performance Plan (SPP)/APR target values, and advises the Bureau in the overall performance of the program. The IICEI also, as needed, creates ad-hoc workgroups composed of both council and other subject-matter experts on a variety of subjects to help develop any potential recommendations for consideration by the Bureau. The IICEI advocated for a pilot related to automatic eligibility in Illinois' system based on lead poisoning. Another workgroup explored the possible continued use of tele-intervention in Illinois as a method of service delivery based on the unique needs of the infants and toddlers and their families. The IICEI also approved the formation of a finance workgroup charged with reviewing the fiscal health of the program as well as potential outreach to secure additional funding to support the work of Illinois EI. The IICEI is also working to improve system communication and coordination with other statewide initiatives that impact birth to three year olds.   
  
Child and Family Outcomes Workgroup:  
The Child and Family Outcomes workgroup is a stakeholder group formed years ago and tasked with the goal of reviewing processes that improve outcomes for children and families, as well as the quality of child and family outcomes data. The workgroup includes representation from the EI Bureau, EI providers, CFC managers, EI Ombudsman and the EI Training Program (EITP). The Child and Family Outcomes Workgroup focuses its efforts to:  
• Ensure that valid and reliable data are collected with consistency by field staff;  
• Improve the validity of data reported on child and family outcomes;  
• Improve response rates for Family Outcomes surveys, to increase representativeness and validity;  
• Promote public awareness and training of child and family outcome measures;  
• Explore options for linking child and family outcome data;  
• Support data review and analysis;  
• Set baseline and target values; and  
• Develop and implement improvement activities.  
  
CFC Managers:  
Illinois has 25 CFC offices that serve as the regional points of entry, and each CFC office is responsible for the implementation of the Early Intervention Services System within its specific geographic region. A CFC Program Manager is assigned to each CFC and they are the point of contact to disseminate information to be shared within the CFC staff and their community as appropriate. CFCs are responsible for ensuring all referrals to the Early Intervention Services System receive a timely response in a professional and family-centered manner. Other responsibilities of the CFCs include: child find activities; family-engaged intake; coordination of evaluation/assessment and eligibility determination activities for children; for eligible children- oversight of the development of timely individualized family service plans (IFSP); ongoing service coordination, and transitioning activities before a toddler exits the program or reaches three years of age and is potentially eligible for Part B. CFC managers meet monthly with EI Bureau staff to review policies and procedures, provide statewide and local perspectives, offer feedback to the APR and SSIP, identify system challenges, and provide input on improvement strategies.  
  
Additionally, annual CFC Conferences are held to invite all CFC staff to network, learn from subject-matter experts and to meet directly with EI Partner contract entity staff. The CFC conferences are designed to respond to the specific needs conveyed by the Service Coordinators, CFC Managers, Social Emotional Consultants and others working in or with a CFC. Planning is organized through the EITP, but multiple stakeholders are involved in the annual event.

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

NO

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2018 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2018 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2018 APR in 2020, is available.**

The Illinois Annual Performance Report and the State Systemic Improvement Plan reports are used to annually report to the public on the EI performance targets. The Illinois Interagency Council for Early Intervention is the principle stakeholder group that reviews and provides final approval to the APR. The APR is posted on the Department’s website no later than 120 days following the State’s submission. A hard copy of the APR is also available for public review at each of the 25 CFC offices. Most APR indicators include a table that compares the performance of each CFC office with statewide performance and target values.   
  
The SSIP reports (Phases I, II and III (in progress)) are also posted on the Department’s and contractual partners’ websites. Progress on the SSIP is communicated through a SSIP Quarterly Summary which is widely distributed to stakeholders. The SSIP work is also described in the contract partners' quarterly newsletters and discussed at each monthly CFC Manager’s meeting.  
  
Document Posting:  
The Illinois APR, SSIP, 618 data, Annual Federal Grant Applications, and Monthly Statistical reports are available online at: http://www.dhs.state.il.us/page.aspx?item=36192. The EI Training Program website has links to the EI Reports and informational notices located at https://uofi.illinois.edu/blog/view/6039/114615?count=1&ACTION=DIALOG&sort=asc.

## 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 5; (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.  
  
The State's IDEA Part C determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.  
The State must report, with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

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

## Intro - OSEP Response

While the State has publicly reported on the FFY 2018 (July 1, 2018-June 30, 2019) performance of each EIS program or provider located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of the IDEA, those reports do not contain the required information. Specifically, the State did not report on the performance of each EIS program or provider for Indicator 8B.  
  
The State's determinations for both 2019 and 2020 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 23, 2020 determination letter informed the State that it must report with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.  
  
The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. §303.604(c). The SICC noted it has elected to support 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

While the State has publicly reported on the FFY 2018 (July 1, 2018-June 30, 2019) performance of each EIS program or provider located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of IDEA, those reports did not, as specified in the OSEP Response, contain all of the required information. With its FFY 2020 SPP/APR, the State must provide a Web link demonstrating that the State has fully reported to the public on the performance of each early intervention service program or provider located in the State on the targets in the SPP/APR for FFY 2018. In addition, the State must report with its FFY 2020 SPP/APR, how and where the State reported to the public on the FFY 2019 performance of each early intervention service program or provider located in the State on the targets in the SPP/APR.  
  
The State's IDEA Part C determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.  
  
OSEP notes that the State submitted verification that the attachment complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the 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 | 98.53% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.92% | 96.87% | 98.23% | 97.89% | 99.52% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,855 | 2,010 | 99.52% | 100% | 94.23% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Illinois continued to see an increase in our caseload through October 2019. Illinois, like many other states, has experienced provider shortages and this has lead to service delays. In addition, intermittent payment delays and a declining overall state population have also lead to additional shortages within Illinois' provider pool. We continue to work to address timely payments and avail ourselves of national technical assistance opportunities around personnel recruitment and retention.

**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.***

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**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).**

Illinois Early Intervention considers a service to be timely if the consented service begins no later than 30 days from the IFSP creation. Illinois has 25 regional points of entry called Child & Family Connections (CFC) offices which house the Service Coordination component. Each of the 25 CFCs report monthly on IFSP consented services that have not yet started due to various factors including insufficient number of qualified early intervention direct service providers as well as family exceptional circumstances and delays. The data is collected and utilized to create monthly statistical reports on the status of each of the 25 CFCs service delays as well as other components of performance for each CFC. A Statewide statistical report is also prepared and shared so each CFC can compare their performance with the Statewide average for service delays and other components.  
  
Through the work of our data manager, we have been able to eliminate duplicative data for the same child. Historical reporting had been based on individual services rather than individual children.

**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).**

Illinois continues to utilize the reporting period of October 1 - October 31 for the reporting Federal Fiscal Year (FFY). In the case of this APR, the reporting period is October 2019.

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

Illinois has historically utilized the single month of October to represent our collection period. When comparing the full fiscal year (FY) data, the October data still continues to reflect the average with consistency as well as overall data reporting on multiple indicators. Additionally, utilization of the 618 data to prepopulate multiple indicators improves consistent reporting as Illinois uses the October data from the reporting FY period for the 618 Child Count and Setting reporting.

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

The State did not demonstrate 100% compliance in FFY18. No findings of noncompliance were issued, though, because all programs identified as noncompliant in FFY18 already had open findings for this Indicator. In addition, the state did review the reasons for service delays. Reasons included, in order of magnitude, inability to find a provider, family exceptional circumstances, and service being provided in setting other than the recommended natural environment.

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

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

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

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2015 | 12 | 1 | 11 |
|  |  |  |  |
|  |  |  |  |

**FFY 2015**

**Findings of Noncompliance Verified as Corrected**

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

Through a subsequent review of the non-compliant program's monthly service delay data, Bureau staff were able to determine that one more of the program's with noncompliance were now able to demonstrate full compliance with regulatory requirements. The review of subsequent data included a full month of all active IFSPs. Based upon this review, the state was able to verify that all children in the program during this timeframe received their services in a timely manner-100%

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the  
individual children identified in FFY2015 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFCs received information on program requirements, accurate reporting, and strategies for addressing barriers to timely services. State staff also reviewed program policies and procedures and contract language to ensure that these support the program’s compliance with regulatory requirements and have altered Performance Contracting to incentivize better performance.

**FFY 2015**

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

**Actions taken if noncompliance not corrected**

The eleven programs that continue to demonstrate noncompliance will engage in an improvement plan process to improve performance. These programs will be engaged in efforts to identify barriers and receive additional technical assistance from Bureau staff, Early Intervention Training Program staff, and other partners/stakeholders (as necessary) to identify and implement potential strategies for meeting the regulatory requirements and program expectations for Indicator 1 (timely IFSP services). The pandemic impacted the Bureau's ability to identify additional resources and technical assistance opportunities to support timely service delivery. Programs did continue to receive performance data and feedback frequently, but the additional support that was planned had to be delayed.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 1 - 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 11 uncorrected findings of noncompliance identified in FFY 2015 were 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 each EIS program or provider with remaining noncompliance identified in FFY 2015: (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 | 88.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= | 90.00% | 90.00% | 90.00% | 90.00% | 90.00% |
| Data | 88.13% | 98.71% | 98.72% | 98.92% | 98.87% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 90.00% |

**Targets: Description of Stakeholder Input**

Stakeholder input was provided and approval received from the Illinois Interagency Council on Early Intervention, the state's Interagency Coordinating Council.

**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 | 17,485 |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Total number of infants and toddlers with IFSPs | 17,621 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 17,485 | 17,621 | 98.87% | 90.00% | 99.23% | Met Target | No Slippage |

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

Illinois' early intervention system continues to work with other sectors to improve inclusive opportunities for infants and toddlers in Illinois.

## 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**

Illinois received stakeholder input via the Child & Family Outcomes workgroup and the Illinois Interagency Council on Early Intervention (IICEI). The Child & Family Outcomes workgroup helped set the targets that were approved by the IICEI. The workgroup routinely reviews the data and makes recommendations about improvement to the state’s processes. In addition the SSIP leadership teams provide suggestions for needed resources and revisions to state processes.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A1** | 2009 | Target>= | 67.30% | 67.70% | 68.10% | 68.50% | 68.90% |
| **A1** | 65.60% | Data | 67.09% | 69.84% | 65.97% | 66.70% | 67.71% |
| **A2** | 2009 | Target>= | 63.70% | 63.90% | 64.10% | 64.30% | 64.50% |
| **A2** | 63.30% | Data | 60.92% | 61.82% | 54.48% | 57.29% | 54.39% |
| **B1** | 2009 | Target>= | 78.80% | 79.20% | 79.60% | 80.00% | 80.40% |
| **B1** | 77.00% | Data | 77.45% | 79.31% | 74.95% | 75.78% | 76.27% |
| **B2** | 2009 | Target>= | 50.20% | 50.40% | 50.60% | 50.80% | 51.00% |
| **B2** | 49.60% | Data | 48.05% | 50.80% | 42.81% | 47.06% | 44.90% |
| **C1** | 2009 | Target>= | 76.50% | 76.90% | 77.30% | 77.70% | 78.10% |
| **C1** | 75.50% | Data | 75.15% | 77.14% | 72.68% | 73.88% | 73.67% |
| **C2** | 2009 | Target>= | 56.60% | 56.80% | 57.00% | 57.20% | 57.40% |
| **C2** | 56.00% | Data | 53.98% | 56.33% | 49.87% | 53.44% | 50.26% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1>= | 68.00% |
| Target A2>= | 63.50% |
| Target B1>= | 77.10% |
| Target B2>= | 49.70% |
| Target C1>= | 75.60% |
| Target C2>= | 56.10% |

**FFY 2019 SPP/APR Data**

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

13,300

**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 | 10 | 0.08% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 3,315 | 24.92% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 2,991 | 22.49% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 4,073 | 30.62% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 2,911 | 21.89% |

| **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 | 7,064 | 10,389 | 67.71% | 68.00% | 67.99% | Did Not Meet Target | No Slippage |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 6,984 | 13,300 | 54.39% | 63.50% | 52.51% | Did Not Meet Target | Slippage |

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

Despite the downward trend, we continue to view the decline in A2 to increased data quality. Our data quality improvement efforts have led to greater age anchoring for the outcomes which in turn has led to the realization that many children were previously rated too high on the continuum described in the Child Outcomes Summary. It has also increased our concerns about the quality of the data that we have used as our baseline. We will be working with stakeholders to have discussions about more accurate baseline data and targets for our next submission.

**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 | 16 | 0.12% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 2,954 | 22.21% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 4,547 | 34.19% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 4,972 | 37.38% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 811 | 6.10% |

| **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 | 9,519 | 12,489 | 76.27% | 77.10% | 76.22% | Did Not Meet Target | No Slippage |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 5,783 | 13,300 | 44.90% | 49.70% | 43.48% | Did Not Meet Target | Slippage |

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

Despite the downward trend, we continue to view the decline in B2 to increased data quality. Our data quality improvement efforts have led to greater age anchoring for the outcomes which in turn has led to the realization that many children were previously rated too high on the continuum described in the Child Outcomes Summary. It has also increased our concerns about the quality of the data that we have used as our baseline. We will be working with stakeholders to have discussions about more accurate baseline data and targets for our next submission.

**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 | 16 | 0.12% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 3,102 | 23.32% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 3,731 | 28.05% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 4,910 | 36.92% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 1,541 | 11.59% |

| **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 | 8,641 | 11,759 | 73.67% | 75.60% | 73.48% | 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 | 6,451 | 13,300 | 50.26% | 56.10% | 48.50% | Did Not Meet Target | Slippage |

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

Despite the downward trend, we continue to attribute the decline in all our summary statement 2 results to increased data quality. Our data quality improvement efforts have led to greater age anchoring for the outcomes which in turn has led to the realization that many children were previously rated too high on the continuum described in the Child Outcomes Summary. This trend has also increased our concerns about the quality of the data that we have used as our baseline. We will be working with stakeholders to have discussions about more accurate baseline data and targets for our next submission.

**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 | 21,760 |
| 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. | 8,246 |

| **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.**

As stated above, Illinois uses the ECO Center’s COS process. This involves using information collected from a variety of sources including parent report, observation, evaluation/assessment, and, for exits, intervention information. For evaluation/assessment, providers in Illinois are allowed to use any of the tools found on this list: http://www.dhs.state.il.us/OneNetLibrary/27896/documents/By\_Division/DCHP/EI/EIAssessInstruments08-2016/ILEIAppEvalAssessInstruR08-16.pdf.

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

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

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

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

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

Provide the actual numbers used in the calculation.

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

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

Report the number of families to whom the surveys were distributed.

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 | 2010 | Target>= | 69.40% | 69.70% | 70.00% | 70.30% | 70.60% |
| A | 67.82% | Data | 71.50% | 74.14% | 73.14% | 71.88% | 72.57% |
| B | 2010 | Target>= | 77.90% | 77.90% | 78.20% | 78.50% | 78.80% |
| B | 76.51% | Data | 76.51% | 79.03% | 78.37% | 77.06% | 78.43% |
| C | 2010 | Target>= | 74.50% | 74.50% | 74.80% | 75.10% | 75.40% |
| C | 74.31% | Data | 74.11% | 77.30% | 77.09% | 76.06% | 77.47% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A>= | 70.60% |
| Target B>= | 78.80% |
| Target C>= | 75.40% |

**Targets: Description of Stakeholder Input**

Illinois received stakeholder input via the Child & Family Outcomes workgroup and the Illinois Interagency Council on Early Intervention (IICEI). The  
Child & Family Outcomes workgroup helped set the targets that were approved by the IICEI. The workgroup routinely reviews the data and makes  
recommendations about improvement to the state’s processes. For example, the workgroup recommended exploring options for electronic distribution of the survey. Starting in FFY20, we will deliver the survey to families via text message.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 21,218 |
| Number of respondent families participating in Part C | 1,626 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 1,211 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 1,612 |
| 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 | 1,296 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 1,610 |
| 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 | 1,265 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 1,611 |

| **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) | 72.57% | 70.60% | 75.12% | 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) | 78.43% | 78.80% | 80.50% | 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) | 77.47% | 75.40% | 78.52% | 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. | NO |

**If not, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.**

Due to the ongoing issues with under-representation among key demographic areas, the state will implement two significant strategies. The first is joining a TA cohort focused on equity in outcomes through the Early Childhood Technical Assistance Center and DaSy. The second is a change to the survey delivery system. Instead of continuing with mailed surveys and a variety of ways to respond, we will now be delivering surveys electronically via text message. This will provide greater ease of response, more timely distribution, and more opportunities for follow up. With the changes to our process, we will also be adding an incentive for families to receive materials from our Clearinghouse when they complete the survey. We are hopeful that these strategies will improve both our response rates and our representativeness.

**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.**

Based on stakeholder input, we examined representativeness on the following dimensions: race, gender, language, level of delay, time in program, and region. While the data is moving in the right direction, we tend to find that families living in the city of Chicago are under-represented and families living in collar counties and rural areas are over-represented. Due to this finding, we also find that white families are over-represented in our responses and black and hispanic families are under-represented. We also find that families whose primary language is English are over-represented compared to families whose primary language is Spanish and those who are listed as bilingual. Responses are relatively representative for gender, level of delay, and time in program with slight under-representation for families in the system less than six months and slight over-representation for those in more than two years. See attachment for Indicator 4 for more detail.

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

## 4 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 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.

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

Based on stakeholder input, we examined representativeness on the following dimensions: race, gender, language, level of delay, time in program, and region. While the data is moving in the right direction, we tend to find that families living in the city of Chicago are under-represented and families living in collar counties and rural areas are over-represented. Due to this finding, we also find that white families are over-represented in our responses and black and hispanic families are under-represented. We also find that families whose primary language is English are over-represented compared to families whose primary language is Spanish and those who are listed as bilingual. Responses are relatively representative for gender, level of delay, and time in program with slight under-representation for families in the system less than six months and slight over-representation for those in more than two years.  
Due to the ongoing issues with under-representation among key demographic areas, the state will implement two significant strategies. The first is joining a TA cohort focused on equity in outcomes through the Early Childhood Technical Assistance Center and DaSy. The second is a change to the survey delivery system. Instead of continuing with mailed surveys and a variety of ways to respond, we will now be delivering surveys electronically via text message. This will provide greater ease of response, more timely distribution, and more opportunities for follow up. With the changes to our process, we will also be adding an incentive for families to receive materials from our Clearinghouse when they complete the survey. We are hopeful that these strategies will improve both our response rates and our representativeness.

## 4 - OSEP Response

## 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.

## 4 - State Attachments



# 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 | 1.07% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 1.26% | 1.27% | 1.28% | 1.29% | 1.30% |
| Data | 1.54% | 1.24% | 1.32% | 1.35% | 1.42% |

**Targets**

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

Targets: Description of Stakeholder Input

Stakeholder input was provided and approval received from the Illinois Interagency Council on Early Intervention, the state's Interagency Coordinating Council.

**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 | 2,073 |
| 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 | 143,723 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,073 | 143,723 | 1.42% | 1.31% | 1.44% | Met Target | No Slippage |

**Compare your results to the national data**

National average is 1.37% and Illinois is above this at 1.44%. Despite the decreasing population within the state, we continue to engage in child find efforts and our percentage of 1.44% exceeds the national average.

**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 | 3.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 3.65% | 3.73% | 3.81% | 3.89% | 3.97% |
| Data | 4.45% | 3.28% | 3.37% | 3.48% | 3.77% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 3.97% |

Targets: Description of Stakeholder Input

Stakeholder input was provided and approval received from the Illinois Interagency Council on Early Intervention, the state's Interagency Coordinating Council.

**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 | 17,621 |
| 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 | 439,163 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 17,621 | 439,163 | 3.77% | 3.97% | 4.01% | Met Target | No Slippage |

**Compare your results to the national data**

The national average for this indicator is 3.70%. Illinois is above this average. Despite the decreasing population within the state, we continue to engage in child find efforts and our percentage of 4.01% exceeds the national average.

**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 | 98.67% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.82% | 99.83% | 99.98% | 99.99% | 100.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,005 | 2,010 | 100.00% | 100% | 99.80% | 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.**

1

**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).**

October 2019

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

The number of children with new initial IFSPs across the fiscal year is relatively close to this single collection month. This single collection month also is consistent with other compliance indicator collection activity.

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

The state did investigate the reasons for delayed IFSPs. In addition to the family exceptional circumstance listed above, the reasons included other family delay, CFC delay, and provider delay.  
Also, the state did identify an error with the FFY18 data for this indicator. As OSEP pointed out, it would be unusual to issue findings if the state had 100% compliance. When reviewing the corresponding FFY18 program chart, it is clear that the statewide performance was, in fact, 99.95%. The three findings were issued to the programs contributing to the statewide noncompliance (CFCs 16, 18, and 24). All three programs have subsequently demonstrated compliance with regulatory requirements.

**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***

Through a subsequent review of the non-compliant programs' monthly service delay data, Bureau staff were able to determine that the three programs with identified noncompliance were now able to demonstrate full compliance with regulatory requirements. The review of subsequent data included a subset of all active IFSPs. Based upon this review, the state was able to verify that all children in the subsequent pulls received their IFSPs in a timely manner- 100%

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

Through the subsequent data reviews of a subset of children referred, Bureau staff were able to verify that, though delayed, the 11 children who lead to the program's noncompliance did ultimately receive an IFSP.

**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

The State must report in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance for which it conducted pre-finding correction for this indicator 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.

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

Prior to formally issuing findings, the Bureau reviewed a subsequent set of monthly data. Through this review of monthly data for the impacted CFCs, it was determined that the three children from FFY17 who did not receive their IFSPs in a timely fashion and whose delays were not attributable to family exceptional circumstances did receive their IFSPs, albeit late. The subsequent review of data also showed that the two programs initially deemed noncompliant were now able to demonstrate 100% compliance with regulatory requirements in the months following the initial review.

## 7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 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 | 71.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 92.54% | 97.97% | 95.01% | 94.54% | 96.01% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,035 | 1,078 | 96.01% | 100% | 96.01% | 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 monitoring

**Describe the method used to select EIS programs for monitoring.**

Illinois EI Monitoring monitors all 25 CFC offices. The number of files pulled is based on the number of children exiting within a specific month who are determined potentially eligible for Part B. EI Monitoring also assists the CFCs with technical assistance to ensure their understanding of policies and procedures. Many CFCs continue to be compliant but since not all children sampled displayed transition steps and services in their IFSP, Illinois did not meet the required goal of 100%.

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

Illinois continues to utilize a sample of exiting toddlers by reviewing one month of children exiting who were potentially eligible for Part B. The IFSPs for those children were reviewed to confirm whether the transition steps and services were noted and in a timely fashion for compliance with federal regulations.  
Although delay reason data is not formally collected in our data system, monitors and CFC personnel provided reasons for delay. Reasons included misunderstandings of program requirements, specifically the required timing for steps and services being added to the IFSP, and family delays for the meeting where steps and services were to be developed. In addition, some children did have steps and services on their plans, they were just entered outside of the required time period.

**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***

Through a subsequent review of the non-compliant programs' transition steps and services data, Bureau staff were able to determine that both programs were able to demonstrate 100% compliance with regulatory requirements. The review of a subsequent subset of data showed that all potentially eligible children in this subset had transition steps and services documented in a timely fashion.

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the individual children identified in FFY2018 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFCs received information on program requirements, accurate reporting, and strategies for ensuring timely transition steps and services. State staff also reviewed program policies and procedures and contract language to ensure that these support programs' compliance with regulatory requirements and have altered Performance Contracting to both monitor and incentivize better performance.

**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 | 2 | 2 | 0 |
| FFY 2015 | 2 | 2 | 0 |
| FFY 2012 | 2 | 2 | 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***

Through a subsequent review of the non-compliant programs' transition steps and services data, Bureau staff were able to determine that both programs were able to demonstrate 100% compliance with regulatory requirements. The review of a subsequent subset of data showed that all potentially eligible children in this subset had transition steps and services documented in a timely fashion.

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the individual children identified in FFY2017 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFCs received information on program requirements, accurate reporting, and strategies for ensuring timely transition steps and services. State staff also reviewed program policies and procedures and contract language to ensure that these support programs' compliance with regulatory requirements and have altered Performance Contracting to both monitor and incentivize better performance.

**FFY 2015**

**Findings of Noncompliance Verified as Corrected**

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

Through a subsequent review of the non-compliant programs' transition steps and services data, Bureau staff were able to determine that both programs were able to demonstrate 100% compliance with regulatory requirements. The review of a subsequent subset of data showed that all potentially eligible children in this subset had transition steps and services documented in a timely fashion.

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the individual children identified in FFY2015 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFCs received information on program requirements, accurate reporting, and strategies for ensuring timely transition steps and services. State staff also reviewed program policies and procedures and contract language to ensure that these support programs' compliance with regulatory requirements and have altered Performance Contracting to both monitor and incentivize better performance.

**FFY 2012**

**Findings of Noncompliance Verified as Corrected**

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

Through a subsequent review of the non-compliant programs' transition steps and services data, Bureau staff were able to determine that both programs were able to demonstrate 100% compliance with regulatory requirements. The review of a subsequent subset of data showed that all potentially eligible children in this subset had transition steps and services documented in a timely fashion.

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the individual children identified in FFY2012 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFCs received information on program requirements, accurate reporting, and strategies for ensuring timely transition steps and services. State staff also reviewed program policies and procedures and contract language to ensure that these support programs' compliance with regulatory requirements and have altered Performance Contracting to both monitor and incentivize better performance.

## 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 | 78.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

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

**FFY 2019 SPP/APR Data**

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

YES

| **Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,209 | 1,209 | 100.00% | 100% | 100.00% | Met Target | No Slippage |

**Number of parents who opted out**

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

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

Illinois utilizes a data sharing agreement with the Illinois State Board of Education (ISBE), the State Education Agency (SEA), to assure that every child who reached 25 months of age or who started EI services after the age of 25 months were made known to the local education agency (LEA). This has been changed in response to stakeholder feedback from 27 months to ensure that transitions are achieved in a timely fashion. The Bureau of EI has confirmed that notifications were sent to the SEA and LEA at least 90 days prior to the toddler’s third birthday for all toddlers who reached 25 months of age. The calculation excludes children who were referred to the program less than 90 days prior to their third birthday. In FFY19/SFY20, Illinois demonstrated 100 percent compliance. ISBE implemented a new automated system to share the data with the LEAs in Illinois. Current improvement plans include a method to better update when a family relocates after the initial data is sent to help connect the more current LEA with the family to avoid any extra work of CFC to manually send the updated information. Illinois also continues to help update the data efficiently by working on reports indicating addresses not meeting United States Postal Service requirements. This practice has greatly reduced any misidentification of the LEA.

**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).**

October 2019

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

The month of October does reflect the average number of children potentially eligible who exit the program through the year. This also aligns the data collection and reporting across all Compliance Indicators as well.

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

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

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

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

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

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 8B - Required Actions

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8C - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 77.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 81.81% | 83.70% | 83.76% | 82.51% | 82.26% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 931 | 1,209 | 82.26% | 100% | 88.32% | Did Not Meet Target | No Slippage |

**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.**

62

**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.**

82

**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).**

October 2019

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

The month of October does reflect the average number of children potentially eligible who exit the program through the year. This also aligns the data collection and reporting across all Compliance Indicators as well.

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

The state did review reasons for the delays on Indicator 8C. Reasons included Family Exceptional Circumstance/family delay, CFC delay, and LEA delay.

**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 | 1 | 0 | 2 |

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

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

Through a subsequent review of the non-compliant programs' transition planning conferences data, Bureau staff were able to determine that one of the programs was able to demonstrate 100% compliance with regulatory requirements. The subsequent review of a subset of all potentially eligible children's data verified that the subset of children in this program now had transition planning conferences held in a timely fashion.

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the individual children identified in FFY2018 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFCs received information on program requirements, accurate reporting, and strategies for ensuring timely transition planning conferences. State staff also reviewed program policies and procedures and contract language to ensure that these support the programs' compliance with regulatory requirements and have altered Performance Contracting to both monitor and incentivize better performance.

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The two programs that continue to demonstrate noncompliance will have an improvement plan developed to improve performance. The programs will work through a process of identifying barriers and will receive additional technical assistance from Bureau staff, Early Intervention Training Program staff, and other partners/program managers (as needed) on potential strategies for meeting the regulatory requirements and program expectations for Indicator 8c (timely transition planning conferences). Bureau staff continue to work closely with these programs to identify additional resources and technical assistance opportunities to support timely transition planning conferences. The programs still receive performance data and feedback on a frequent basis. The additional support planned for this year that would have included examining root causes and attempts to resolve barriers to timely transition planning conferences was delayed due to the pandemic.

**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 | 5 | 2 | 3 |
| FFY 2015 | 1 | 0 | 1 |
| FFY 2012 | 4 | 1 | 3 |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Through a subsequent review of the non-compliant programs' transition planning conferences data, Bureau staff were able to determine that two programs were able to demonstrate 100% compliance with regulatory requirements. The subsequent review of a full month of all potentially eligible children's data verified that all children in these programs now had transition planning conferences held in a timely fashion.

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the individual children identified in FFY2017 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFCs received information on program requirements, accurate reporting, and strategies for ensuring timely transition planning conferences. State staff also reviewed program policies and procedures and contract language to ensure that these support the programs' compliance with regulatory requirements and have altered Performance Contracting to both monitor and incentivize better performance.

**FFY 2017**

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

**Actions taken if noncompliance not corrected**

The three programs that continue to demonstrate noncompliance will have improvement plans developed to improve performance. These programs will work through a process of identifying barriers and will receive additional technical assistance from Bureau staff, Early Intervention Training Program staff, and other partners/program managers (as needed) on potential strategies for meeting the regulatory requirements and program expectations for Indicator 8c (timely transition planning conferences). Bureau staff continue to work closely with these programs to identify additional resources and technical assistance opportunities to support timely transition planning conferences. Programs still receive performance data and feedback on a frequent basis. The additional support planned for this year that would have included examining root causes and attempts to resolve barriers to timely transition planning conferences was delayed due to the pandemic.

**FFY 2015**

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

**Actions taken if noncompliance not corrected**

The single program that continues to demonstrate noncompliance will have an improvement plan developed to improve performance. This program will work through a process of identifying barriers and will receive additional technical assistance from Bureau staff, Early Intervention Training Program staff, and other partners/program managers (as needed) on potential strategies for meeting the regulatory requirements and program expectations for Indicator 8c (timely transition planning conferences). Bureau staff continue to work closely with these programs to identify additional resources and technical assistance opportunities to support timely transition planning conferences. This program still receives performance data and feedback on a frequent basis. The additional support planned for this year that would have included examining root causes and attempts to resolve barriers to timely transition planning conferences was delayed due to the pandemic.

**FFY 2012**

**Findings of Noncompliance Verified as Corrected**

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

Through a subsequent review of the non-compliant program's transition planning conferences data, Bureau staff were able to determine that one program was able to demonstrate 100% compliance with regulatory requirements. The subsequent review of a subset of all potentially eligible children's data verified that the subset of children in this program now had transition planning conferences held in a timely fashion.

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

For this indicator in accordance with OSEP Memo 09-02, the state examined the individual cases of noncompliance. The state verified that all the individual children identified in FFY2012 were no longer under the jurisdiction of the program as they had exited. Although Illinois was unable to correct the past instances of identified noncompliance (because children were no longer in the jurisdiction of the program), the CFC received information on program requirements, accurate reporting, and strategies for ensuring timely transition planning conferences. State staff also reviewed program policies and procedures and contract language to ensure that these support the programs' compliance with regulatory requirements and have altered Performance Contracting to both monitor and incentivize better performance.

**FFY 2012**

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

**Actions taken if noncompliance not corrected**

The three programs that continue to demonstrate noncompliance will have improvement plans developed to improve performance. These programs will work through a process of identifying barriers and will receive additional technical assistance from Bureau staff, Early Intervention Training Program staff, and other partners/program managers (as needed) on potential strategies for meeting the regulatory requirements and program expectations for Indicator 8c (timely transition planning conferences). Bureau staff continue to work closely with these programs to identify additional resources and technical assistance opportunities to support timely transition planning conferences. These programs still receive performance data and feedback on a frequent basis. The additional support planned for this year that would have included examining root causes and attempts to resolve barriers to timely transition planning conferences was delayed due to the pandemic.

## 8C - Prior FFY Required Actions

None

## 8C - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 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 two uncorrected findings of noncompliance identified in FFY 2018, three uncorrected findings of noncompliance identified in FFY 2017, one uncorrected finding of noncompliance identified in FFY 2015, and three uncorrected findings of noncompliance identified in FFY 2012 were 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 each EIS program or provider with remaining noncompliance identified in FFY 2018, FFY 2017, FFY 2015, and FFY 2012: (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.**

NO

**Select yes to use target ranges.**

Target Range not used

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

NO

**Prepopulated Data**

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

**Targets: Description of Stakeholder Input**

Stakeholder input was provided and approval received from the Illinois Interagency Council on Early Intervention, the state's Interagency Coordinating Council.

**Historical Data**

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

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

**Targets**

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

**FFY 2019 SPP/APR Data**

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

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

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

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

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

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

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

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

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

NO

**Prepopulated Data**

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

Targets: Description of Stakeholder Input

Stakeholder input was provided and approval received from the Illinois Interagency Council on Early Intervention, the state's Interagency Coordinating Council.

**Historical Data**

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

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

**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)**

## 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

# Indicator 11: State Systemic Improvement Plan



# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role**

Designated Lead Agency Director

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

**Name:**

Ann Freiburg

**Title:**

Part C Coordinator

**Email:**

Ann.Freiburg@Illinois.gov

**Phone:**

217/557-5387

**Submitted on:**

04/27/21 5:40:03 PM

# ED Attachments

   