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

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

**For reporting on
FFY 2020**

**Montana**



**PART C DUE
February 1, 2022**

**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**

The Montana Department of Public Health and Human Services (DPHHS) is the State lead agency responsible for administering and overseeing the statewide system of early intervention services, Montana Milestones Part C Early Intervention Program. The Part C Program moved from the Developmental Disabilities Programs of the DPHHS to the Early Childhood and Family Support Division of the DPHHS in March 2021. Montana Milestones’ mission is to build upon and provide supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities.
The State contracts with five agencies to provide the Part C Program in geographic catchment areas for infants and toddlers who are experiencing developmental delays or at risk for developmental delays due to an established condition diagnosed by a physician or psychologist. Each agency’s contract requires the provision of the following:
Referral System to ensure infants and toddlers suspected of having a developmental delay or disability can be easily referred to the early intervention program and all eligible children are enrolled.
Multidisciplinary evaluations to determine a child's initial and subsequent eligibility; multidisciplinary assessment initially and at least annually to determine the child's unique needs and the early intervention services appropriate to address those needs; and assessment of the family members to identify the resources, concerns, and priorities of the family related to the development of the child.
Individual Family Service Plan developed by a multidisciplinary team, including the family.
Individualized services provided under public supervision to meet the developmental needs of the child and the needs of the family related to enhancing the child's development.
Service Coordination provided to a child and family via, at a minimum, one monthly face to face meeting or, in the event of the pandemic, monthly teleintervention meeting.
Procedural safeguards accorded to children and families receiving services.
Transition from the Part C of the IDEA Program.

Additional information related to data collection and reporting

Montana Milestones transitioned to a new data management system, Med Compass, in February 2021. The reporting data included in this APR was collected from the previous data management system’s specific reports per Indicator for the period of July 1, 2020 through January 31, 2021 and from data extracts pertaining to each Indicator from the Med Compass system for the period of February 1, 2021 through June 30, 2021.

**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.**

General Supervision focuses upon individualized support to identify practices that lead to compliant and high-quality services; and identifying and enforcing corrective action plans in areas of non-compliance. In order to ensure the quality of services provided to children and families enrolled in the Program and to comply with federal and State requirements through monitoring and professional development activities, Montana Milestones developed its general supervision system to promote the Program's mission, key principles and core values. Montana Milestones State Systemic Improvement Plan supports this effort by focusing on areas of lower performance with a systemic improvement approach.
The Part C Coordinator provides administrative oversight and monitoring of regional Programs:
Monitor and evaluate regional compliance with the federal Part C of the IDEA regulations;
Monitor the contractor's compliance to ensure eligible children and families receive timely, comprehensive, community-based services that enhance the developmental progress of children from birth to age three;
Monitor and evaluate the contractor's contract activities;
Contribute to ongoing quality improvement of contractors to ensure a baseline of quality services for all families participating in Montana Milestones.

Five components of the monitoring system:
Contractor’s annual report: the Program utilizes information from each agency’s Annual Performance Plan (APR) data Indicators 1-11 to make determinations on performance. The Annual Report is a key piece of data gathering for federal Indicators and State reporting requirements. The results are used to make determinations. A corrective action plan is requested to address any issues of non-compliance identified through the annual report and submitted to the Part C Coordinator within 30 days of written notification.
Data verification process: information from the State's database, the Early Intervention Module, was used to verify and validate data submissions by each agency. Throughout the year, activities are completed by the Part C Coordinator to verify the reliability, accuracy and timeliness of data reported by the agencies to DPHHS. Several methods are utilized such as the reporting features of the State's database and ongoing Leadership Team meetings to review data.
Dispute resolution system: the State's Dispute Resolution Process is a criterion used in making contractors’ determinations. The Part C Coordinator oversees the Part C of the IDEA dispute resolution process. The Coordinator supports families and regional contractors to access the Part C procedural safeguard system; provide technical assistance to the regional contractors on the implementation of the procedural safeguards and completes Part C formal investigations within federal timelines. Written complaints are investigated to determine whether there are any findings of non-compliance with IDEA. The DPHHS Office of Legal Affairs provides consultation and the Part C Coordinator sends a written response to the family and the regional contractor within 60 days of the complaint. If an area of non-compliance is identified, a corrective action plan is required of the regional contractor and the contractor has one year from the notification of noncompliance to come into compliance. The regional contractor must submit the corrective action plan to the Part C Coordinator within identified timelines. The Part C Coordinator reviews and approves the plan and develops a follow-up monitoring plan as appropriate. Any areas of non-compliance must be corrected within one year from the written notification.
Determinations: in making determinations, the Part C Coordinator uses both the compliance and results Indicators. The Coordinator utilizes information from the State's database, and annual report, and the dispute resolution system as criteria in making regional determinations. Each contractor receives a determination of "meets requirements," "needs assistance," or "needs intervention" based on compliance with Part C of the IDEA.
Technical assistance and/or professional development: Determinations guide the level of need for technical assistance and/or professional development for the agency.

**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.**

Montana Milestones provides technical assistance to each agency providing the Part C Program through communications and collaborations to bridge the gap between research, policy, and practices. During FFY 2020, Montana Milestones accessed technical assistance from CIFR, DaSy, IDC, ECTA, and NCPMI:
ECTA: Correcting Long Standing Non-Compliance, DMS Monitoring, SSIP support;
DASY and IDC: Data Management System development and now redesign to obtain valid and reliable reporting data;
NCPMI: Pyramid Model work leading to improvements in the State's SiMR;
CIFR: Fiscal systems and DMS Monitoring.
Montana’s guidance documents, trainings, and implementation manuals and other resources are just a handful of types of TA made available for the Part C Program providers. Additionally, Montana has specific work groups focused upon the Child Outcomes Summary Process; Pyramid Model Leadership Team to implement Pyramid Model practices; CSPD to aid in the development and review learning courses leading to Primary and Comprehensive Certification; Data Systems to support the development and implementation of the new data management system; and the Part C Leadership Team focused upon building and sustaining a consistent and systemic model of early intervention in Montana.

**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 State’s Comprehensive System for Personnel Development includes personnel standards outlining specific knowledge skills and competencies for Family Support Specialists/Service Coordinators leading to Primary and Comprehensive Certification. As noted in the SSIP, the CSPD is expanding to include on-demand learning courses leading to certification and aligned with the Division of Early Childhood’s Recommended Practices.
Required Part C of the IDEA processes and high-quality performance measures are identified within each Program provider’s contract:
Performance Plan/Annual Performance Report to evaluate efforts to implement the requirements and purposes of Part C.
State-wide Systemic Improvement Plan is a comprehensive multi-year plan focusing upon improving results for infants and toddlers with disabilities and their families.
Public awareness and Child Find System to identify, locate, and evaluate infants and toddlers with disabilities who are eligible for early intervention services including Indian infants and toddlers residing on a reservation geographically located in the region(s) as well as infants and toddlers who are homeless, in foster care, and wards of the State.
Use of funds and resources are efficient and effective to implement a high-quality program meeting the needs of children and families enrolled in Part C of the IDEA.
Collection and analysis of performance data to make decisions.
Implementation of quality standards which are consistent with professional practice guidance and identified in the most current version of Montana's Stepping Stones for Early Intervention Success.
Build and sustain a high-quality intervention program following timelines and implementing supervisory oversight and accurate data entry.
Develop, write, and implement high-quality child and family outcomes following regulatory requirements.
Follow dispute resolution procedures for Part C of the IDEA.

**Broad Stakeholder Input:**

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

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

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

YES

**Number of Parent Members:**

6

**Parent Members Engagement:**

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

Montana continues to promote equitable parent engagement through the FSSAC’s membership and policies for Council’s structure. Each region is represented by a family member of a child who is currently enrolled or previously accessed the Part C Program as well as one parent at large role. Two family members serve as the Co-Chairs of the Council providing the Part C State Team and other Council members with key information and recommendations for Montana’s comprehensive system of early intervention. The intentional structure meaningfully involves and engages family members to promote their active participation in decision-making such as target setting, data analysis, developing improvement strategies and evaluating progress. The family members participated in regularly scheduled FSSAC meetings, specific Indicator data analysis meetings, and the target setting survey distributed to all groups.

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

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

To increase the capacity of the diverse group of parents, the Part C team provided learning opportunities to increase knowledge and understanding of Montana's Part C Program including compliance and results Indicator data, the Statewide Systemic Improvement Plan; and most recently, the funds available for Part C via the American Rescue Plan. Parents or family members continue to contribute to the ICC's Strategic Plan and engage as part of two work groups targeting increasing engagement and collaboration of multidisciplinary evaluation teams, an acronym dictionary, and transition at age 3. Examples of capacity building actions:
3/26/2021 - Presentation of the history and structure of the Interagency Coordinating Council, responsibility of ICC members. Discussion led to Ground Rules development.
6/11/2021 - Presentation and discussion of compliance and performance targets representing goals to be achieved by the State and the established expectations for the Part C Program providers.
10/1/2021 - Presentation and discussion of target setting guidance from the Office of Special Education Programs regarding baselines and targets. Review and discussion of Performance Indicators 2, 5, 6.
12/3/2021 - Presentation and discussion of the Council's Strategic Plan including mission and vision plus goals including increasing multidisciplinary team engagement and collaboration and improving transitions for children and families exiting Part C services and supports. Discussion of MT Part C American Rescue Plan Buckets. Review and discussion of Performance Indicators 3 and 4. Discussion of upcoming Stakeholder Survey for Target Setting.
1/14/2022 - Description and discussion regarding the last five years of the SSIP activiities and results as well as upcoming improvement strategies for the next five years. The results of the FFY 2020 APR were shared by each Indicator along with opportunity for discussion. We linked several required work products and one quality product (Child Find, Family Stories, and Family Outcomes) to the Part C American Rescue Plan describing our expanded work around Child Find, Family Stories, and the Family Outcomes application. We reviewed the results of the Stakeholder Survey for Target Setting leading to setting of baselines and targets. To support the development of implementation activities to improve outcomes for infants and toddlers with disabilities and their families, parents serving on the FSSAC continue to provide input on improvement strategies via ongoing FSSAC meetings, Work Groups, and surveys. Examples of input:
The Child Outcomes Summary Process includes definitions of child and family outcomes; purpose/intent of collecting outcomes data; and the outcome measurement process which includes family members.
Families participate consistently in data collection for the measurement of child outcomes data beginning at referral and Part C Program providers support the family’s understanding of the processes and uses of child and family level data.
Information provided to increase knowledge and aid in the selection of EBPs expected to lead to increased child outcomes, i.e., coaching model linked with Pyramid Model Practices.
Family members serve on the State’s Pyramid Model Leadership Team.
Family members review and provide feedback on the State’s CSPD modules currently under development.
A family work group led by a parent will inform and participate in the development of Family Story videos exploring the impact of early intervention.

**Soliciting Public Input:**

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

Virtual meetings beginning October 1, 2021, December 3, 2021, January 4, 2022, and January 14, 2022 were dedicated to target setting, data analysis, developing and reviewing improvement strategies along with the evaluation of the State’s progress, Montana used a survey, Target Setting Stakeholder Input, to solicit input stakeholder groups' final input in January 2022.

**Making Results Available to the Public:**

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

Meeting minutes and survey results are available on the Montana Milestones webpage:
https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/fssac/partcmeetingminutes
https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2019 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 2019 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 2019 APR in 2021, is available.**

Montana Milestones Part C Early Intervention Program’s FFY 2018 APR/SPP and FFY 2019 are currently available on the Montana Milestones website: https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports. The FFY 2020 APR/SPP will be available on the Department’s website at the same location as soon as possible after the February 1, 2022 submission.

## Intro - Prior FFY Required Actions

The State has not 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. With its FFY 2020 SPP/APR, the State must provide a Web link demonstrating that the State 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.

**Response to actions required in FFY 2019 SPP/APR**

Weblink for posted FFY 2018 and FFY 2019 reporting: https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports
Technical Assistance Sources:
ECTA: Correcting Long Standing Non-Compliance, DMS Monitoring
DASY and IDC: Data Management System development and now redesign to obtain valid and reliable reporting data
NCPMI: Pyramid Model work leading to improvements in the State's SiMR
CIFR: Fiscal systems and DMS Monitoring

## Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support the State lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report. OSEP accepts the SICC form, which will not be posted publicly with the State's SPP/APR documents.

The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 22, 2021 determination letter informed the State that it 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. The State provided the required information.

## Intro - Required Actions

The State's IDEA Part C determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 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 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

# 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 2020 SPP/APR, the data for FFY 2019), 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 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 99.88% | 100.00% | 100.00% | 100.00% | 98.21% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 374 | 378 | 98.21% | 100% | 100.00% | Met target | No Slippage |

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

***This number will be added to the "Number of 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.***

4

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

Contractors’ review of data extract revealed 4 records where services were not provided with 30 days from parent consent due to family circumstance: inability to schedule due to family’s timetable.

**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).**

Montana's definition of timely receipt of early intervention services: services and supports are initiated within 30 days from the date parent/family member provides consent to the early intervention services and supports identified within the initial IFSP.

**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).**

Data collected for the full reporting period, July 1, 2020 through June 30, 2022 from two data sources.

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

Montana used two sets of data as the source: the State’s original data management system, the EI Module, for July 1, 2020 through January 31, 2021, and a data extract from the new data management system, Med Compass, for February 1, 2021 through June 30, 2021. All five regional contractors participated in monitoring.
The EI Module: The IFSP Timely Services Report for July 1, 2020 through January 31, 2021 was the source of the statistically valid, randomized sample of initial IFSPs. The agency’s personnel document the early intervention services(s) identified on the named IFSP; note the date the service(s) were initiated; and the source of the service initiation data. If the service was not initiated within 30 days, the agency's personnel document reasons for delay.
For the period February 1, 2021 through June 30, 2021, each contractor reviewed the initial IFSP data extract obtained from the new data management system for their region. The agency’s personnel documented the services and dates of initiation using internal systems at the agency to validate.

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

Impact of Covid: Contractors reported a long waiting list for families to see the Developmental Pediatrician for children with possible Autism Spectrum Disorder. The contractors provided other services such as occupational therapy, hearing evaluations, physical therapy, and speech therapy while children were waiting to be evaluated for ASD. The specialized intervention services provided addressed the concerns and recommendations documented in the IFSP. Some families utilized telehealth for therapy services. The waiting list for the Developmental Pediatrician did not delay children entering the Part C Program or from receiving specialized services once enrolled with an IFSP. IFSP team members (doctors, nurses, nutritionists, occupational therapists, speech therapists, and audiologists) offered recommendations and options for service delivery that were accessible and addressed the identified needs. The regional contractors are able to provide all services either through their internal therapists (OT, PT, SLP, BCBA) or community therapists. The contractors agree that having therapists in their employ has been especially helpful for those occasions where the child resides in an area that does not have pediaric therapists.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 1 | 1 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

Finding: A single contractor identified 31/35 records (88.57%) met the compliance requirements. 4/35 (11.43%) records identified services that were not initiated within 30 days and insufficient data was collected to determine if the reasons for delay were exceptional family circumstances. The contractor was advised of the findings during pre-correction and submitted verification data to ensure correction and subsequent data to ensure 100% compliance with the regulatory requirements within 90 days of the finding.

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

MT provides verification the EIS provider with noncompliance identified is correctly implementing the specific regulatory requirements as they achieved 100% compliance based on a review of updated data subsequently collected through desk level monitoring and corrected each individual case of noncompliance: Record 1, Family Training provided by the Service Coordinator during the home visit was expected to be initiated 9/23/2019. The home visit and family training were scheduled for and provided on 10/7/2019 at the family's request. Record 2, Family Training provided by the Service Coordinator during the home visit was expected to be initiated 11/15/2019. The home visit and family training were scheduled for and provided on 12/5/2019 at the family's request. Record 3, Family Training provided by the Service Coordinator during the home visit was expected to be initiated 9/19/2019. The home visit and family training were scheduled for and provided on 9/26/2019 at the family's request. Record 4, Family Training provided by the Service Coordinator during the home visit was expected to be initiated 9/4/2019. The home visit and family training were scheduled for and provided on 9/11/2019 at the family's request.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 1 - Prior FFY Required Actions

If the State uses data from a State database to report on this indicator in its FFY 2020 SPP/APR, and the State does not use data from the full reporting period (July 1, 2020-June 30, 2021), the State must describe, in the FFY 2020 SPP/APR, how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

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.

**Response to actions required in FFY 2019 SPP/APR**

Data collected for the full reporting period, July 1, 2020 through June 30, 2022 from two data sources: the EI Module (the State's previous data management system) and data extracts from the State's new data management system, Med Compass.
For the finding in FFY 2019, the State verified that the EIS program with noncompliance is correctly implementing the specific regulatory requirements, i.e., achieved 100% compliance based on a review of updated data. Each individual case of noncompliance, were verified that service initiation occurred although after the 30 day timeline.

## 1 - OSEP Response

## 1 - Required Actions

The State must demonstrate, in the FFY 2021 SPP/APR, that the one finding identified in FFY 2019 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 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, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Indicator 2: Services in Natural Environments

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 89.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= | 98.00% | 98.00% | 99.00% | 99.00% | 99.00% |
| Data | 99.72% | 99.32% | 99.41% | 99.52% | 100.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 89.00% | 89.00% | 90.00% | 90.00% | 91.00% | 91.00% |

**Targets: Description of Stakeholder Input**

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

Methodology for collecting Indicator 2 data (new): The State’s new data management system, Med Compass, identifies the service location from services documented in the Individualized Family Services Plan (IFSP) Care Plan and the setting(s) where the service(s) will be primarily received by the infant or toddler and his/her family. This fine tuned data drilldown provides the State with data of the types and numbers of services being provided within the home or community-based setting. Reporting data will continue to be validated by both the Part C Program provider’s internal monitoring processes and the State’s annual review of randomized, statistically valid number of records.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 596 |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Total number of infants and toddlers with IFSPs | 603 |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 596 | 603 | 100.00% | 89.00% | 98.84% | N/A | N/A |

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

Impact of Covid: Contractors report significant shift across the State as early intervention service providers prefer to provide services only in a clinical setting with few specialists willing to provide services within the home environment unless through teleintervention visits. Ultimately, the specialists are willing and able to provide intervention to many more consumers during the course of a work day in a clinical setting with the corresponding compensation than to provide intervention in home or community settings traveling great distances and seeing far fewer consumers.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

OSEP cannot determine whether the State revised its baseline for this indicator. In its Description of Stakeholder Input section, the State referenced new baselines and target setting survey results at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports (public facing website), which indicated the baseline year is 2019. However, the State reported its baseline year as FFY 2020 in the Historical Data table. Additionally, OSEP cannot accept that baseline revision because the State's FFY 2020 baseline data reported in the Historical Data table is not consistent with the State's FFY 2020 data reported in the FFY 2020 SPP/APR Data table.

OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because of the discrepancy in the baseline year and data.

## 2 - Required Actions

The State did not provide targets, as required by the measurement table. The State must provide the required targets for FFY 2020 through FFY 2025 in the FFY 2021 SPP/APR.

If the State chooses to revise its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table.

# 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**

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

New baselines: As a result of concentrated technical assistance and rigorous professional development provided to Family Support Specialists to ensure valid and reliable Child Outcomes measurements for the last five years plus ongoing monitoring of Child Outcomes data (see SSIP evaluation), Montana identifies FFY 2019 measurements as the new baselines and builds achievable targets based on valid/reliable data and expected consistent growth.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A1** | 2019 | Target>= | 62.00% | 65.00% | 65.00% | 68.00% | 68.00% |
| **A1** | 58.00% | Data | 62.72% | 53.42% | 64.94% | 62.78% | 57.77% |
| **A2** | 2019 | Target>= | 53.00% | 56.00% | 56.00% | 59.00% | 59.00% |
| **A2** | 32.00% | Data | 48.07% | 35.22% | 44.14% | 40.22% | 31.93% |
| **B1** | 2019 | Target>= | 61.00% | 64.00% | 64.00% | 67.00% | 67.00% |
| **B1** | 58.00% | Data | 64.21% | 55.72% | 66.67% | 61.63% | 57.67% |
| **B2** | 2019 | Target>= | 44.00% | 47.00% | 47.00% | 50.00% | 50.00% |
| **B2** | 26.00% | Data | 38.41% | 30.73% | 36.66% | 32.83% | 25.72% |
| **C1** | 2019 | Target>= | 67.00% | 70.00% | 70.00% | 73.00% | 73.00% |
| **C1** | 61.00% | Data | 66.48% | 59.08% | 67.03% | 61.50% | 60.84% |
| **C2** | 2019 | Target>= | 52.00% | 55.00% | 55.00% | 58.00% | 58.00% |
| **C2** | 30.00% | Data | 51.45% | 35.93% | 39.90% | 38.91% | 29.49% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1>= | 58.00% | 58.00% | 59.00% | 59.00% | 59.00% | 60.00% |
| Target A2>= | 32.00% | 32.00% | 33.00% | 33.00% | 34.00% | 34.00% |
| Target B1>= | 58.00% | 58.00% | 59.00% | 59.00% | 59.00% | 60.00% |
| Target B2>= | 26.00% | 26.00% | 27.00% | 27.00% | 28.00% | 28.00% |
| Target C1>= | 61.00% | 61.00% | 62.00% | 62.00% | 63.00% | 63.00% |
| Target C2>= | 30.00% | 30.00% | 31.00% | 31.00% | 32.00% | 32.00% |

 **FFY 2020 SPP/APR Data**

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

403

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

| **Outcome A Progress Category** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 3 | 0.74% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 179 | 44.42% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 124 | 30.77% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 76 | 18.86% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 21 | 5.21% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 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 | 200 | 382 | 57.77% | 58.00% | 52.36% | Did not meet target | Slippage |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 97 | 403 | 31.93% | 32.00% | 24.07% | Did not meet target | Slippage |

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

Impact of Covid: Agencies reported observable and significant isolation in families. Questioning families turns up data that children are very isolated and rarely meet others - not attending church or going to the grocery store, or seeing family and friends. The agencies report they are seeing more children who are overwhelmed in groups (such as Child Find events). Some agencies expressed concern that lower ratings will be more common and note changes in family culture: a great reluctance to integrate the child into activities and events. Young ones have never been in a world that is different than it is now.

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

Same as above.

**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 | 5 | 1.24% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 175 | 43.42% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 134 | 33.25% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 80 | 19.85% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 9 | 2.23% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 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 | 214 | 394 | 57.67% | 58.00% | 54.31% | Did not meet target | Slippage |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 89 | 403 | 25.72% | 26.00% | 22.08% | Did not meet target | Slippage |

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

Impact of Covid: Contractors reported virtual visits impacted the FSS's ability to observe the infant or toddler's development as measured by the age anchoring tool, the MEISR. While every baseline and exit COS was completed using parental observation and/or input, tele-intervention views when possible, and input by therapists, or others involved with the child and family, assessments and caregiver observations were weighted more heavily than in typical times. The Family Support Specialists (FSSs) reported challenges to document the child's developmental status across settings.

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

Same as above.

**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 | 4 | 0.99% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 166 | 41.19% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 131 | 32.51% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 85 | 21.09% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 17 | 4.22% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 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 | 216 | 386 | 60.84% | 61.00% | 55.96% | Did not meet target | 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 | 102 | 403 | 29.49% | 30.00% | 25.31% | Did not meet target | Slippage |

**Provide reasons for C1 slippage, if applicable**

Impact of Covid: The Family Support Specialists (FSSs) reported challenges to document the child's developmental status across settings.

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

Same as above.

**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 | 709 |
| 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. | 247 |

| **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.**

Montana's Child Outcomes Summary Process and the MEISR as an age anchoring tool.

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

Impacts of Covid: Contractors reported virtual visits impacted the FSS's ability to observe the infant or toddler's development as measured by the age anchoring tool, the MEISR. While every baseline and exit COS was completed using parental observation and/or input, tele-intervention views when possible, and input by therapists, or others involved with the child and family, assessments and caregiver observations were weighted more heavily than in typical times. The Family Support Specialists (FSSs) reported challenges to document the child's developmental status across settings. Agencies reported observable and significant isolation in families. Questioning families turns up data that children are very isolated and rarely meet others - not attending church or going to the grocery store or seeing family and friends. The agencies report they are seeing more children who are overwhelmed in groups (such as Child Find events). Some agencies expressed concern that lower ratings will be more common and note changes in family culture: a great reluctance to integrate the child into activities and events. Young ones have never been in a world that is different than it is now.

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, but OSEP cannot accept that baseline revision because the State's FFY 2019 baseline data reported in the Historical Data table is not consistent with the State's FFY 2019 data reported in the FFY 2020 SPP/APR Data table.

Additionally, OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State’s end targets for FFY 2025 reflect improvement over the State’s baseline data, given the discrepancy in the baseline data, as noted above.

## 3 - Required Actions

The State did not provide targets, as required by the measurement table. The State must provide the required targets for FFY 2020 through FFY 2025 in the FFY 2021 SPP/APR.

If the State chooses to revise its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table.

# Indicator 4: Family Involvement

**Instructions and Measurement**

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

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

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target>= | 94.00% | 94.00% | 95.00% | 95.00% | 95.00% |
| A | 65.00% | Data | 88.98% | 84.64% | 74.52% | 94.27% | 98.97% |
| B | 2020 | Target>= | 94.00% | 94.00% | 95.00% | 95.00% | 95.00% |
| B | 65.00% | Data | 91.67% | 91.87% | 78.56% | 96.04% | 99.33% |
| C | 2020 | Target>= | 94.00% | 94.00% | 95.00% | 95.00% | 95.00% |
| C | 65.00% | Data | 87.63% | 85.93% | 73.89% | 94.03% | 96.59% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 65.00% | 65.00% | 70.00% | 70.00% | 75.00% | 75.00% |
| Target B>= | 65.00% | 65.00% | 70.00% | 70.00% | 75.00% | 75.00% |
| Target C>= | 65.00% | 65.00% | 70.00% | 70.00% | 75.00% | 75.00% |

**Targets: Description of Stakeholder Input**

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

Methodology for collecting Indictor 4 data (new): The Family Outcomes Survey Process was developed, and the Family Outcomes Guidance was implemented in 2017-2018, The collection of Family Outcomes is gathered via Survey Monkey or paper copy if web access is unavailable. The collection and dissemination of data using this methodology proved far more burdensome for both the State and each Part C Program provider than originally intended. For FFY 2022, Family Outcomes data will be collected via an application under development by the University of Montana Rural Institute effective July 1, 2022. The survey will be sent to families’ cell phones providing a link between respondents and survey data in order for the State to measure responsiveness both geographically and by race/ethnicity. The University will also collect and disseminate data to the State and the Part C Program providers. Paper copies will be available for those families without cell phones or who may decline to use their phone for this purpose. The Family Outcomes Survey Process and results will be a component of the State’s Equity Plan beginning July 2022.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 620 |
| Number of respondent families participating in Part C  | 190 |
| Survey Response Rate | 30.65% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 163 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 190 |
| 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 | 175 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 190 |
| 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 | 169 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 190 |

| **Measure** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 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) | 98.97% | 65.00% | 85.79% | N/A | N/A |
| 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) | 99.33% | 65.00% | 92.11% | N/A | N/A |
| 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) | 96.59% | 65.00% | 88.95% | N/A | N/A |

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

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

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Survey Response Rate | 56.27% | 30.65% |

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

FFY 2022 - Year 1: The methodology of collecting Family Outcomes Survey Data in FFY 2022 will use the family’s cell phone to send messages requesting their participation in the Family Outcomes Survey at the time of collection. The time of collection is currently the month of the family’s IFSP six-month review.

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

In an effort to promote responses from a broad cross section of families that receive Part C services, the Family Outcomes survey is provided to every family receiving Part C at every six month review. The family is provided a link to a regional Survey Monkey (linked to geographic region) to provide information electronically or is offered a paper copy of the Survey form which is linked to a geographic region. The regional data collected identifies the number of surveys distributed within the geographic region and the number of surveys collected during the course of FFY 2020. In the future, data collected from the first year using the Family Outcomes application will be analyzed with the assistance of the University of Montana and lead to the identification of steps to reduce any identified bias and promote response rates from a broad cross section of families that receive Part C services.

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

The survey results indicated that respondent families were from every geographic catchment area. Surveys were distributed in two ways: use of Survey Monkey or paper and pencil surveys.
Region 1: 44 responses/96 surveys distributed
Region 2: 54 responses/65 surveys distributed
Region 3: 23 responses/191 surveys distributed
Region 4: 16 reponses/115 surveys distributed
Region 5: 53 responses/153 surveys distributed

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

Family Survey Data captured in Survey Monkey identifies the geographic region's provider of the Part C Program. Paper surveys capture geographic region as well.

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

Impact of Covid: Without in-person supports (conversations about the Family Outcomes Survey Process beginning at intake, up to and including the IFSP six-month review meeting where a family may be provided with either a paper copy or the FSS’s tablet to complete the survey online via Survey Monkey), the State’s response rate suffered.

## 4 - Prior FFY 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.

**Response to actions required in FFY 2019 SPP/APR**

The demographics such as race/ethnicity of the infants or toddlers for whom families responded are unknown to represent the race/ethnicity demographics of infants or toddlers enrolled in the Part C Program. Survey responses were received from every geographical catchment region in the State.
To ensure response data represents demographics, race/ethnicity and geographic region, an application is being developed by the University of Montana, Rural Institute. The application will link the family’s self-identified race/ethnicity, the geographic region wherein the family receives early intervention services, and then provide response data describing representativeness by race/ethnicity and geographic region. The Family Outcomes Survey application is expected to be launched July 1, 2022. Concurrently, Montana is engaging in a Child Find Pilot focused upon underserved populations including Native Americans and homeless children and families.

## 4 - OSEP Response

OSEP cannot determine whether the State revised its baseline for this indicator. In its Description of Stakeholder Input section, the State referenced new baselines and target setting survey results at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports (public facing website), which indicated the baseline year is 2019. However, the State reported its baseline year as FFY 2020 in the Historical Data table. Additionally, OSEP cannot accept that baseline revision because the State's FFY 2020 baseline data reported in the Historical Data table is not consistent with the State's FFY 2020 data reported in the FFY 2020 SPP/APR Data table.

OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because of the discrepancy in the baseline year and data.

OSEP cannot determine whether the State analyzed the response rate to identify potential nonresponse bias, including steps to reduce any identified bias and promote response from a broad cross section of parents with disabilities, as required by the Measurement Table.

The State did not describe the metric used to determine representativeness, as required by the Measurement Table.

## 4 - Required Actions

The State did not provide targets, as required by the measurement table. The State must provide the required targets for FFY 2020 through FFY 2025 in the FFY 2021 SPP/APR.

If the State chooses to reset its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table.

In the FFY 2021 SPP/APR, the State must analyze the response rate to identify potential non-response bias and take steps to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities, as required by the Measurement Table.

In the FFY 2021 SPP/APR, the State must describe the metric used to determine representativeness, as required by the Measurement Table.

# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 0.95% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 1.43% | 1.46% | 1.46% | 1.46% | 1.46% |
| Data | 1.07% | 0.99% | 1.19% | 1.24% | 0.95% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 0.95% | 0.95% | 1.15% | 1.15% | 1.20% | 1.20% |

Targets: Description of Stakeholder Input

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

New Indicator 5 baseline based upon FFY 2019 data: The pandemic’s impact continues its toll on referrals to Montana Milestones. The State is engaging in a state-wide Child Find campaign and a Child Find Pilot expected to lead to increased referrals and awareness of the Program as the expected results.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 1 with IFSPs | 91 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 1 | 11,365 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 91 | 11,365 | 0.95% | 0.95% | 0.80% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Impacts of Covid: Contractors reported far fewer referrals from pediatricians or physicians as families’ either declined to attend well-child checks or medical personnel were only seeing children for specific illnesses. They also reported that infants and toddlers accessing vaccinations on a timely basis were down as well. The seven tribal communities were closed for the majority of the year and are once again closed due to the newest variant of Covid.

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 2.36% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 2.20% | 2.20% | 2.20% | 2.25% | 2.25% |
| Data | 1.93% | 2.34% | 2.21% | 2.28% | 2.36% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 2.36% | 2.36% | 2.61% | 2.61% | 2.86% | 2.86% |

Targets: Description of Stakeholder Input

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

New Indicator 6 baseline based upon FFY 2019 data.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 3 with IFSPs | 603 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 3 | 34,679 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 603 | 34,679 | 2.36% | 2.36% | 1.74% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

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

Impacts of Covid: In addition to far fewer referrals received from primary referral sources, child care centers closing and reopening, and few public events, many families remain in isolation with few contacts with typically developing children or even family members to provide developmental advice which lead to referrals. Contractors report that they remain cautiously optimistic they will be able to rebuild their Child Count numbers with the Child Find media campaign and lessons learned from the Child Find Pilots. However, they also note that the post-pandemic world is far different and the isolation that pervades families in Montana’s urban, rural, and tribal communities will continue to impact child count for years to come.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 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 2020 SPP/APR, the data for FFY 2019), 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 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 93.09% | 99.51% | 99.51% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 450 | 542 | 100.00% | 100% | 97.60% | Did not meet target | Slippage |

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

Finding: The Part C Coordinator’s review of the data extract from Med Compass for February 1, 2021 through June 30, 2021 identified a single contractor with 13/29 records out of compliance due to agency reasons. Examination confirmed each individual child ultimately received an initial evaluation and assessment and an initial IFSP meeting but not within the required 45-day timeline. The contractor is advised of the finding and subsequent data will be collected to verify 100% compliance with the regulatory requirements.

**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.**

79

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

79 records included documented delays attributable to exceptional family circumstances. Families struggled to meet with multidisciplinary teams for a variety of reasons: illness, scheduling due to the multiple demands of supporting other family members in the home environment, and inconsistent access to the internet for virtual meetings. Connectivity in Montana is weak on good days. When multiple family members try to access various virtual environments for school (sometimes, multiple schools) or work, connectivity plummets. Documentation indicates multiple meetings were rescheduled.

**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).**

Data collected for the full reporting period, July 1, 2020 through June 30, 2021 from two data sources.

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

Montana used two sets of data as the source: the State’s original data management system, the EI Module, for July 1, 2020 through January 31, 2021, and a data extract from the new data management system, Med Compass, for February 1, 2021 through June 30, 2021. All five regional contractors participated in monitoring.
The EI Module: The IFSP Status Report for July 1, 2020 through January 31, 2021 was the source of the 45-day timeline for initial IFSPs. The agency’s personnel documented within the system any reasons for delay as prompted by the system recognizing the 45th day had passed.
For the period February 1, 2021 through June 30, 2021, each contractor reviewed the data extract obtained from the new data management system for their region. The data extract included the number of days between referral (documented on the Intake document saved in the new system) and the date of the IFSP meeting (documented in the IFSP saved in the new system). The agency’s personnel documented the reasons for delay in meeting the timeline using internal systems at the agency to validate.

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

Impacts of Covid: Contractors reported multiple challenges in meeting the 45-day timeline but, also, reported the tenacity of FSSs to gather multidisciplinary teams together virtually, access reports from different professionals, and come together to evaluate for eligibility and assess for services and supports to develop the IFSP with family members.

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

## 7 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 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 2021 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 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 8A: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), 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 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 97.41% | 98.47% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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)**

NO

**If no, please explain.**

Four Part C referrals were received by the individual agencies less than 90 days before the toddlers' third birthdays. The initial IFSPs included transition planning information. Following eligibility determinations, the Family Support Specialists worked with the families to develop transition plans to ensure transition meetings with the local education agencies or a private or public preschools were scheduled and completed in each of the four cases.

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 308 | 312 | 100.00% | 100% | 98.72% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Four Part C referrals were received by the individual agencies less than 90 days before the toddlers' third birthdays. In each case, the Family Support Specialists developed transition plans to ensure transition meetings with the local education agencies or a private or public preschools were scheduled and completed.

**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

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

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

State database

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

Data collected for the full reporting period, July 1, 2020 through June 30, 2022 from two data sources.

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

The EI Module: The Exit Report for July 1, 2020 through January 31, 2021 was the source of transition data. The agency’s personnel document dates for all transition activities including the development of the transition plan with steps and services. Documentation was captured within the system for delay reasons as prompted by the system recognizing the transition plan was or was not developed within 90 days of the toddler’s third birthday.
For the period February 1, 2021 through June 30, 2021, each contractor reviewed the exit data extract obtained from the new data management system for their region. The data extract included the reasons for exit. For those individuals with documentation recorded as Part B eligible, exit at age 3; Not Eligible for Part B, exit with referrals to other programs; Not Eligible for Part B, exit with no referrals; and Part B Eligibility not determined, the agency’s personnel documented the date the transition plan was created and any reasons for delay in meeting the timeline using internal systems at the agency to validate.

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

709 infants and toddlers exited the Program during the reporting period. Transition plans were not developed during the reporting period for the following children:
Deceased: 2
Withdrawn by their parent or guardian: 116
Moved out of state: 32
Attempts to contact were unsuccessful: 99
No longer eligible for Part C prior to reaching age 3: 148

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 8A - Prior FFY Required Actions

None

## 8A - OSEP Response

## 8A - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 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 2021 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 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 8B: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 96.43% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 699 | 709 | 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.**

10

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

10 families selected to opt out of notification.

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

Montana used two sets of data as the source: the State’s original data management system, the EI Module, for July 1, 2020 through January 31, 2021, and a data extract from the new data management system, Med Compass, for February 1, 2021 through June 30, 2021. All five regional contractors participated in monitoring.

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

YES

**If yes, is the policy on file with the Department? (yes/no)**

YES

**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).**

Data collected for the full reporting period, July 1, 2020 through June 30, 2022 from two data sources.

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

For notification purposes, all toddlers enrolled in Montana Milestones at the times of notification (January and August) are potentially eligible for Part B services and supports.
The EI Module: The Children Turning 3 Report for July 1, 2020 through January 31, 2021 was the source of notification data. The agency’s personnel document dates for all transition activities including the date of notification to the SEA and LEA (completed twice annually, January and August). Documentation was captured within the system of a parent’s decision to opt-out or reasons for delay as prompted by the system recognizing the notification was or was not completed within 90 days of the toddler’s third birthday.
For the period February 1, 2021 through June 30, 2021, a data extract was created for each contractor identifying the toddlers who turned 3 within the February 1, 2021 through June 30, 2021. Each contractor reviewed the data extract for their region and documented the LEA and SEA notification date (January or August) for each child as well as any opt-out data using internal systems at the agency to validate.

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

## 8B - Required Actions

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), 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 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 96.16% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 202 | 312 | 96.16% | 100% | 100.00% | Met 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.**

13

**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.**

97

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

Impact of Covid: Contractors report challenges in scheduling the transition conferences due to illness and family schedules. At the family’s requests, some conferences were postponed until the beginning of the next school year as the family preferred to wait. After a year of virtual life, for early intervention, for school for siblings, and for work for parents, families asked to wait, hoping the pandemic’s impact would lessen.

**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).**

Data collected for the full reporting period, July 1, 2020 through June 30, 2022 from two data sources.

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

Montana used two sets of data as the source: the State’s original data management system, the EI Module, for July 1, 2020 through January 31, 2021, and a data extract from the new data management system, Med Compass, for February 1, 2021 through June 30, 2021. All five regional contractors participated in monitoring.
The EI Module: The Transition Conference Report for July 1, 2020 through January 31, 2021 was the source of transition conference data. The agency’s personnel document dates for all transition activities including the date of the transition conference. Documentation is captured within the system if a parent did not provide approval for the transition conference or reasons for delay as prompted by the system recognizing the conference was or was not completed within 90 days of the toddler’s third birthday.
For the period February 1, 2021 through June 30, 2021, a data extract was created for each contractor identifying the toddlers who exited the Program within February 1, 2021 through June 30, 2021. For those individuals with documentation recorded as Part B eligible, exit at age 3; Not Eligible for Part B, exit with referrals to other programs; Not Eligible for Part B, exit with no referrals; and Part B Eligibility not determined, the agency’s personnel documented the date the transition conference was held as well as any opt-out data using internal systems at the agency to validate.

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

Per notification to the LEA and SEA, 709 children were potentially eligible for Part B services and supports. Transition conferences were not held for the following during the reporting period for the following children:
Deceased: 2
Withdrawn by their parent or guardian: 116
Moved out of state: 32
Attempts to contact were unsuccessful: 99
No longer eligible for Part C prior to reaching age 3: 148

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 14 | 14 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

Finding: Montana identified 14 toddlers and their families that did not participate in a transition conference with the LEA within the required timeline. The State advised the contractors and they submitted verification data to ensure correction (each transition conference was completed although late) and subsequent data to ensure 100% compliance with the regulatory requirements within 90 days of the findings.

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

In each instance, the State verified the reasons why the regional Part C Program providers were unable to successfully schedule the timely transition conferences with the LEA as the LEA personnel were unable to meet due to severe Covid impacts during the Spring of 2020: technological challenges, staffing shortages in the Spring of 2020, or school closures. In all 14 cases, the State verified that the regional Part C Program providers supplied the LEA with the toddlers' most recent plan of care, any recent assessment data, Child Outcomes Summary documentation, and information the family wished to share regarding the development of their toddler and the need for Part B services and supports. In all 14 cases, the State verified that the Part C Program providers worked with the LEA and the family to formally transition in the Fall of 2020. In all 14 cases, the Part C Program provider worked with the LEA and the family to formally transition in the Fall of 2020. All 14 transitions were completed although late.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8C - Prior FFY 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.

**Response to actions required in FFY 2019 SPP/APR**

The State did not identify any findings of noncompliance in FFY 2019 on behalf of the five regional Part C Program providers. Montana identified 14 toddlers and their families that did not participate in a transition conference with the LEA within the required timeline. In each of the 14 cases, the regional Part C Program provider was unable to schedule the transition conference with the LEA. In these cases, the LEA declined and was unable to meet due to staffing shortages in the Spring of 2020 or closures due to the impact of Covid. In all 14 cases, the regional Part C Program provider supplied the LEA with the toddlers' most recent plan of care, any recent assessment data, Child Outcomes Summary documentation, and information the family wished to share regarding the development of their toddler and the need for Part B services and supports. In all 14 cases, the Part C Program provider followed the family through the Summer of 2020 and then worked with the LEA and the family to formally transition in the Fall of 2020.

## 8C - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2019 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2019 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.

## 8C - Required Actions

The State must demonstrate, in the FFY 2021 SPP/APR, that the 14 findings identified in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 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, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Indicator 9: Resolution Sessions

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

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

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

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

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

## 9 - Indicator Data

**Not Applicable**

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

YES

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

Montana adopted Part C due process procedures under section 639 of the IDEA.

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

OSEP notes that this indicator is not applicable.

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

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

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

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

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

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

NO

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1 Mediations held | 0 |
| SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= |  |  |  |  |  |  |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 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 2020. 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

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

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

**Measurement**

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

**Instructions**

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

***Targets:*** In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

***Updated Data:*** In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

*Phase I: Analysis*:

- Data Analysis;

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

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

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

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

- Infrastructure Development;

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

- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

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

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

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

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

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., April 1, 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 11 - Indicator Data

**Section A: Data Analysis**

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

Montana will increase the percentage of infants and toddlers with IFSPs who demonstrate improved positive social and emotional skills including positive relationships by the time they turn three or exit the program.

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

NO

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

NO

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

YES

**Please provide a description of the changes and updates to the theory of action.**

Montana updated its Theory of action to include two improvement strategies related to the SiMR:
Improvement Strategy 1: Comprehensive System of Professional Development:
If We… develop and implement the CSPD
Then… we have learning modules available on the ECP learning platform
So that… FSSs will access the learning modules to acquire Primary and Comprehensive Certification which will lead to highly qualified Family Support Specialist.

Improvement Strategy 2: Establish Montana’s Part C Pyramid Model Framework
If We…establish a Part C Model Pyramid Model Framework
Then… FSSs will acquire knowledge and skills and will implement Pyramid Model practices in homes
with families
So that… families will have increased capacity to support their child with social and emotional development

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

https://dphhs.mt.gov/assets/ecfsd/childcare/MontanaMilestonesSSIP2020TheoryofAction.pdf

Progress toward the SiMR

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

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 58.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 58.00% | 58.00% | 59.00% | 59.00% | 59.00% | 60.00% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 97 | 403 | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 200 | 382 | 58.00% | 58.00% | 52.36% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Impact of Covid: Part C Program providers reported observable isolation in families. Questioning families turns up data that children are very isolated and rarely meet others - not attending church or going to the grocery store, not seeing family and friends. The providers report they are seeing more chilren who are overwhelmed in groups (such as Child Find events). Some personnel expressed concern that lower ratings will be more common and note changes in family culture: a great reluctance to integrate the child into activities and events. Youngs ones have never been a world that is different than it is now.

**Provide the data source for the FFY 2020 data.**

Montana used two sets of data as the source: the State’s original data management system, the EI Module, for July 1, 2020 through January 31, 2021, and a data extract from the new data management system, Med Compass, for February 1, 2021 through June 30, 2021. All five regional contractors participated in monitoring.

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

The EI Module: The Child Outcomes Summary Analysis Report for July 1, 2020 through January 31, 2021 was one source of child outcomes summary data. The agency’s personnel document all baseline and exit Child Outcomes Summary Forms within the EI Module. The system converts the numerical ratings to the a-e OSEP reporting categories. Ongoing monitoring (see SSIP evaluation plan) and fidelity checks provide continuous analysis of the data.
For the period February 1, 2021 through June 30, 2021, a data extract was created for each contractor identifying the infants or toddlers exiting the Program during the time period and those infants and toddlers with both a baseline and exit rating collected in the data management system. The Part C Coordinator validated the Child Outcomes Summary ratings using the COS Calculator available on the ECTA website.
Additionally, input addressing the SiMR was gathered via existing virtual meetings from multiple groups such as the Child Outcomes Summary Work Group, the ICC, and the Part C Leadership Team. Please see Indicator 3, Descriptions of Stakeholder input. Following input, a new baseline was identified for the SiMR. Montana identified the FFY 2019 measurements as the new baseline following concentrated technical assistance and rigorous professional development provided to Family Support Specialists to ensure valid and reliable Child Outcomes measurements for the past five years plus ongoing monitoring of Child Outcomes data. Achievable targets based on valid and reliable data and expected consistent growth as a result of SSIP strategies are expected to follow.

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

NO

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

NO

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

YES

**If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.**

Contractors reported virtual visits impacted the FSS's ability to observe the infant or toddler's development as measured by the age anchoring tool, the MEISR. While every baseline and exit COS was completed using parental observation and/or input, tele-intervention views when possible, and input by therapists, or others involved with the child and family, assessments and caregiver observations were weighted more heavily than in typical times. The Family Support Specialists (FSSs) reported challenges to document the child's developmental status across settings. Agencies reported observable and significant isolation in families. Questioning families turns up data that children are very isolated and rarely meet others - not attending church or going to the grocery store, or seeing family and friends. The agencies report they are seeing more children who are overwhelmed in groups (such as Child Find events). Some agencies expressed concern that lower ratings will be more common and note changes in family culture: a great reluctance to integrate the child into activities and events. Young ones have never been in a world that is different than it is now.

Section B: Implementation, Analysis and Evaluation

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

NO

**Describe how the data support the decision not to make revisions to the evaluation plan. Please provide a link to the State’s current evaluation plan.**

Please see attached https://dphhs.mt.gov/assets/ecfsd/childcare/MontanaMilestonesFFY2020EvaluationImprovementStrategies.pdf

Montana's Evaluation plan includes data analysis for improvement strategies for the last five years, Montana will develop and implement a new evaluation plan beginning FFY2021.

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

Comprehensive Personnel Development System- Montana continued to develop our CSPD to lead to primary and comprehensive certification for Family Support Specialist. We contracted with West Ed to develop the 13 knowledge-based content area learning modules identified through the Delphi process, leading to Primary and Comprehensive certification. Content specialists were identified from our regional contractors and participated in piloting the first developed module on, screening, assessment, and evaluation. The 2022-2023 timeline includes development of 3-5 additional modules, and we continue to work with Montana State Early Childhood Practitioner Registry to store the learning modules on the classroom platform. The platform will provide FSS’s with the opportunity to track their professional record and the accountability to complete the modules and receive certification.

Social Emotional Screening & Assessment-In FFY2020, Sandy Cade, Part C Early Childhood Specialist and Jill Christensen, QRIS Early Education Specialist completed: Bringing the Pyramid Model to Early Intervention: Training the Trainers to Deliver Pyramid Model Practices. Following the training, we reached to ECTA TTA Jani Kozlowski and Denver University to provide technical assistance in developing an action plan for statewide implementation of Part C Pyramid Model Framework. Montana contracted with NCPMI to develop online Train the Trainers to Deliver Pyramid Model Practices e-modules for on demand access and sustainable training. Two out of 5 regional contractors implemented the ASQ-SE to assess and monitor progress in social emotional developmental goals with families and inform the development of new goals.

Family Engagement Practices: Family Support Specialist continue to meet with families in a mixture of in person and home visits following our developed Montana Milestones Tele-Practice Guidance. Montana contracted with Windfall Marketing group to develop family stories as part of our Family Leadership Action Plan developed by our ICC.

Data Quality Measures-Child Outcome Summary Process: The Child Outcomes Summary learning community continued to meet throughout the year to provide targeted technical assistance and mentoring to the two contractors, the group determined that an annual training is necessary to continue to develop practice with fidelity.

Results-Driven Accountability and General Supervision: We continue to develop and refine our new data management system, Med Compass so that data can be collected and available to Family Support Specialist to inform the IFSP development and lead to improved child and family outcomes. to lead to better services for infants and toddlers.
MT Milestones Comprehensive Definition: Montana launched the new data management system and with technical assistance from West Ed and ECTA developed a written supervision document. As part of our monitoring, Part C Coordinator Wendy Studt and Sandy Cade traveled to all five contractors for on-site visits. To maximize the usefulness of our Quality Assurance Review, we requested completed program self-assessments and a targeted desk review self-assessment prior to our visit. Information was gathered in the following areas and feedback provided after completion of all the visits.
Program’s strengths and successes experienced in the last year; areas such as services to families, documentation, oversight practices, supervision, productivity targets, any data used to provide oversight and support, program efficiencies, trainings, or newly developed program initiatives.

Areas identified as needing improvement including staffing, productivity, program oversight and/or efficiencies and any plans to address these needs. Include the areas listed above.
Additionally, after the visits, feedback was provided to contractors in some of the following areas.
A. Feedback regarding Indicator 2: Child Count and Settings - 1) How Family Support Specialists/Service Coordinators with the IFSP Team members identify the setting for early intervention services to be provided. 2) What sources of information from the team are collected to identify the settings for the services? 3)When does the team determine the settings for each service? 4) How is the family’s input incorporated? 5) Program’s process for monitoring the settings as identified on the IFSP.
B. In addition, program’s processes for general oversight and supervision related to productivity. Data used to provide oversight and support to staff, and program efficiency measures.

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

Montana Milestones has modified its Theory of Action and Logic Model; therefore, the State will measure and report on new outcomes next year.
Comprehensive Professional Development System: Montana continues to build its professional development system by developing our state personnel standards, working towards primary and comprehensive certification for Family Support Specialist. Referencing the system framework as guidance, we are confident that this dynamic growth is the primary mechanism to which Montana will ensure that infants and toddlers with disabilities and their families are provided services by knowledgeable, skilled, competent, and highly qualified personnel. With Technical Assistance from West Ed, knowledge-based content modules were developed and refined with stakeholder input using a Delphi process, content experts were identified to review each module for content and adult learning principles. All Family Support Specialists access the Early Childhood Practitioners’ Registry to obtain Primary Certification and the Registry maintains a list of currently employed and certified Family Support Specialists. All Part C Program providers report that annual Routines-Based Interviewing and Coaching Interaction Style training is provided to all Family Support Specialists. New Family Support Specialists receive mentoring by seasoned staff in both practices. Supervisors use the RBI and the Coaching/Home Visit Checklists as tools to validate the implementation of the practices. Supervisors observe at least one RBI and accompany the FSS to observe coaching practices in action during home visits. Coaching and RBI are components of ongoing staff meetings especially in times of the pandemic. Program providers report that RBIs have required much modification in a virtual world while Family Support Specialists’ coaching practices have become even more fine-tuned and successful in the virtual environment.

MT Milestones Comprehensive Definition: Montana continues to implement the Part C Eligibility Flowchart and the Multidisciplinary Guidance tool. Considering Accountability and Quality Improvement and to ensure effective statewide accountability and improvement, multidisciplinary teams are documented through the data management system and validated as part of the state’s regulatory monitoring process. All Part C Program providers report that 100% of assessments, evaluations, and IFSP teams are made up of multidisciplinary representatives. The State monitors every eligibility determination via the State’s data management systems and all eligibility determinations are made by a multidisciplinary team. All Family Support Specialists self-monitor their application of multidisciplinary evaluation, assessment and IFSP teams using the Multidisciplinary Checklist at least twice annually. Supervisors observe at least one evaluation annually and perform file reviews using a randomized sample for each Family Support Specialist which includes reviewing multidisciplinary team documentation. Annual training on the regulatory requirements of the multidisciplinary team is held at each Part C Program provider agency. With the collection of performance data, we can collect and analyze data, use the results for continuous Improvement in a multi-level approach to improve the use of data informed practices for overall statewide system improvement.

Social Emotional Screening and Assessments: Regional contractors used the ASQ-SE to assess for social emotional development and continue to scale up across the regions and use the data to inform the IFSP development, advance workforce and build family capacity. With NCPMI Technical Assistance Sandy Cade, Part C Program Specialist completed the Bringing the Pyramid Model to Early Intervention: Training the Trainers to Deliver Pyramid Model Practices. Montana also received technical assistance from NCPMI to explore statewide implementation of the Part C Pyramid Model framework with the direction of the Regional Social Emotional leadership team meeting monthly. All Part C Program providers report that 100% of infants or toddlers are screened using the ASQ: SE2. Data from this initial screening is integrated into the multidisciplinary evaluation as well as incorporated within the family’s IFSP. Annual file reviews include review of the use of social and emotional data in the development of IFSPs as well as review of Home Visiting Notes. ASQ: SE 2 training is provided annually for every Family Support Specialist.

Data Quality Measures- Child Outcomes Summary Process: The Child Outcomes Summary Community of Practice met throughout the year to provide technical assistance and support as needed. This infrastructure improvement strategy helped Montana increase the reliability of COS ratings for reporting and inform additional support needed. Regional contractors reviewed Child Outcomes Summary data and determined the need to further validate data given the challenge of virtual assessment during the pandemic. Montana continues to collect and analyze COS data to inform our target setting for this current FFY 2021 APR/SPP. All Part C Program providers report that 100% of Family Support Specialists are trained using the Child Outcomes Summary Process training modules. Every Family Support Specialist completes the Montana COS Fidelity Checklist at least twice annually followed by reflective practice with the Supervisor or Mentor. Every Program provider reported ongoing team meetings to discuss challenges to the observational component of the COS process during a time of virtual home visits. Additionally, agencies continue to monitor both baselines and exits providing 1:1 assistance as necessary.
Family Engagement Practices: The Family Outcomes Survey Process was completed using both online survey monkey and paper surveys to mitigate the challenge of in-home visits during COVID-19. Montana is contracting with University of Montana in the development of an online texting delivery method to distribute the survey, and in turn, will increase swiftness of delivery, increase the return rate, and streamline data collection. This additional data collection tool will improve the quality of the data collected and provide input to the evaluation of ongoing practices to support family engagement and outcomes. Regional Contractors continued to engage families in Routines-Based Interviewing/Family Guided Routines-Based Intervention and Coaching Interaction Style as part of the IFSP development and reflective feedback process. Due to the pandemic, we had to postpone the development of Family Stories and have since contracted with Windfall Inc. to develop Family Stories with a deliverable anticipatory timeline of 2022. Part C Program providers report that the agency follows the Family Outcomes Process.

Results-Driven Accountability and General Supervision: The data management system launched in February of 2021, and we continue to refine the development and the implementation of the system to: meet the requirements of Part C Rules and Regulations and support accountability and monitoring. Virtual Training sessions were held for the five regional contractors on the use of the data management system and office hours were provided as continued technical assistance support to the contractors. Training sessions were recorded and provided for new staff to access as part onboarding and training for Part C Early Intervention. Montana’s development and implementation of a variety of structures such as self-reflection, structured supervision, annual training, and continuous monitoring of procedures and practices at each agency has resulted in a more systematic Part C Program. Part C Leadership Team meetings at least monthly with the Part C Coordinator are a vehicle to discuss the status of each improvement strategy and provided needed input into the selection of the SSIP’s next actions.

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

YES

**Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved*.***

Part C Early Intervention Specialist Sandy Cade completed the Bringing the Pyramid Model to Early Intervention: Training the Trainers to Deliver Pyramid Model Practices. With the guidance of our Regional Social Emotional Leadership team, some initial actions we identified to begin implementation of Part C Pyramid Model; (1) reach out to NCPMI and Rob Corso about the possibility of developing online Train the Trainer E-modules. To ensure sustainability of training, these E-modules will be available for Family Support Supervisors and Family Support Specialist as a professional development training tool on how to implement Pyramid Model practices in Part C. (2) Provide a 2-day Pyramid Model Practice training too all Early Intervention staff across the state (3) With the support of technical assistance from ECTA, develop an implementation plan to scale up statewide use of the Pyramid Model Framework. With training, awareness, and coaching of the use of pyramid model practices, we believe this directly impacts out SiMR.
Montana will increase the percentage of infants and toddlers with IFSPs who demonstrate improved positive social and emotional skills including positive relationships by the time they turn three or exit the program.

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

Montana continues to build upon and bridge activities written in the previous SSIP with the revised SSIP in the continued development of our CSPD and the addition of Establishing Montana’s Part C Pyramid Model Framework.
Improvement Strategy #1 Develop a comprehensive System of Personnel Development to ensure that highly qualified personnel are providing early intervention services
Montana engaged in a contract with West Ed to build upon our previous activities of developing our CSPD system and we continued to make significant progress. Learning Module development continues with piloting of each module and identified proficiency measures to inform continual professional development of Family Support Specialist. Each learning module will be designed in a way that meets the core principles of adult learning and intentionally mirror how the FSS will use the same principles to support the family. Providing strength based, relationship based, family centered and culturally responsive support while supporting families, and considering principles that include the following approach: learning takes time, learning happens in many ways, adults learn best when they are actively engaged, experience-based learning is powerful.
To help Montana further achieve its long-term goal to develop a Comprehensive System of Personnel development, Part C Montana Milestones contracted with West Ed to continue the refinement and development of learning modules for our CSPD system to ensure that highly qualified Family Support Specialist are employed. The knowledge-based content modules will lead to primary and comprehensive certification of Montana’s FSS’s. During the development phase of the modules, Early Intervention programs will continue to provide training to new FSS’s to obtain primary certification and existing FSS’s will continue to develop portfolio’s encompassing the evidence of selected Division of Early Childhood Recommended Practices.
As completed, modules will be housed on the Montana Early Childhood Practitioner Registry classroom platform and available for FSS’s to complete and move towards primary and/or comprehensive certification. Once comprehensives certification is completed, FSS” s will submit annual renewal hours to maintain certification. Establishing a cadre of regional coaches, we continue to develop our CSPD infrastructure by identifying proficiency measures to inform regional coaching and reflective supervision and engage FSS’s in continuous improvement to improve and implement practices.
An additional infrastructure support is making available an incentive upon completion of primary or comprehensive certification. Once an FSS applies for certification and uses the platform to access and compete the modules, incentives will be awarded corresponding to the completion of primary or comprehensive certification.
Once primary and comprehensive certification is, we anticipate FSS’s will acquire foundational knowledge and skills to implement practice leading to an increase percentage of infants and toddlers demonstrating improved positive social emotional skills, including positive relationships.

Improvement Strategy #2 Establish Montana’s Part C Pyramid Model Framework
Montana is dedicated to continuing to promote social emotional outcomes for all children in Part C and promote family engagement in their child’s social emotional development.
To help Montana further sustain infrastructure supports that enable FSS’s to implement Pyramid Model practices consistently and build families capacity to support their child’s social emotional development, the implementation of the Pyramid Model framework is Strategy #2.
Montana Milestones program specialist completed the Bringing the Pyramid Model to Early Intervention: Training the Trainers to Deliver Pyramid Model Practices and the Regional Leadership team made the determination that to fully implement the Part C Pyramid Model framework, technical assistance was needed to develop an implementation plan to establish Montana’s Part C Pyramid Model Framework and implement the model.
The first element is the stages of implementation and the steps to follow in the effort of high-fidelity implementation of an evidence-based practice.
With technical assistance from ECTA and Denver University, Montana will develop an implementation plan. Initial implementation will include the establishing a State Leadership team, a Regional Leadership Team that meets regularly, establish data systems, and determine the schedule of Cohort sites to implement parts of the of the model with fidelity. To support sustainable professional development infrastructure, Montana contracted with NCPMI and Rob Corso to develop train the trainer E-modules for Bringing the Pyramid Model to Early Intervention: Training the Trainers to Deliver Pyramid Model Practices and deliver a 2-day Pyramid Model training to all Part C providers whether in person or virtual. Regional Part C staff will have access to the modules on the same platform as the CSPD modules to support onboarding of new staff and coaching. Additionally, to fully implement the practice of the Pyramid Model with fidelity, regional coaches will be identified to support local implementation and the use of fidelity tools to measure practice and inform coaching FSS. FSS’s will continue to use the ASQ-SE and reflective practice data to inform their own practice and develop IFSP goals to improve child and family outcomes. Montana will provide an annual statewide training on the use DEC Recommended Practices to build capacity of families.
Montana intends to move towards full implementation and with all the elements of the infrastructure is in place to support high fidelity implementation. The State Leadership team will plan for and provide support for the expansion of infrastructure to scale up to include both Cohorts to reach supported high-fidelity implementation and determine how to sustain high-fidelity implementation over time.

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

Pyramid Model for promoting social emotional competence in Infants and Young Children
Pyramid Model Practices
Practice Based Coaching
Reflective Practice

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

Pyramid Model Framework: Montana implemented The Pyramid Model; The Pyramid Model is a conceptual framework of evidence-based practices for promoting young children’s healthy social and emotional development. Because the PM consists of Family Support Specialist implementing practices in homes with families to build their capacity to support their child’s social emotional development, in turn, this practice will increase the percentage of infants and toddlers with IFSPs who demonstrate improved positive social and emotional skills including positive relationships by the time they turn three or exit the program.

Pyramid Model Practice: The identification of evidence-based practices that would:
• Promote the social and emotional outcomes of all children,
• Promote the skill development of children with social, emotional, and behavioral delays to prevent the need for more intensive supports; and
• Intervene effectively when children have persistent challenging behavior.
PM practices were identified through a systematic review of the research on promotion, prevention, and intervention practices that have been associated with positive social emotional outcomes and decreases in challenging behavior in young children with and without disabilities.
The five primary principles for using the Pyramid Model in Part C Pyramid are:
(1) collaborative partnerships, (2) family coaching strategies, (3)responsive caregiving and nurturing, responsive relationships, (4)confidence and competence, (5)prevention of challenging behavior
Key practice areas are (1) Building Partnerships with families, (2) Social Emotional Development, (3) Family Centered Coaching, (4) Dyadic Relationships, (5) Supporting Families with Children with severe, persistent behavior, (6) Social Emotional Assessment.
Practices are aligned with the relevant Division for Early Childhood (DEC) Recommended Practices (2014) and Principles of Early Intervention2.
The practices are expected to look different across families, caregivers, and early interventionists.

Practice-Based Coaching :(PBC) is a professional development strategy that uses a cyclical process to promote social emotional outcomes for all children and promote family engagement in their child’s social emotional development
 This process supports the FSS use of effective practices, building families capacity to promote their child’s learning and the development social emotional skills that lead to positive outcomes for children and occurs in the context of collaborative partnerships.

Reflective Practice: Reflective practice is the cycle of ongoing learning that occurs when early childhood professionals take the time to stop, think, challenge, and change their practices to incorporate new understandings and advance children’s learning and development. It occurs spontaneously as well as in essential planned reflection time. Most importantly, reflective practice leads to action.

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

Pyramid Model Framework: Pyramid Model Framework consists of Family Support Specialist implementing practices in homes with families to build their capacity to support their child’s social emotional development, in turn, this practice will impact Montana’s SiMR; increase the percentage of infants and toddlers with IFSPs who demonstrate improved positive social and emotional skills including positive relationships by the time they turn three or exit the program.
Pyramid Model Practice: Within the implementation of establishing the Pyramid Model Framework, Montana will implement the use of Pyramid Model practices to promote the social and emotional outcomes of all children, promote the skill development of children with social, emotional, and behavioral delays to prevent the need for more intensive supports; and intervene effectively when children have persistent challenging behavior.
Family Support Specialist will implement the pyramid model practices with fidelity in the home to build the families capacity so that families can enhance their child’s social emotional development.
Because families’ needs are dynamic, practices are changed to accommodate all levels of support, FSS will build collaborative partnerships with all families, use family coaching strategies to meet the needs of caregivers, providing families with knowledge and skills related to responsive and nurturing relationships, build families confidence and competence in supporting their child’s social emotional development and provide families with tools and strategies that address and focus on the prevention of challenging behavior.
Montana is confident that by building the capacity of families to promote their child’s social emotional development will impact our SiMR and increase the percentage of infants and toddlers with IFSPs who demonstrate improved positive social and emotional skills including positive relationships by the time they turn three or exit the program.
Practice Based Coaching: The use of Practice Based Coaching promotes the Family Support Specialist effective use of Pyramid Model Practices in their work with families, and additionally, PBC framework and essential coaching components support implementation of FSS practices as intended. Pyramid Model in Part C promotes the following:
• Support for the early interventionist
• Early Interventionist build families capacity
• Families enhance children’s social emotional development
 By implementing the PBC model to build the the fidelity and quality of the FSS to implement effective practice, we expect to generate improved child outcomes in social emotional development impacting Montana’s SiMR, which is to increase the percentage of infants and toddlers with IFSPs who demonstrate improved positive social and emotional skills including positive relationships by the time they turn three or exit the program, as it has been effective in improving FSS’s practice to coach the family’s and build capacity to support their child’s social emotional development.
Reflective Practice: Montana intends to use reflective practice to engage in the process for continuous improvement to reflect on actions, determine the effectiveness of actions (practice) develop a plan, consider immediate & future situations. Since reflective practice consist of FSS working with the families to develop strategies that can be used to support their child’s development, this practice is intended to have a positive impact on Montana’s SiMR by increase the percentage of infants and toddlers with IFSPs who demonstrate improved positive social and emotional skills including positive relationships by the time they turn three or exit the program.

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

The fidelity of implementing CSPD is measured by the Family Support Specialist completing a pre-self-assessment to measure their content knowledge and a post self-assessment to measure their content knowledge after completion of the module. The fidelity of CSPD learning module adult learning principles is measured by the the evidence of content knowledge gain after completion of the learning module. Self-assessment data will be shared with the FSS’s coach and or mentor and used to inform their coaching plan. Additionally, coaches will use fidelity tools such as related DEC Practices Improvement tools to help practitioners implement evidence-based practices and related checklist to help improve skills and inform coaching plan goals and thus supporting practice change with the FSS’s.
Statewide Implementation of the Pyramid Model Framework includes a variety of measurement tools to collect data and monitor the fidelity of infrastructure to support practices. The use of data-based decision making is key in implementation, with measures and evaluation procedures to help determine fidelity of implementation and fidelity of intervention practice. State, regional, and local leadership teams will use the Benchmarks of Quality to assess infrastructure development and support, Coaches and Family Support Specialist will use the Early Intervention Pyramid Model Practices Fidelity Instrument to assess intervention practices fidelity in the home with the family. EPPFI Practices are aligned with the relevant Division for Early Childhood (DEC) Recommended Practices (2014) and Principles of Early Intervention2.
Montana will use Ages & Stages as a screener to measure social emotional development which will drive social emotional outcomes and in turn Pyramid Model practices. As Implementation advances, data collection will be examined for alignment in the need for measuring fidelity of implementation and child outcomes. In addition, systems, and procedures for collecting data will be established.

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

Additional data was collected anecdotally from Montana’s five regional contractors that makeup a variety of workgroups and participate on the Regional Social Emotional Leadership team and Part C Leadership team. During the onsite monitoring visits, feedback was given that the current EBP Routines Based Interviewing and Sheldon & Rush Coaching in Early Childhood proved cumbersome to administrate, especially virtually, and that it was observed that Family Support Specialist provided questions in a rote manner and therefor not engaging with families as intended. The SE Leadership team held discussion and made the decision to continue with the current EBP and begin implementation of the Pyramid Model Framework to further support FSS’s practice and build capacity in families to enhance their child’s social emotional development.

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

Montana’s selected evidence-based practices support an infant or toddlers social and emotional development recognizing the infants or toddlers needs and family’s capacity to support these needs. Each practice identifies the key component of social emotional development in infants and toddlers, positive relationships with caregivers and support development in the context of the family. The practices impact the social emotional development of infants and toddlers with disabilities by strengthening the capacity of families to support their child’s social and emotional development.
As Montana begins to work towards establishing the Pyramid Model Framework, we will be working primarily on infrastructure; continuing module development for CSPD, putting in to place coaching and reflective supervision supports to build infrastructure, and developing a Pyramid Model implementation road map. Specifically next steps for EBP’s include providing a 2-day Pyramid Model Practices Training, participating in this training will lead to FSS’s developing an awareness of practices to support social emotional development. Practiced Based Coaching training will be provided to identified coaches to support FSS’s in the implementation of PM practices in the home with families. The development of Train the Trainer Part C Pyramid Model E-Modules is part of building infrastructure support working towards sustainable training for new staff. Montana will continue to embed adult learning principles and the DEC Recommended Practices in CSPD learning module development, self-assessment tools will be used to measure content knowledge growth pre and post learning module completion. Coaches will use the self-assessment data and the DEC Recommended Practice checklist to inform the development of goals and identify coaching strategies to support FSS to understand and improve practice, plan intervention and self-evaluate their use of evidence-based practices. DEC RP training will be held annually to support this professional development infrastructure while learning modules are developing. Reflective practice in relationships profoundly affect the quality of services provided by FSS and promotes self-awareness, careful and continuous observation, and respectful, flexible responses that result in reflective and relationship-based support with the families. Montana uses reflective practice as a form of ongoing learning as FSS examine what happens in their settings and reflect on what they might change or adjust in their home visit with the families. Each contractor includes the practice of reflective supervision to coach and support FSS’s to implement high quality practice to impact child and family outcomes.

**Describe any changes to the activities, strategies, or timelines described in the previous submission and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.**

Montana continues to bridge activities from the previous SSIP with expanded strategies in the new SSIP. The activities we completed over the last five years built the foundation for us to expand our efforts in the following Improvement Strategies:
Improvement Strategy #1
Develop a comprehensive System of Personnel Development to ensure that highly qualified personnel are providing early intervention services
Improvement Strategy #2
Establish Montana’s Part C Pyramid Model Framework

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups. Target Setting Survey results are available on the Montana Milestones website at https://dphhs.mt.gov/ecfsd/childcare/montanamilestones/partcreports.

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

MT engaged Family Support Specialist as content specialist to assist in the development of learning modules through review and piloting the completed modules.
The State Part C Coordinator kept stakeholders informed about Montana’s SSIP activities by actively participating in a variety of collaborations and initiatives at the state level such as the State Advisory Council, The 0-5 Statewide Early Childhood Initiative, and Special Education Council. To further help with implementation efforts, all stakeholder groups met virtually at least monthly, with the FSSAC meeting quarterly. Stakeholder groups are made up of a variety of the following representatives: Part C Coordinator, the Part C Early Childhood Specialist, Bureau Program Manager, Bureau Chief, FSSAC parent representatives and other agency discipline representatives, Leadership team comprised of Part C contractors administrators and chosen team members, Family Support Specialist, and FSS Supervisors, Intake Coordinators, technical assistance providers, and the data management Stakeholder/Workgroup.
Montana’s Family Support Coordinating Council (FSSAC) was also used to seek broad stakeholder input regarding Montana’s SiMR and ongoing SSIP improvement strategies. Quarterly meetings with the FSSAC were held on 03/26/21, 09/10/21, 10/01/21,12/03/21 and 01/14/21. During these meetings, information and data about the progress being made toward the SSIP outcomes was shared to help make data-driven decisions about the SSIP activities, particularly those related to professional development and Child outcomes in social emotional development. At the meetings on 10/01/21 and 12/03/21, FSSAC members were provided with an update on Montana’s Part C Child Find for FFY20. After being presented with the Child Find data, FSSAC members were asked for their input on ways to continue increasing the number of children and families receiving Part C services in FFY21. During the meeting on 12/03/21, the FSSAC members were also tasked with providing input on Montana’s use of additional funding for Part C through the American Rescue Plan Act (ARPA). These discussions focused on identified buckets, actions associated with the buckets, impact on current programming. Additional Stakeholder input was gathered through Montana’s Legislative Oversight Committee and the ECFSD Leadership team. Additional meetings with the FSSAC were convened on 12/3/21 and 01/14/22 to allow more time and opportunity to seek broad stakeholder input with the target setting process and, in addition, analyze the SSIP data and identify improvement strategies. Following the meeting on 12/03/21, the FSSAC members provided their input via an electronic survey through Survey Monkey on the target setting process. During the FSSAC meeting on 01/14/22, review of the Annual Report data, identified targets and the progress of the SSIP was shared for any additional feedback.
Broad Stakeholder Input:
Input addressing all indicators was gathered via existing virtual meetings held at least monthly from multiple groups: the Interagency Coordinating Council, the Family Support Services Advisory Council (FSSAC) as well as the Part C Leadership Team (core working group), subgroups from the Leadership Team (work groups), and the administrative advisory team made up of the Part C Coordinator, Part C Program Specialist, and the Unit’s managers. To specifically engage parent members as well as early intervention service providers, agency representatives, higher education representatives, agency directors and Family Support Specialists/Service Coordinators in target setting, data analysis, developing improvement strategies, and evaluating progress, the following actions were taken: virtual meetings beginning October 1, 2021 through January 19, 2022 with the FSSAC, Part C Leadership Team, administrative team; onsite visits with the five Part C Program providers in October and November 2021; specific Indicator data analysis meetings; target setting survey distributed to all groups; and the dissemination of the survey results and rationale for proposed baseline and target decisions to the various stakeholder groups.
The number of parent members attending stakeholder meetings: 6
The social emotional leadership team comprised of regional representatives from all five contractors met quarterly in 2021 to guide the direction of the implementation of the Pyramid Model framework. This team now meets monthly as a Pyramid Model Leadership Team with ECTA technical assistance specialist Jani Kozlowski and Denver University Pyramid Model technical assistance, Alissa Rausch and Benjamin Riepe.
Regional Contractors Family Support Specialist contributed as content specialist to review and pilot CSPD modules as they are developed.
In developing the data management system, Family Support Specialist and FSS Supervisors met weekly with the development team to provided expert feedback on the development of forms, processes, and training manuals.

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

NO

**Additional Implementation Activities**

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

n/a

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

n/a

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

n/a

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

n/a

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, but OSEP cannot accept that baseline revision because the State's FFY 2019 baseline data reported in the Historical Data table is not consistent with the State's FFY 2019 data reported in Indicator 3 FFY 2020 SPP/APR Data table. Additionally, OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State’s end targets for FFY 2025 reflect improvement over the State’s baseline data, given the discrepancy in the baseline data, as noted above.

The State did not provide numerator and denominator descriptions in the FFY 2020 data table. The State must provide the required numerator and denominator descriptions for FFY 2021 in the FFY 2021 SPP/APR.

## 11 - Required Actions

The State did not provide targets, as required by the measurement table. The State must provide the required targets for FFY 2020 through FFY 2025 in the FFY 2021 SPP/APR.

If the State chooses to revise its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table.

# 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:**

Wendy Studt

**Title:**

Part C Coordinator

**Email:**

wstudt@mt.gov

**Phone:**

4064445647

**Submitted on:**

04/26/22 3:36:13 PM

# ED Attachments

  