**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**

**New Hampshire**

U.S. Department of Education seal

**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**

New Hampshire (NH) Department of Health and Human Services (DHHS) is the lead agency for the NH Part C system. Within DHHS, the Bureau for Family Centered Services (BFCS), as an agent for the Bureau of Developmental Services (BDS), takes responsibility for all required components of IDEA, federal, and state mandates related to Part C, known in NH as Family Centered Early Supports and Services (FCESS). There are 10 Area Agencies that oversee developmental services in the 10 geographical regions of NH. The 10 agencies contract with the NH Bureau of Developmental Services (BDS) to provide FCESS. Under the supervision of the Area Agencies there are 15 FCESS local programs with a total of approximately 212 staff employed or contracted by the local programs. The Bureau for Family Centered Services (BFCS) acts as an agent for BDS and is tasked with ensuring the quality, flexibility, and responsiveness of services and supports statewide by; (a) monitoring effectiveness, (b) incorporating data, and (c) incorporating feedback from families, service providers and communities into systemic decision making.  
  
FCESS strives to ensure that all children and families are respected for their unique individual beliefs, values, and culture. Anyone with a concern about a child’s development can refer a child to determine eligibility for services. FCESS activities are family centered, using a coaching model and evidence based practices to build the capacity of a child's family and/or caregiver to help the child learn and grow to their full potential. Families are engaged from the start to plan, evaluate, and implement individualized strategies, with the support of caring and highly qualified professionals. Services are provided in the child’s natural environment. This means that strategies are designed to be integrated into the child’s everyday routines and interactions. Research shows that this is how young children learn best.   
  
The US Department of Education (US DOE), Office of Special Education Programs (OSEP) determines indicators for statewide early intervention (IDEA Part C) programs to ensure equitable, timely, and quality services for all eligible children and families. New Hampshire state rules (He-M 510 and He-M 203) reinforce the importance of compliance with the OSEP indicators. The purpose of this report is to illustrate the FCESS compliance with federal indicators of quality during the period of 7/1/20 to 6/30/21 (FFY20).   
  
BFCS and FCESS State Office staff provide the supervision required by the federal government to administer the Part C grant. Area Agencies and local programs are monitored to ensure that eligible children and families are receiving high quality services, in compliance with state and federal regulations governing FCESS. The New Hampshire rules governing FCESS are available at http://www.gencourt.state.nh.us/rules/state\_agencies/he-m.html. The data and narrative contained within this report, illustrate how FCESS has performed, according to the national standards for Part C.   
  
The data in this report was collected using; (a) the NHLeads data system, (b) the national census, (c) state birth cohort data, and (d) the Family Outcome Survey. The compliance data was verified through a virtual monitoring process. The data from the NHLeads system paired with qualitative input from families, staff, and stakeholders informs our systemic decisions. Training on data entry and using data for decision-making continues to improve data reliability and validity for the FCESS statewide system.   
  
Due to the COVID-19 Pandemic, the Part C State Office staff were unable to conduct on-site monitoring for this FFY20 reporting year. Although the pandemic did not have a significant impact on data collection, the state does believe it did have some impact on data results specifically for Indicators 3 (child outcomes) and Indicator 4 (family outcome survey) in relation to varying service delivery methods and response rates. The pandemic also influenced the mode in which the state was able to engage stakeholders in data analysis activities but was successful via email and virtual meetings.

Additional information related to data collection and reporting

NH did not achieve the target of 100% compliance for the following indicators: 1 (timely services), 8a (early childhood transition), 8b (notification to the LEA and SEA), and 8c (transition conference). Although NH did not achieve 100% in Indicators 1, 8a, 8b, and 8c, no slippage from FFY19 to FFY20 data was observed. NH did achieve 100% compliance for Indicator 7 (45-day timeline). For the results indicators, data for Indicator 2 (natural environment) showed NH did meet the target and identified an increase in families requesting services at home via telehealth. NH also met targets for Indicator 3 (child outcomes) and Indicator 4 (family outcomes) due to stakeholder involvement with setting new 2020-2025 targets beginning with FFY20 current data. NH also set 2020-2025 targets for Indicators 5 (child find birth-one) and 6 (child find birth-three) beginning with FFY20 current data. Indicator 9 (hearing requests) and 10 (mediation) data showed that no complaints were elevated to resolution or mediation sessions. Overall, the FCESS system performed well this year in areas of child find, compliance, and quality service provision.

**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.**

New Hampshire (NH) Department of Health and Human Services (DHHS) is the lead agency for the NH Part C system. Within DHHS, the Bureau for Family Centered Services (BFCS), as an agent for the Bureau of Developmental Services (BDS), takes responsibility for all required components of IDEA, federal, and state mandates related to Part C, known in NH as Family Centered Early Supports and Services (FCESS). The state is divided into ten regions in which each have an Area Agency (AA). The AAs contract with BDS to provide FCESS in their regions through their own local program or subcontracts with a vendor. There are currently 15 local FCESS program sites. BDS has oversight of the AAs providing a liason during the IDEA monitoring process along with contract negotioatons. The Part C State Office provides oversight of the FCESS programs along with ensuring the IDEA Part C requirements are met. Technical assistance is also provided to local programs throughout the year.   
NH implements IDEA through state administrative rules, He-M 510 http://www.gencourt.state.nh.us/rules/state\_agencies/he-m500.html and He-M 203 http://www.gencourt.state.nh.us/rules/state\_agencies/he-m200.html. The rules guide decision-making at all levels of the Part C FCESS system. The ten AAs, through their local FCESS programs or vendor programs, take referrals, complete evaluations, and provide services to eligible children. Monitoring of the 10 AAs and the 15 local programs is done by BDS, Part C State Office, and BFCS through the data system and site visits.   
  
NH’s statewide data system referred to as NHLeads is used to collect individual child data for federal reporting purposes, quality improvement, & system planning. The NHLeads data system is accessed by local FCESS programs, AAs, Part C State Office, and BDS. Data for 618 and this Annual Performance Report (APR) comes from NHLeads and electronically submitted documentation. Validity and reliability of data is addressed by; (a) assigning responsibility for the entry and accuracy of the information to local administrators, (b) reviewing data for completeness prior to generating a report, (c) BDS/Part C State Office review of data to monitor compliance and accuracy, (d) triangulating the data entered into the statewide data system with review of child records and program self-review data, and (e) analyzing data trends to identify patterns or inconsistencies. Technical assistance and training is provided to ensure accurate data entry. BDS maintains a formal agreement with a consultant who is knowledgeable about the data system to provide technical assistance regarding use of the system as well as manage it.  
  
Part C State Office monitoring review teams verify the accuracy of information and data collected through the NHLeads system during record reviews. Record reviews are done for all programs annually. Part C State Office staff use NHLeads to monitor timely entry of data, compliance with federal indicators and the completeness of the data entries. The Part C State Office runs the NHLeads timely service and transition monitoring reports, identifies random samples, and identifies any discovery of noncompliance. If a discovery of noncompliance is identified, the Part C State Office reviews documentation within individual child records to confirm or deny issuing a ‘Finding’ of noncompliance. Programs issued a finding of noncompliance are expected to formulate a Corrective Action Plan (CAP). The program staff, director, AA FCESS management, and Part C State Office staff monitor data to ensure that the CAP is successfully completed. The program is required to show 100% compliance within one year of receiving a finding. The Part C State Office staff reviews, with the FCESS program director and AA FCESS management, the overall findings of their monitoring activities. Within 3 months of the monitoring assessment, program directors, AA FCESS management, and BDS liaisons receive a formal summary report of the program’s monitoring determinations from the Part C State Office.  
  
The "Know Your Rights" booklet is NH's family friendly description of the state rule He-M 203, complaint resolution process. The booklet is used to enhance and standardize provider explanations of family rights and dispute resolution processes and other procedural safeguards. A printed or electronic copy of the “Know Your Rights” booklet is offered and explained to families at intake and each IFSP meeting. During the COVID-19 pandemic, printed copies of the booklet have been mailed to families. Families can request further information or a copy of the booklet at any time. All FCESS staff are required to read and document understanding of the "Know Your Rights" booklet as part of the "Welcome to FCESS" mandatory training. Local program staff, AA staff, and Part C State Office staff are available to assist families in understanding their rights. The Parent Information Center (PIC) and NH Family Voices (NHFV) work collaboratively with families, the Part C State Office, and local FCESS staff to ensure that families throughout the state understand their rights. The majority of complaints in NH are resolved at the local program or AA level. If a complaint reaches the Part C State Office level, families are offered assistance with formal or informal resolution, as they choose. Parents are always given the option of placing a formal complaint immediately or at any time in the resolution process. A list of trained hearing officers and mediators is maintained by the State Office. Hearing officers and mediators are provided with training that orients them to the IDEA Part C laws, He-M 510 and He-M 203 state rules, structure of the system, and foundational ideals of FCESS. AA and FCESS program directors are expected to review procedural safeguards information with their staff annually. Evidence of annual staff trainings is provided to the Part C State Office as part of the annual monitoring process.

**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.**

Information about training and technical assistance (TA), designed to address; (a) concerns, (b) changes, (c) updates, (d) missing data, and (e) upcoming reports, etc. is given to AA and local program directors to disseminate to their staff. Contact information for the Bureau of Developmental Services (BDS), Part C State Office staff and other statewide resources are in the FCESS program directory. Contact information is updated quarterly or more often if changes arise and disseminated to all members of the system verbally, in print, and electronically. The statewide program directory is posted on the DHHS FCESS website https://www.dhhs.nh.gov/dcbcs/bds/earlysupport/documents/directory.pdf.   
  
An important element of NH's TA system is the statewide data system, which is used to help programs, AAs, and the state lead agency to improve quality. It provides direct service providers and AAs the opportunity to enter, access, and analyze data directly. Data from this system is used for public awareness and ongoing quality improvement. Individualized training and coaching on use of the data system is available to all FCESS staff through the Part C State Office, by request, or when there is a determination of need.   
  
Statewide training and TA is developed with input from relevant stakeholders. Information about how to access TA is regularly articulated to staff at all levels of the system through verbal, printed, and electronic means. System training is articulated in the state rules, area agency/BDS contracts, and formal written guidance.  
  
Targeted TA is provided when a need is identified or when requested. Statewide training is available to increase knowledge of requirements through online modules, site or remote visits, quarterly meetings, reoccurring training, or individualized coaching.   
  
Requests for TA are responded to promptly and collaboratively. State leadership works with local programs to maintain system quality and consistency. There is a focus on data based decision-making, peer discussion, and implementation of effective practices. State leadership, area agency staff, local program staff, and other early childhood partners regularly share information and developments in our state through; (a) in person conversation, (b) documentation, (c) email, (d) phone, (e) group work, (f) shared access to e-studio documents, (g) data reports, (h) data displays, (i) stakeholder meetings, (j) committee work, and (k) quarterly meetings with local FCESS directors.

**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 current comprehensive system of professional development (CSPD) is aligned with the FCESS State Systemic Improvement Plan (SSIP) and other early childhood initiatives. Each program in the FCESS system is, by state rule, engaged in a continuous quality improvement planning process. System capacity for ongoing training and coaching support has been improved through the SSIP process in collaboration with Early Childhood Technical Assistance Center (ECTA), The Center of IDEA Early Childhood Data Systems (DaSy), and other OSEP affiliated technical assistance partners. FCESS is engaged in the following evidence-based practices related to the SSIP: Diversity & Cultural Competence (D&CC), Child Outcome Summary (COS), and Sustainable Early Engagement for Change (SEE Change). State Level Leadership teams include technical support, staff, and other stakeholders. These groups work together to plan, implement, evaluate, and adjust implementation of the SSIP initiatives.  
1. Initial D&CC training was completed by all FCESS programs in FFY16. This training continues to be provided two to three times a year for new FCESS staff, statewide, as a requirement to be completed within the first year of hire.   
2. All FCESS programs completed the COS training during FFY17. This training continues to be provided two to three times a year for new FCESS staff, statewide, as a requirement to be completed within the first year of hire. Refresher trainings have been provided to programs during FFY20.   
3. Work on the SEE Change Project to improve child and family engagement through the Division of Early Childhood (DEC) Recommended Practices continues. During this FFY20 reporting period, three local programs completed trainings and implementation. Five additional programs completed Adult Learning Strategies training. Local programs are provided coaching on an ongoing basis by the SEE Change State Leadership team. Data is being collected to evaluate the effects of increased family engagement on child outcomes through the SSIP.   
  
At the state level, funds are designated annually for training and technical assistance, through the Comprehensive System of Personnel Development (CSPD) budget. Line items within the current annual budget identify SSIP practices and current areas of system improvement, to bolster implementation and sustainability of those efforts.  
  
The FCESS system is engaged in improvement activities in addition to the SSIP work. Stakeholders are key partners in the development and monitoring of these improvement activities. Stakeholders include but are not limited to state and local FCESS staff, Parent Information Center (PIC), Bureau for Family Centered Services (BFCS), national technical assistance centers, child and family advocates, Bureau of Developmental Services (BDS) management, Office of Health Equity, and early childhood system partners. Stakeholder work groups are engaged in system improvement, planning, and evaluation related to; (a) improving the efficiency and effectiveness of the data system, (b) improving implementation of supports for all children in the FCESS system (c) fiscal planning, (d) statewide consistency of effort, (e) efficiency of monitoring, and (g) authentic integration of stakeholder input with lead agency decision making. FCESS staff at the state, Area Agency, and local program levels participate in work to inform other systems such as Early Hearing Detection and Intervention (EHDI), Home Visiting, child care, Early/Head Start, policy, funding, and more.  
  
"Welcome to Early Supports and Services" (WESS) orientation is scheduled several times per year. NH state rule mandates that all new staff must complete the online modules, review information with their supervisor, and attend a half day orientation within 6 months of hire. Faculty for this orientation includes parents who have experienced FCESS services in NH, program directors, Part C State Office staff, and Area Agency staff.  
  
The Part C State Office staff meets with new program directors within the first six months of hire to orient them to requirements and expectations of their new role in the system. An Orientation Manual for New Directors was completed this year to include He-M 510 and He-M 203 state rules, guidance documents, helpful links to ECTA and DaSy websites, and more. Quarterly meetings for local FCESS staff also include training and collaborative work. Qualifications and training expectations are documented in the state rules for Part C NH, He-M 510.   
  
The Comprehensive System of Professional Development (CSPD) also supports:  
1. Early Intervention Specialist Certification, providing a clear career path for FCESS staff. Validators for this certification are coordinated by the Part C State Office.  
2. Mentorship opportunities that are coordinated by the Part C State Office. This arrangement provides FCESS staff with the opportunity for one-to-one and topical mentorships, based on the needs of staff and system.  
3. Quality CSPD opportunities and insuring that the needs of families, state, and system are met. This responsibility is shared with and maintained by Part C State Office staff, Area Agencies, and FCESS program staff.   
4. Using data to generate initiatives, strategies, and training opportunities that support the broad range of personnel development in collaboration with other sate agencies. Collaborations this past year included Pyramid Model Statewide system planning, statewide systems work with; (a) NH Council for Thriving Children, (b) NH Association on Infant Mental Health (NHAIMH), (c) Partners in Health (PIH), (d) Office of Health Equity (OHE), (e) Parent Information Center (PIC), (f) New Hampshire Family Voices (NHFV), (g) NH’s Title V programs, (h) New Hampshire Department of Education (NH DOE), and (i) other systems that benefit children and families.

**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).**

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

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

YES

**Number of Parent Members:**

10

**Parent Members Engagement:**

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

Through stakeholder ICC meetings, New Hampshire engaged parent members in collecting input and recommendations to set targets, analyze data, develop improvement strategies, and evaluate progress. Parents of previous FCESS children are NH’s ICC Chair and Vice Chair Officers. The ICC has recently increased parent participation during FFY20 to include four parent members out of the member group of 16. Families are supported to participate on the ICC by reimbursement for mileage and childcare to participate in meetings, work groups, and other ICC activities. Two parent representatives are also supported for their participations in "Welcome to ESS" (WESS) orientation, and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC. The Part C Office works collaboratively with NH Parent Information Center (PIC), our state parent center, as well as Family Voices, which is NH’s parent advocacy center. Their parent networks review and analyze data and report feedback to the Part C Office staff at bimonthly stakeholder meetings.   
  
The Part C State Office provides parent stakeholders data via email to review prior to meetings. Parent stakeholders are encouraged to submit questions via email or phone and attend a 30 minute session prior to scheduled ICC meetings for clarification and questions. State staff explain individual data points, the purpose of analysis, and the desired outcome. The Part C State staff reviews progress of data towards the intended outcome with all stakeholders. Although parent input and feedback is encouraged, this continues to remain an area for improvement in NH.

**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.**

The Part C Office staff works to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcome for infants and toddlers with disabilities and their families by collaboratively working with local programs to encourage local family participation in Part C initiated professional development trainings for all local program staff including “Welcome to ESS” orientation, Sustainable Early Engagement for Change (SEE Change), and the Child Outcome Summary training. Families are supported to participate on the ICC by reimbursement for mileage and childcare to participate in meetings, work groups, and other ICC activities. Families are also supported for their participations in all FCESS professional development trainings, and other times when stakeholder input may be collected. Distance participation is available with technology, video conferencing, email, public hearing, and phone calls.   
  
Increasing the capacity of diverse groups of parents, it is anticipated that Part C providers will increase their understanding of diverse parent beliefs, culture, and priorities. This increased understanding will provide providers the ability to rate an individual child’s COS to reflect their progress towards same age peers within their culture.

**Soliciting Public Input:**

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

NH solicits public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress though publically held Interagency Coordinating Council (ICC) meetings. These bimonthly meetings are publically posted at https://www.dhhs.nh.gov/dcbcs/bds/icc/meetings.htm.The public has the opportunity to provide feedback and recommendations during these meetings. All meeting minutes are posted after approved by the ICC members. These meetings are currently held virtually to increase public participation.   
  
Stakeholder groups were provided data for setting targets with explanation via email approximately two weeks prior to scheduled meetings for their review. Following review analysis of data and trends, stakeholders were encouraged to provide any additional feedback via phone or email within the following month of meeting.

**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.**

NH publicly posts all approved Interagency Coordinating Council (ICC) meeting minutes at https://www.dhhs.nh.gov/dcbcs/bds/icc/meetings.htm. These minutes include all public input. Minutes are reviewed and voted on for approval during the beginning of each following ICC meeting. The Part C Office staff responds to questions raised by ICC members and the public in response to minutes reviewed. The Part C Office uploads approved minutes to the website within 15 days.

**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.**

The State Performance Plan (SPP) Annual Performance Report (APR) for each monitoring period is posted on the DHHS Lead Agency website on the FCESS page no later than 120 days following OSEP approval. The performance of each program is incorporated into the SPP/APR for public reporting. The FFY19 APR annual report to the public, reporting on the period of July 1, 2019 to June 30, 2020 was made available electronically, through e-mail, and was posted on the FCESS website: https://www.dhhs.nh.gov/dcbcs/bds/earlysupport/index.htm. Hard copies were also available from the Part C State Office by contacting Nicole Bushaw via phone 603-271-6711 or email Nicole.M.Bushaw@dhhs.nh.gov. The report was discussed at all stakeholder meetings.  
  
The Part C State Office staff disseminates the APR report, other performance information, training information, and updates electronically and at quarterly meetings, to FCESS program directors and representatives of the AAs. FCESS program directors then disseminate information to direct service providers and families, as appropriate. In addition, notice is given to the media for statewide distribution specifying where copies can be obtained. Copies of materials are available through BDS, the Part C State Office, New Hampshire Family Voices (NHFV), and the Parent Information Center (NH PIC). Local program data for compliance FFY20 indicators is publicly posted at https://www.dhhs.nh.gov/dcbcs/bds/earlysupport/documents/fcessprogcomp20-21.pdf. The ICC is also kept aware of FCESS activities and performance on an on-going basis.

## Intro - Prior FFY Required Actions

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

## Intro - OSEP Response

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

## Intro - Required Actions

# 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 | 88.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | NVR | 97.67% | 100.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 472 | 495 | 100.00% | 100% | 99.80% | Did not meet target | No Slippage |

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

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

22

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

Twenty-two infants and toddlers with IFSPs received delayed services due to exceptional family circumstances (EFC). Documented EFCs reviewed and verified by the state Part C office included: parent not returning calls to schedule, families cancelled timely scheduled visit, families requesting to reschedule beyond the projected start date, family no-show timely scheduled visits, and child with multiple medical appointments. Although delayed, all 22 services were provided with parental consent at a time that was convenient and agreed upon by the family. One service was provided 4 days past the projected start date due to the provider offering dates to schedule visit after the projected start date identified in the IFSP.

**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).**

New Hampshire's (NH’s) Family Centered Early Supports and Services (FCESS) criteria for compliance with Indicator 1, Timely Services, is defined as any early therapeutic intervention service identified in the initial IFSP and any additional early therapeutic intervention services identified in subsequent IFSPs, consented to by the parent, are initiated by the projected start date identified in the IFSP. Parent/Guardian indicates agreement with the projected start date when providing their consent signature. The projected start date is agreed upon and identified by the IFSP team, which includes the parent/guardian when developing the IFSP. The projected start date is expected to be no more than 30 days from the IFSP consent date unless documented family circumstances requires more than 30 days.

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

State monitoring

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

All 15 NH Part C FCESS local programs are monitored using the NHLeads state database system throughout the year. Each local program was requested to provide a random sample of documents to verify that information in the data system is valid and reliable. The Part C State Office monitoring team reviewed a Timely Service Monitoring report (including the months of July – November) for each local program. The Timely Service Monitoring report indicates the projected start date of therapeutic intervention services and the actual start date the services identified in the IFSP were provided. If a discovery of noncompliance is identified in the report, local programs are required to submit documentation from the child’s record to support non-compliant reason or documented late reason in data system as to reason for the noncompliance. If an acceptable reason for service delay is not provided, a finding of noncompliance is issued. The program with a finding of noncompliance must then engage in a corrective action plan process that includes one year of quarterly monitoring. Technical assistance is provided to local programs by the Part C State Office staff to ensure successful correction of noncompliance.  
  
Targets for Indicator 1 is 100% compliance for all local FCESS programs in NH. The state included in its calculation the number of children for whom the state identified the cause for the delay as exceptional family circumstances documented in the child’s record. NH did not meet its target of 100% compliance for FFY20. NH achieved 99.80% compliance for FFY 20 reporting through review of NHLeads data system and review of individual child documentation submitted and verified for Indicator 1. Fourteen of 15 local programs achieved 100% compliance in the data for reporting and review of individual child documentation. A finding of noncompliance was identified at one local program; Gateways Community Services achieved 97.92%. One service was provided 4 days past the projected start date due to the provider offering dates to schedule a first visit after the projected start date identified in the IFSP.   
  
In the data report sample of 495 records for FFY20 reporting, 472 were found to have received timely therapeutic intervention services and 22 had documented exceptional family circumstances (EFC) that contributed to the delay of timely receipt of services. The Part C State Office monitoring team verified EFC through review of electronically submitted case notes and phone logs. One service was provided 4 days past the projected start date due to the provider offering dates for the visit after the 30 days. Therefore, 99.80%% [(472+22) = 494] of children were considered to have received timely early therapeutic intervention services.

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

NH Part C State Office was unable to conduct onsite monitoring for FFY20 due to the COVID-19 Pandemic. The Part C State Office directed local programs to electronically submit documentation from 10 sample records to verify data reliability and for any noncompliance identified in the program’s Timely Service Monitoring report. The Part C State Office monitoring team reviewed documentation that was submitted for verification of compliance.  
  
Overall, the COVID-19 Pandemic did not affect NH’s Indicator 1 data or performance this FFY 20 reporting year. Programs were able to accommodate family’s needs by providing an array of services either remotely via telehealth or in-person.

**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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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

None

## 1 - OSEP Response

## 1 - 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 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** |
| --- | --- |
| 2005 | 99.84% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= | 98.40% | 98.40% | 98.50% | 98.50% | 98.50% |
| Data | 98.30% | 97.92% | 98.09% | 98.51% | 97.53% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 97.94% | 97.94% | 98.04% | 98.04% | 98.14% | 98.14% |

**Targets: Description of Stakeholder Input**

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

The state Part C office held stakeholder meetings with ICC on 9/10/21 and FCESS Directors on 9/29/21 to review six years, 2014-2019, of Indicator 2 data and set targets for 2020 – 2025. The Part C office provided stakeholders data for review via email prior to meetings. During meetings, review of data included average year over year growth/change and trend line forecasting. Both stakeholder groups mentioned concerns of how the COVID-19 pandemic has, and will continue to, effect providing in-person services in a natural environment during the colder months. Stakeholders agreed that families and other IFSP Team members may continue to request in-person services be provided in non-natural environments (clinics, office space) due to health and safety concerns regarding the ongoing pandemic. Based on these concerns, the average actual growth over six years (2014-2019) of -0.14%, a decreasing trend line forecasting targets, yearly state data consistently showing approximately 2% of families requesting non-natural environments, both groups of stakeholders requested 2020-2025 targets to be set as follows. Beginning with the current 2020 data, 97.94% was set as the targets for 2020 and 2021. An increase over 2021 target by 0.10% and then maintain 98.04% target for 2022 and 2023. Increase 2023 target by 0.10% and maintain at 98.14% target for 2024 and 2025. Although 2025 target of 98.14% does not show improvement over 2005 baseline of 99.84%, all 2020-2025 targets are set above 95%. OSEP Universal Technical Assistance for Federal fiscal year (FFY) 2020-2025 mentions 2025 target does not need to show improvement over baseline as long as the 2025 target is at least 95%.

**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 | 1,663 |
| 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 | 1,698 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,663 | 1,698 | 97.53% | 97.94% | 97.94% | Met target | No Slippage |

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

New Hampshire’s (NH) 618 data for reporting Indicator 2 was gathered from the NHLeads data system and reported in EMAPS. The 618 child count setting data represents children with active IFSPs at one point in time: December 1, 2020. The target for Indicator 2, services in natural environments, for FFY20 was 97.94%. The data collected on 12/1/20 indicates 97.94% of children received services in a natural environment. NH set FFY20 target with current data of 97.94% based on stakeholder input. FFY20 data increased by 0.41% in comparison with FFY19 data. Three of the 15 local programs’ data indicated an increase in the number of services delivered in other settings due to the COVID-19 pandemic. Parents and IFSP Team members determined a non-natural setting was most appropriate to allow services to be provided that followed CDC guidelines. NH statewide data shows 2.06% of children did not receive services within a natural environment. This has remained consistent in NH with an approximate of 2% over the years.   
  
NH Part C State Office was unable to conduct onsite monitoring for FFY20 due to the COVID-19 Pandemic. The Part C State Office directed local programs to electronically submit documentation from the children’s records for the random sample identified in the program’s Timely Service Monitoring report. The Part C State Office monitoring team reviewed submitted documentation for verification of acceptable justification for compliance with this indicator.  
  
During FFY20 state monitoring reviewed a sample of 9-12 IFSPs per each of the 15 programs for Indicator 2. The FFY20 monitoring review included a total of 150 individual child records. Individual child documentation reviewed showed that out of 150 children, 35 did not received services in the natural environment. The state verified through individual IFSP review that all 35 children who were not receiving services in the natural environment were due to the COVID-19 pandemic. Justification and a timeline plan to move services back to the natural environment were documented in their IFSPs.  
  
COVID-19 Pandemic did have an impact on NH’s Indicator 2 data and performance this reporting year. Children were seen more in a natural environment (via Telehealth) as many local programs had guidance in place for providing no in-home visits due to the health and safety of staff and families. Given New Hampshire’s climate, many families were seen via Telehealth during the colder months, then moved to outdoor in-person visits at their home during the warmer months.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

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

## 2 - Required Actions

# Indicator 3: Early Childhood Outcomes

**Instructions and Measurement**

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

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

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

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

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

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

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

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

**Measurement for Summary Statement 1:**

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

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

**Measurement for Summary Statement 2:**

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

**Instructions**

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

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

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

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

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

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

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

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

## 3 - Indicator Data

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

YES

**Targets: Description of Stakeholder Input**

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

The Part C State office held stakeholder meetings with Interagency Coordinating Council (ICC) on 12/3/21 and Part C FCESS Directors on 12/8/21 to review seven years, 2013-2019, of Indicator 3 Outcomes A, B and C data. Data reviewed showed a continued decrease during FFY18-20 following a statewide training event that occurred during FFY17. Stakeholders suspect current data is consistent with changes in practice that would occur when practitioners understand and more accurately apply the rating criteria. Stakeholders also reviewed the State Child Outcomes Data Profile New Hampshire Part C 2019, provided by ECTA and DaSy, which showed that NH statewide performance has moved from being more than one standard deviation above the national average to closer to the national average in all Indicator 3 outcomes after the statewide COS training. This data is indicative of increased data quality and actually a better reflection of the functioning and progress of children who have been served in New Hampshire (NH) all along.  
  
The Part C office provided stakeholders data for review via email prior to meetings. During meetings, review of data included average year over year growth/change and trend line forecasting. Due to 2013 baseline in all Indicator 3 outcomes being set prior to the statewide training event, the state and stakeholders agreed to set a new baseline for each outcome and summary statements using the current FFY20 data (see Targets table). Targets for 2020-2025 show an increase of 0.20% per year, or 1.00% over new 2020 baseline by FFY25. This rate of increase will maintain NH’s performance close to or above the current national average.  
  
Stakeholders indicated that data collected during FFY18-19 included a cohort of infants and toddlers who received COS entry ratings prior to training and exit ratings post training. FFY20 current data includes a new base cohort of infants and toddlers with entry and exit ratings post training. Therefore, FFY20 current data indicates a new starting baseline for all Indicator 3 outcomes and Summary Statements.

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

Aggregated Performance

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A1** | 2020 | Target>= | 82.89% | 82.99% | 83.09% | 83.09% | 82.70% |
| **A1** | 59.11% | Data | 79.95% | 82.15% | 74.67% | 72.24% | 65.61% |
| **A1 ALL** | 2020 | Target>= |  |  | 83.09% | 83.09% | 82.70% |
| **A1 ALL** | 59.16% | Data |  | 82.32% | 74.71% | 72.11% | 65.33% |
| **A2** | 2020 | Target>= | 71.32% | 71.42% | 71.52% | 71.52% | 71.13% |
| **A2** | 62.03% | Data | 67.84% | 67.13% | 64.06% | 63.88% | 63.80% |
| **A2 ALL** | 2020 | Target>= |  |  | 71.52% | 71.52% | 71.13% |
| **A2 ALL** | 63.32% | Data |  | 67.47% | 64.15% | 63.92% | 63.53% |
| **B1** | 2020 | Target>= | 84.00% | 84.50% | 84.50% | 85.00% | 85.26% |
| **B1** | 60.68% | Data | 84.55% | 84.88% | 79.34% | 73.88% | 66.88% |
| **B1 ALL** | 2020 | Target>= |  |  | 84.50% | 85.00% | 85.26% |
| **B1 ALL** | 58.99% | Data |  | 85.04% | 79.41% | 74.05% | 66.55% |
| **B2** | 2020 | Target>= | 67.00% | 67.10% | 67.20% | 67.20% | 68.89% |
| **B2** | 49.22% | Data | 64.15% | 64.12% | 60.59% | 54.28% | 53.76% |
| **B2 ALL** | 2020 | Target>= |  |  | 67.20% | 67.20% | 68.89% |
| **B2 ALL** | 48.44% | Data |  | 64.34% | 60.65% | 54.53% | 53.65% |
| **C1** | 2020 | Target>= | 86.57% | 86.67% | 86.77% | 86.77% | 86.38% |
| **C1** | 67.52% | Data | 83.33% | 85.41% | 81.10% | 77.33% | 70.95% |
| **C1 ALL** | 2020 | Target>= |  |  | 86.77% | 86.77% | 86.38% |
| **C1 ALL** | 67.71% | Data |  | 85.59% | 81.22% | 77.11% | 70.58% |
| **C2** | 2020 | Target>= | 72.69% | 72.75% | 72.85% | 72.85% | 72.50% |
| **C2** | 52.72% | Data | 70.34% | 69.32% | 63.97% | 60.22% | 56.98% |
| **C2 ALL** | 2020 | Target>= |  |  | 72.85% | 72.85% | 72.50% |
| **C2 ALL** | 54.24% | Data |  | 69.56% | 64.31% | 60.32% | 56.67% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 59.11% | 59.11% | 59.61% | 59.61% | 60.11% | 60.11% |
| Target A1 ALL >= | 59.16% | 59.16% | 59.66% | 59.66% | 60.16% | 60.16% |
| Target A2 >= | 62.03% | 62.03% | 62.13% | 62.13% | 62.23% | 62.23% |
| Target A2 ALL >= | 63.32% | 63.32% | 63.42% | 63.42% | 63.52% | 63.52% |
| Target B1 >= | 60.68% | 60.68% | 61.18% | 61.18% | 61.68% | 61.68% |
| Target B1 ALL >= | 58.99% | 58.99% | 59.49% | 59.49% | 59.99% | 59.99% |
| Target B2 >= | 49.22% | 49.22% | 49.32% | 49.32% | 49.42% | 49.42% |
| Target B2 ALL >= | 48.44% | 48.44% | 48.54% | 48.54% | 48.64% | 48.64% |
| Target C1 >= | 67.52% | 67.52% | 68.02% | 68.02% | 68.52% | 68.52% |
| Target C1 ALL >= | 67.71% | 67.71% | 68.21% | 68.21% | 68.71% | 68.71% |
| Target C2 >= | 52.72% | 52.72% | 53.22% | 53.22% | 53.72% | 53.72% |
| Target C2 ALL >= | 54.24% | 54.24% | 54.74% | 54.74% | 55.24% | 55.24% |

**FFY 2020 SPP/APR Data**

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

1,344

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

| **Not including at-risk infants and toddlers** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 4 | 0.31% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 344 | 26.71% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 141 | 10.95% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 362 | 28.11% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 437 | 33.93% |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 4 | 0.30% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 348 | 25.89% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 141 | 10.49% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 369 | 27.46% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 482 | 35.86% |

| **Not including at-risk infants and toddlers** | **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 | 503 | 851 | 65.61% | 59.11% | 59.11% | N/A | N/A |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 799 | 1,288 | 63.80% | 62.03% | 62.03% | N/A | N/A |

| **Just at-risk infants and toddlers/All infants and toddlers** | **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 | 510 | 862 | 65.33% | 59.16% | 59.16% | N/A | N/A |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 851 | 1,344 | 63.53% | 63.32% | 63.32% | N/A | N/A |

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

| **Not including at-risk infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 4 | 0.31% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 421 | 32.69% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 229 | 17.78% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 427 | 33.15% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 207 | 16.07% |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 4 | 0.30% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 459 | 34.15% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 230 | 17.11% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 436 | 32.44% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 215 | 16.00% |

| **Not including at-risk infants and toddlers** | **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 | 656 | 1,081 | 66.88% | 60.68% | 60.68% | N/A | N/A |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 634 | 1,288 | 53.76% | 49.22% | 49.22% | N/A | N/A |

| **Just at-risk infants and toddlers/All infants and toddlers** | **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 | 666 | 1,129 | 66.55% | 58.99% | 58.99% | N/A | N/A |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 651 | 1,344 | 53.65% | 48.44% | 48.44% | N/A | N/A |

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

| **Not including at-risk infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 1 | 0.08% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 367 | 28.49% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 241 | 18.71% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 524 | 40.68% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 155 | 12.03% |

| **Just at-risk infants and toddlers/All infants and toddlers** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 1 | 0.07% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 371 | 27.60% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 243 | 18.08% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 537 | 39.96% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 192 | 14.29% |

| **Not including at-risk infants and toddlers** | **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 | 765 | 1,133 | 70.95% | 67.52% | 67.52% | N/A | N/A |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 679 | 1,288 | 56.98% | 52.72% | 52.72% | N/A | N/A |

| **Just at-risk infants and toddlers/All infants and toddlers** | **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 | 780 | 1,152 | 70.58% | 67.71% | 67.71% | N/A | N/A |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 729 | 1,344 | 56.67% | 54.24% | 54.24% | N/A | N/A |

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

| **Question** | **Number** |
| --- | --- |
| The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting 618 data | 1,919 |
| 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. | 427 |

| **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.**

New Hampshire (NH) Part C uses the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Process (COS) process, which is a team approach for summarizing information on a child’s functioning in each of the three child outcome areas using a 7-point scale. A team can consider multiple sources of information about a child, including results from assessment, parent input, Larimer Country Age-Anchoring, and observations. Local programs enter individual child COS entry ratings into the state NHLeads data system for infants and toddlers who are at least 6 months of age and enter exit ratings for those who have been receiving FCESS for at least 6 months. The COS data report is run by the data manager or Part C Office staff for the current SSP/APR reporting year using the COS data calculator.

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

Indicator 3, Outcomes A, B and C data was reported, first, for infants and toddlers with IFSPs exiting the NH Part C FCESS program, not including those in the “At-Risk” eligibility category. This group included 1,288 infants and toddlers. NH data was reported, secondly, for all infants and toddlers with IFSPs exiting the NH Part C FCESS program, including those in the “At-Risk” eligibility category. This group included 1,344 infants and toddlers.  
  
Indicator 3, Outcome A measuring positive social-emotional skills (including social relationships) included: Summary Statement 1 (A1) measuring the percentage of those who substantially increased their rate of growth by the time they exited the program and Summary Statement 2 (A2) measuring the percentage of those who were functioning within age expectations by the time they exited the program. Local program data for A1 showed seven of 15 programs, with data between 36.26% & 57.81%, performed below the statewide data of 59.11% in the group of 1,288 infants and toddlers (excluding At Risk category). Six local programs, with data between 36.26% & 57.81%, performed below the statewide data of 59.16% in the group of 1,344 infants and toddlers (including At Risk category) for A1. Based on the 1,288 infants and toddlers (excluding At Risk category), seven local programs, with data between 40.03% & 59.09%, performed below the statewide data of 62.03% for A2. Based on the1,344 infants and toddlers (including At Risk category), eight of 15 local programs, with data between 41.32% & 59.60%, performed below the statewide data 63.32% for A2.   
  
Indicator 3, Outcome B measuring acquisition and use of knowledge and skills (including early language/communication) included: Summary Statement 1 measuring the percentage who substantially increased their rate of growth by the time they exited the program (B1) and Summary Statement 2 (B2) measuring the percentage of those who were functioning within age expectations by the time they exited the program. Local program data for B1 showed eight of 15 programs, with data between 38.89% & 60.00%, performed below the statewide data of 60.68% in the group of 1,288 infants and toddlers (excluding At Risk category). Five local programs, with data between 27.84% & 58.14%, performed below the statewide data of 58.99% in the group of 1,344 infants and toddlers (including At Risk category) for B1. Based on the 1,288 infants and toddlers (excluding At Risk category), seven local programs, with data between 19.64% & 46.81%, performed below the statewide data of 49.22% for B2. Based on the1,344 infants and toddlers (including At Risk category), seven of 15 local programs, with data between 19.30% & 47.92%, performed below the statewide data 48.44% for B2.   
  
Indicator 3, Outcome C measuring use of appropriate behaviors to meet their needs included: Summary Statement 1 measuring the percentage of those who substantially increased their rate of growth by the time they exited the program (C1) and Summary Statement 2 measuring the percentage of those who were functioning within age expectations by the time they exited the program (C2). Local program data for C1 showed eight of 15 programs, with data between 51.30% & 66.00%, performed below the statewide data of 67.52% in the group of 1,288 infants and toddlers (excluding At Risk category). Eight local programs, with data between 51.72% & 67.65%, performed below the statewide data of 67.71% in the group of 1,344 infants and toddlers (including At Risk category) for C1. Based on the 1,288 infants and toddlers (excluding At Risk category), eight local programs, with data between 28.57% & 51.45%, performed below the statewide data of 52.72% for C2. Based on the 1,344 infants and toddlers (including At Risk category), eight of 15 local programs, with data between 28.07% & 52.82%, performed below the statewide data 54.24% for C2.

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.  
  
The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

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

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

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2010 | Target>= | 87.00% | 87.50% | 87.50% | 88.00% | 88.00% |
| A | 86.00% | Data | 83.05% | 86.94% | 88.83% | 90.63% | 85.12% |
| B | 2010 | Target>= | 91.20% | 91.50% | 91.70% | 92.00% | 92.00% |
| B | 87.00% | Data | 89.49% | 91.42% | 93.87% | 92.50% | 91.15% |
| C | 2010 | Target>= | 87.20% | 87.50% | 87.70% | 88.00% | 88.00% |
| C | 85.00% | Data | 85.59% | 87.87% | 90.27% | 91.72% | 87.57% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 82.72% | 82.72% | 83.72% | 84.72% | 85.72% | 86.72% |
| Target B>= | 88.22% | 89.22% | 90.22% | 91.22% | 92.22% | 93.22% |
| Target C>= | 84.55% | 85.55% | 86.55% | 87.55% | 88.55% | 89.55% |

**Targets: Description of Stakeholder Input**

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

The state Part C office held stakeholder meetings with the ICC on 9/10/21 and FCESS Directors on 9/29/21 to review six years, 2014-2019, of Indicator 4 data and set targets for 2020 – 2025. The Part C office provided stakeholders data for review via email prior to meetings. During these meetings, review of data included average year over year growth/change and trend line forecasting. Due to the 2019 and 2020 data showing a continued decrease in satisfaction, both stakeholder groups mentioned concerns that the COVID-19 Pandemic may have had an influence on families’ responses to the survey questions indicating their disappointment with receiving virtual services. On the other hand, some stakeholders questioned could the 2019 and 2020 data actually be more accurate and honest since families were completing the surveys online without an FCESS provider in their home. In previous years, FCESS providers would hand deliver the surveys and offer the family the option to complete, put in a sealed envelope, and then the provider would mail the survey to the state office. Based on these concerns, questions, and moving data of over six years (2014-2019) of negative average actual growth of 4A -1.26%, 4B -1.97%, and 4C -1.01, and a decreasing trend line forecasting targets, both groups of stakeholders requested 2020-2025 targets to be set as follows. Begin with the current 4A 2020 data 82.72% as target for 2020 and increase every other year by 1.00% starting in 2022 and ending with 2025 target at 86.72%, which is above the 2010 baseline of 86.00%. Begin with the current 4B 2020 data 88.22% as target for 2020 and increase every other year by 1.00% ending with 2025 target at 93.22%, which is above 2010 baseline of 87.00%. Begin with the current 4C 2020 data 84.55% as target for 2020 and increase every other year by 1.00% ending with 2025 target at 89.55%, which is above 2010 baseline of 85.00%.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 863 |
| Number of respondent families participating in Part C | 382 |
| Survey Response Rate | 44.26% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 316 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 382 |
| 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 | 337 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 382 |
| 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 | 323 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 382 |

| **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) | 85.12% | 82.72% | 82.72% | Met target | No Slippage |
| B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2) | 91.15% | 88.22% | 88.22% | Met target | No Slippage |
| C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2) | 87.57% | 84.55% | 84.55% | Met target | No Slippage |

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

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

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

The demographics of the FOS respondent group are checked for alignment with the demographics of the 618 12/1/2020 Child Count to further ensure representativeness of the FCESS statewide system. Comparison of 618 data and the FOS responses showed that the percentage of families identifying as two or more races and ethnicity categories other than white were not not representative of infants and toddlers enrolled in the Part C program on 12/1/2020. Black or African American (618 data 2.06%, FOS 0.79%) had a -1.27% and Hispanic/Latino (618 data 4.89%, FOS 2.88%) had a -2.01% with an overall 3.28% difference in the FOS respondents than the 618 reported 12/1/20 Child Count data. This FOS percentage difference in comparison to the 618 percentage indicates a less than representative sample of families in these race and ethnicity categories receiving services through FCESS statewide. Through NHLeads data system, the State will take a closer look at the actual number of surveys distributed by race and ethnicity. This demographic distribution analysis is anticipated to accurately determine the race and ethnicity of infants, toddlers, and families enrolled in the Part C program over the course of a year compared to the 618 data, which only indicates a single point in time. The Part C State Office will work with local programs, Parent Information Center, and NH DHHS Office of Health Equity to provide the on-line survey in other languages that are identified as NH primary languages. The Part C State Office also offered to local programs to continue to prepare the paper version of the surveys for local programs in multiple languages. All programs are expected to participate in activities that will maintain a high response rate including but not limited to providing interpreters, hand-delivering surveys, offering an online option, assistance with understanding the survey and its purpose, and assistance with mailing sealed surveys to the Part C State Office.

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Survey Response Rate | 48.90% | 44.26% |

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

NH experienced a -6.74% response rate from FY19 to FY20. In years past the Family Outcome Survey was offered in multiple languages via paper form. Since the COVID-19 pandemic, an online option was offered to families. However, the online option is only offered in English. The Part C State Office is planning to offer the online surveys in other languages as identified as NH primary languages to increase FFY21 response rate. Parents or guardians are offered Area Agency support, as well as interpreters, to assist when their primary language is other than English and/or who have limited English proficiency.

**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.**

NH has an online survey for English readers only. However, the Part C State Office and local programs are able to identify non-English reader needs through the NHLeads state data system. In FFY20, paper surveys were distributed to local programs in the following languages: 1 Arabic, 3 French, 1 Nepali, 10 Spanish, and 1 Swahili, for families who preferred completing the paper version. NH promotes responses from a broad cross section of families through the distribution of paper survey versions for English and non-English readers. The statewide response rate for this year’s family outcomes survey is 44.26%. Out of the 44.26% of respondents, white families had the highest response rates (85.64%), followed by Hispanic/Latino (2.77%), Asian (2.27%), African American or Black (.76%), and Native Hawaiian or Pacific Islander (.25%). 8.31% of individuals identified as being two or more races but did not specify the specific races.   
The Part C State Office also offered to local programs to continue to prepare the paper version of the surveys for local programs in multiple languages. All programs are expected to participate in activities that will maintain a high response rate including but not limited to providing interpreters, hand-delivering surveys, offering an online option, assistance with understanding the survey and its purpose, and assistance with mailing sealed surveys to the Part C State Office.

**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.**

FFY20 Family Outcome Surveys (FOS) were distributed to all families with current active IFSPs, who participated in NH Part C Family Centered Early Supports and Services (FCESS) for at least 6 months as of April 1, 2021. The Part C State Office created and distributed a survey link to local programs to offer families the survey online. The Part C State Office also offered to local programs to continue to prepare the paper version of the surveys for local programs in multiple languages. All programs are expected to participate in activities that will maintain a high response rate including but not limited to providing interpreters, hand-delivering surveys, offering an online option, assistance with understanding the survey and its purpose, and assistance with mailing sealed surveys to the Part C State Office.  
  
All 15 local FCESS programs participated in the FFY20 FOS process with respondents from all regions of the state. Local programs distributed 863 (50.82% of 618 12/1/2020 child count data) surveys. The statewide response rate of 44.26% represented 382 families served by FCESS for 6 months or more in this FFY20 reporting period. Survey demographics include child’s race, ethnicity, and gender. Data is analyzed at state and local program levels to ensure representativeness is obtained and represents the work of the Part C FCESS statewide system.   
  
The demographics of the FOS respondent group are checked for alignment with the demographics of the 618 12/1/2020 Child Count to further examine representativeness of the FCESS statewide system. Race, ethnicity and gender are self-reported through the survey. Comparison of 618 data and the FOS responses showed the following percentage difference in the five race and ethnicity categories.; American Indian or Alaskan Native 618 data 0.0%, FOS 0.0% showed no difference., Asian 618 data 2.18%, FOS 2.36% showed a +0.18% difference. Black or African American 618 data 2.06%, FOS 0.79% showed a -1.27% difference. Hispanic/Latino 618 data 4.89%, FOS 2.88% showed a -2.01% difference. Native Hawaiian or Other Pacific Islander 618 data 0.06%, FOS 0.26% showed a +0.20% difference. These differences indicate an overall 2.91% decrease in minority family FOS respondents than the 618 reported 12/1/20 Child Count data. This FOS percentage decrease in comparison to the 618 percentage indicates a less than representative sample of families in these race and ethnicity categories receiving services through FCESS statewide. In the race categories of Two or more (618 data 5.48%, FOS 8.64%) and White (618 data 85.34%, FOS 85.08%) NH had an overall 2.9% increase in the FOS respondents than the 618 reported exiting data. This data indicates a representativeness of families in these race ethnicity categories receiving services through FCESS statewide.  
  
Data comparison of gender between 618 Child Count data and the FOS responses indicate a representativeness of families receiving services through FCESS statewide. 618 data included 39.06% females and 60.54% males. FOS data included 39.79% females and 60.21% males for FFY20.

**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).**

For FFY20 reporting, the state compared the 618 12/1/20 Child Count data (which includes race, ethnicity and gender) to the Family Outcome Survey (FOS) responses (which includes self-reported race, ethnicity and gender) to determine race and gender representativeness between infant and toddlers with active IFSPs and families who responded to the FOS survey. The State’s FOS data report used for survey distribution does not include race, ethnicity, and gender. The Part C State Office will work with the data systems controller to improve the FOS data distribution report to include race, ethnicity, and gender providing improved analysis for representativeness between infants and toddlers enrolled receiving the survey and responses submitted. A 1.27% difference was noted in those who have an active IFSP in comparison to those who responded to the survey who identify as Black or African American.

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

FFY20 Family Outcome Surveys (FOS) were distributed to all families with current active IFSPs and who participated in NH Part C Family Centered Early Supports and Services (FCESS) for at least 6 months as of April 1, 2021. The Part C State Office created and distributed a survey link to local programs to offer families the survey online. The State also provided local programs with paper copies in multiple languages.

## 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 state Family Outcome Survey (FOS) FFY20 response data is not representative of the infants and toddlers’ races enrolled in the Part C program. Although the State provided local programs with an online English version and paper versions of the survey in multiple languages, non-English speaking/reading families did not return the paper surveys for data entry. The State, along with stakeholders, are reviewing the barriers for non-English speaking/reading families. The State is working to increase access to the online survey in multiple languages.   
  
Through data analysis of demographics, the State has discovered the comparison between the 618 12/1/20 Child Count (a single point in time) and the survey response data is not a valid comparison to determine representativeness of race and gender for infants and toddlers enrolled in the state Part C program for the following reasons. The 618 Child Count data includes race and gender but the FOS distribution data does not include race and gender. Demographics for FOS race and gender is determined by survey responses not by survey distribution. Furthermore, the 618 data is a single point in time, which may not be representative of race and gender for surveys distributed to infants, toddlers, and families enrolled a few months later due to those who may exit prior to survey distribution.  
  
The State is working to include race and gender into the FOS distribution data list to ensure valid and reliable data for survey distribution. Race and gender demographics data included in the FOS distribution list will provide valid and reliable data for comparison between infants, toddlers, and families enrolled in Part C to survey responses. Comparisons will also be available at the local program level.

## 4 - OSEP Response

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

## 4 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.38% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 1.60% | 1.70% | 1.80% | 1.90% | 1.90% |
| Data | 2.47% | 2.28% | 2.43% | 2.38% | 7.97% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 1.84% | 1.91% | 1.98% | 2.05% | 2.12% | 2.19% |

Targets: Description of Stakeholder Input

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

The state Part C office held stakeholder meetings with the ICC on 9/10/21 and FCESS Directors on 9/29/21 to review six years, 2014-2019, of Indicator 5 data and set targets for 2020 – 2025. The Part C office provided stakeholders data for review via email prior to meetings. During meetings, review of data included average year over year growth/change and trend line forecasting. Data shows NH consistently reached above targets for infants with birth to 1 enrolled with IFSPs. However, there is concern with 2019 data. During the COVID-19 Pandemic 2019-2020 enrollment had decrease leaving the state and stakeholders questioning the reliability of 2019 data. Excluding the 2019 data anomaly, the 2014-2018 data showed an actual average growth of 0.07%. Due to the 5-year actual average growth, decrease enrollment during the COVID-19 Pandemic, and concerns of how long it will take enrollment to improve, both stakeholder groups requested 2020-2025 targets to be set as follows. Begin with current 2020 data 1.84% (above 2013 baseline), as the 2020 target and increase each year by the average actual growth of 0.07% ending 2025 with target 2.19% Targets for 2020-2025 continue to demonstrate improvement above 2005 baseline of 1.38%.

**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 | 222 |
| 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 | 12,058 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 222 | 12,058 | 7.97% | 1.84% | 1.84% | Met target | No Slippage |

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

New Hampshire (NH) serves children with established conditions, children with a 33% developmental delay in any one area of development or atypical behavior, and children who are at risk for substantial delay. The greatest numbers of children eligible for services are those in the developmental delay category. Children at risk for substantial delay are eligible for services if there are five child or family risk factors. NH continues to monitor outreach efforts to the at risk population, particularly those affected by substance misuse or those who are homeless, to ensure we are reaching eligible children in this vulnerable population. In NH FCESS, early childhood partners and family organizations work continuously to improve the early identification of children with the need for Part C services.   
  
State data shows that most children are referred to FCESS by pediatricians and family members. Outreach is provided through multiple venues such as NH DHHS website, printed materials, local program outreach activities, and collaboration with other early childhood partners. Participation in NH’s Early Childhood Advisory Council, elevates public awareness of Part C FCESS. NH Part C staff also work closely with and support the NH Watch Me Grow developmental screening network. State and national data shows that NH's public awareness and Child Find systems are effectively reaching potentially eligible children and families. NH Part C FCESS consistently achieves a high level of success in this area when compared to the national average.  
  
Data used to determine the number of children served is taken from the statewide data system. The Part C State Office, regional area agencies, and local programs verify data to ensure accuracy. The verified data is used for Federal reporting on December 1 - child count data reports under section 618 of the IDEA. The December 1 child count data for this report is the number of children, age birth through one year, with active IFSPs on 12/1/2020. Active IFSPs are considered any IFSP with parental consent. Information used in the IDEA Part C National Table are considered ‘point in time’ data and reflect the number of children with active IFSPs as of 12/1 of any given year. National data Sources: U.S. Department of Education, EDFacts Metadata and Process System (EMAPS): “IDEA Part C Child Count and Settings Survey,” 2020. Data extracted as of July 7, 2021. U.S. Bureau of the Census. "2020 State Population Estimates by Age, Sex, Race, and Hispanic Origin". Data accessed July 2021 from http://www.census.gov/popest.   
  
Inaccuracy in data from the FFY19 Birth to 1 Child Count was identified through further review and analysis of the NHLeads December 1 - child count data reports under section 618 of the IDEA. In FFY19, the initial NHLeads data identified 961 NH infants and toddlers birth to 1 with active IFSPs on December 1, 2019. This data resulted in 7.97% of the population of infants birth to 1 being served. However, during FFY20 review of target setting data it was discovered that this data was incorrect. The corrected NHLeads December 1 - child count data reports under section 618 of the IDEA indicated 296 NH infants birth to 1 had active IFSPs on 12/1/2020. Provided with this new data it was determined, that NH served 2.46% of infants birth to 1. Therefore, the difference from FFY19 corrected Indicator 5 data of 2.46% to FFY20 current Indicator 5 data of 1.84% is a decrease of 0.62%, which would not actually be considered a slippage.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

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** |
| --- | --- |
| 2005 | 2.96% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 3.60% | 3.70% | 3.80% | 3.90% | 3.90% |
| Data | 5.21% | 5.19% | 5.35% | 5.70% | 5.66% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 4.60% | 4.75% | 4.89% | 5.04% | 5.18% | 5.33% |

Targets: Description of Stakeholder Input

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

The state Part C office held stakeholder meetings with the ICC on 9/10/21 and FCESS Directors on 9/29/21 to review six years, 2014-2019, of Indicator 6 data and set targets for 2020 – 2025. The Part C office provided stakeholders data for review via email prior to meetings. During meetings, review of data included average year over year growth/change and trend line forecasting. Data shows NH consistently reached above targets for infants with toddlers birth to 3 years enrolled with IFSPs. Due to the 6-year actual average growth of 0.15%, decrease enrollment during the COVID-19 Pandemic, and concerns of how long it will take enrollment to improve, both stakeholder groups requested 2020-2025 targets to be set as follows. Begin with current 2020 data 4.60% as the 2020 target and increase each year by the average actual growth of 0.15% ending 2025 with the target of 5.33%. Targets for 2020-2025 continue to demonstrate improvement above 2005 baseline of 2.96%.

**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 | 1,698 |
| 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 | 36,873 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,698 | 36,873 | 5.66% | 4.60% | 4.60% | Met target | No Slippage |

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

New Hampshire Part C FCESS system met the state target for Indicator 6 due to setting 2020-2025 targets beginning with NH current FFY20 data. The target for child find, birth through age 2, for FFY20 was 4.60% of the total population for this age group. The state Part C FCESS system achieved a rate of 4.60% of the state birth through age 2 population being served in FFY20. The percentage of infants and toddlers birth through age 2 still exceeds the national average of 3.20%. Through further data comparison and analysis of FFY19 and FFY20 December 1 - child count data reports under section 618 of the IDEA, there was a decrease of 522 infants and toddlers birth through age 2 with active IFSPs. Through analysis of NHLeads Referral data reports it was observed that between FFY19 and FFY20, referrals had decreased by 187, eligibility evaluations decreased by 339, and enrollment decreased by 63. NH believes that the decrease in numbers is directly related to the COVID-19 pandemic. The COVID-19 State of Emergency was initiated in March of 2020. Once the State of Emergency was initiated, NH childcare centers closed, families stayed home, children did not see their pediatricians for Well Child Checkups, and families were not as comfortable with telehealth virtual services. At the beginning of the pandemic, many families chose to either withdraw from services or did not follow through with referrals even though all NH 15 local programs stayed open to provide either in-person or virtual services. NH had a decrease in referrals simultaneously to the months children typically see the pediatrician for Well Child visits of 2, 4, 6, 9, 12, 15, 16, 24, and 30 months. Many of these scheduled visits were postponed or cancelled during the State of Emergency. All of these factors played a large role in the number of infants and toddlers included in the December 1, 2020 report.  
  
New Hampshire (NH) serves children with established conditions, children with a 33% developmental delay in any one area of development, Atypical behavior, and children who are at risk for substantial delay. The greatest numbers of children eligible for services are those in the developmental delay category. Children at risk for substantial delay are eligible for services if there are 5 or more child or family risk factors or a combination of both child and family risk factors. NH continues to monitor outreach efforts to the at risk population, particularly those affected by substance misuse or those who are homeless, to ensure we are reaching eligible children in vulnerable populations. Early childhood partners and family organizations work continuously to improve the early identification of children with the need for Part C services.   
  
State data shows that most children are referred to FCESS by pediatricians and family members. Outreach is provided through multiple venues such as NH DHHS website, printed materials, local program outreach activities, and collaboration with other early childhood partners. Participation in NH’s Early Childhood Advisory Council, elevates public awareness of Part C FCESS. NH Part C staff also work closely with and support the NH Watch Me Grow developmental screening network. State and national data shows that NH's public awareness and Child Find systems are effectively reaching potentially eligible children and families. NH Part C FCESS consistently achieves a high level of success in this area when compared to the national average.  
  
Data used to determine the number of children served is taken from the NHLeads statewide data system. This data is verified by regional area agencies and local programs to ensure accuracy. The verified data is used for Federal reporting on December 1 - child count data reports under section 618 of the IDEA. The December 1 child count data for this report is the number of children, age birth through age 2, with an active IFSP on 12/1/2020. Active IFSPs are considered to be any IFSP with parental consent. Information used in the IDEA Part C National Table are considered ‘point in time’ data and reflect the number of children with active IFSPs as of 12/1 of any given year. National data Sources: U.S. Department of Education, EDFacts Metadata and Process System (EMAPS): “IDEA Part C Child Count and Settings Survey,” 2020. Data extracted as of July 7, 2021. U.S. Bureau of the Census. "2020 State Population Estimates by Age, Sex, Race, and Hispanic Origin". Data accessed July 2021 from http://www.census.gov/popest

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

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 | 88.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 99.07% | 98.19% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 395 | 468 | 98.19% | 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 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.**

73

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

Documentation of 73 exceptional family circumstances (EFC) included but was not limited to; families not responding to calls or letters to schedule, families canceling timely scheduled meetings and requesting to reschedule beyond the 45-day timeline date, mailing IFSPs to families for signatures due to COVID-19 restrictions, and families initially requesting to schedule beyond 45-day timeline due to work and/or family schedules.

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

State monitoring

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

All 15 New Hampshire (NH) Part C FCESS local programs are monitored using the NHLeads state database system throughout the year. For FFY20 reporting, the Part C State Office monitoring team reviewed the Timely Service Monitoring report (including the months of July – November) for each local program. The Timely Service Monitoring report indicates the IFSP start date as the parent consent date. Each program was required to submit a random sample of documents including 10 IFSPs to verify that information in the data system is valid and reliable. If a discovery of noncompliance was identified in the NHLeads state data report, the local program was issued a finding and required to engage in a corrective action plan process that included one year of quarterly monitoring by the Part C State Office. Technical assistance is provided to local programs by the Part C State Office staff to ensure successful correction of noncompliance.  
  
Compliance for Indicator 7 is defined as the number of calendar days from the date of referral to the date the family signs the IFSP indicating consent. Targets for Indicator 7 is 100% compliance for all local programs in NH. The state included in its calculation the number of children for whom the state identified the cause for the delay as exceptional family circumstances (EFC) documented in the child’s record. NH’s compliance for FFY20 of 100% did meet the target for Indicator 7. This was determined through review of NHLeads data system and individual child record documentation.  
  
In the data report of 468 records for FFY20 reporting period, 395 were found to have received timely IFSP development including consent within the required Part C 45-day timeline from the date of referral. Seventy-three IFSPs were delayed due to documented exceptional family circumstances (EFC) verified within the individual child documentation. The Part C State Office monitoring team verified delayed circumstance through review of electronically submitted case notes and phone logs. Therefore, 100% of children within the 15 local programs received timely IFSP development with consent. IFSP consent was obtained as soon as families were available for the 73 children whose IFSPs were developed beyond the required Part C 45-day timeline due to EFC. Documentation of EFC included but was not limited to; families not responding to calls or letters to schedule, families canceling timely scheduled meetings and requesting to reschedule beyond the 45-day timeline date, mailing IFSPs to families for signatures due to COVID-19 restrictions, and families initially requesting to schedule beyond the 45-day timeline due to work and/or family schedules. Although delayed, all IFSPs were completed with parental consent at a time that was convenient and agreed upon with the parent/guardian.

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

NH Part C State Office was unable to conduct onsite monitoring for FFY20 due to the COVID-19 pandemic. The Part C State Office directed local programs to electronically submit documentation from the children’s records for the random sample identified in the program’s Timely Service Monitoring report. The Part C State Office monitoring team reviewed and verified submitted documentation for compliance.

**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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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

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**

Noncompliance reported in FFY19 State Performance Plan (SSP)/Annual Performance Report (APR) for Indicator 7, 45-day Timeline, included four IFSPs that were delayed for reasons within program control at four local programs. The local program Gateways Community Service (GW) in FFY19 SSP/APR data was reported as 94% compliant with one IFSP completed beyond the 45-day Timeline. The Children’s Pyramid (TCP) local program in FFY19 SSP/APR data was reported as 90% compliant with one IFSP completed beyond the 45-day Timeline. The Richie McFarland Children Center (RMCC) local program in FFY19 SSP/APR data was reported as 92% compliant with one IFSP completed beyond the 45-day Timeline. The Easterseals region 10 (ES10) local program in FFY19 SSP/APR data was reported as 94% compliant with one IFSP completed beyond the 45-day Timeline.  
  
Although parental consent on the four IFSPs were obtained beyond the 45-day required timeline, all IFSP meetings and IFSP consent was obtained at a time agreed upon with the families. The State identified these IFSPs as a discovery of noncompliance. The local programs GW, TCP, RMCC, and ES10 provided staff training and achieved 100% compliance in the subsequent pre-finding data reports within the pre-finding 90-day period prior to the issuance of a finding of noncompliance.  
  
In order to verify these four local programs were correctly implementing the regulatory requirements for Indicator 7, the state reviewed subsequent pre-finding data from NHLeads, the state’s Part C data system, during the 90-day pre-finding period for each program. NHLeads data reports indicated the following for each local program: GW’s pre-finding data report included 45 records that showed 32 IFSPs were developed and parental consent was obtained within the 45-day required timeline. Data for 13 records indicated parental consent was obtained beyond the 45-day timeline. Although late due to exceptional family circumstances, parental consent was obtained and IFSPs were implemented within a timeline agreed upon by the family. TCP’s pre-finding data report included 11 records that showed 10 IFSPs were developed and parental consent was obtained within the 45-day required timeline. One record indicated the IFSP consent was obtained beyond the 45-day timeline. Although late due to exceptional family circumstance, parental consent was obtained and IFSPs were implemented within a timeline agreed upon by the family. RMCC’s pre-finding data report included 28 records that showed 25 IFSPs were developed and parental consent was obtained within the 45-day required timeline. Three records indicated the IFSP consent was obtained beyond the 45-day timeline. Although late due to exceptional family circumstance, parental consent was obtained and IFSPs were implemented within a timeline agreed upon by the family. ES10’s pre-finding data report included 55 records that showed 52 IFSPs were developed and parental consent was obtained within the 45-day required timeline. Three records indicated the IFSP consent was obtained beyond the 45-day timeline. Although late due to exceptional family circumstance, parental consent was obtained and IFSPs were implemented within a timeline agreed upon by the family.   
  
Based on review of the four local programs GW, TCP, RMCC and ES subsequent pre-finding data reports and individual child documentation, the Part C State Office determined the local programs achieved compliance during the 90-day pre-finding correction period prior to the issuing of a finding and was correctly implementing the regulatory requirements for Indicator 7. The state Part C Office has verified that the local programs with noncompliance identified in FFY19 and reported by New Hampshire under this indicator in the FFY19 SSP/APR held an initial evaluation, assessment and IFSP meeting for each child identified during discovery, although late, and are correctly implementing the regulatory requirements. Therefore, no findings of noncompliance were issued to the local programs for Indicator 7 in FFY19 due to pre-finding data showing the programs are correctly implementing regulatory requirements.

## 7 - OSEP Response

## 7 - Required Actions

# 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 | 98.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 99.06% | 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)**

YES

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 265 | 270 | 100.00% | 100% | 99.63% | Did not meet target | No Slippage |

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

4

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

Four infants and toddlers with IFSPs received delayed transitions due to exceptional family circumstances (EFC). Documented EFCs reviewed and verified by the Part C State Office included; parents canceling the timely scheduled transition plan meeting during the COVID-19 pandemic, families initially not wanting to reschedule meetings at the start of the COVID-19 pandemic and requesting to wait, and canceling transition meeting due to conflict in the parents’ schedule. Although delayed, all 4 transition planning meetings were completed with parental consent at a time that was convenient and agreed upon by the family. One local program, Gateways, did have one system delay. This program did not obtain parent/guardian signature indicating consent with the transition plan.

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

State monitoring

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

All 15 New Hampshire (NH) Part C FCESS local programs are monitored using the NHLeads state database system throughout the year. To verify that information in the data system is valid and reliable for FFY20 reporting, the Part C State Office monitoring team reviewed the Transition Monitoring report (including the months of July – November) for each local program. The Transition Monitoring report indicates the date a transition plan is initiated. All data identified in the report was reviewed for children that transitioned to Part B. Each program was required to submit transition plans for each child identified in the monitoring report to verify that information in the data system is valid and reliable. If a finding of noncompliance is identified, local programs must then engage in a corrective action plan process that includes one year of quarterly monitoring. Technical assistance is provided to local programs by the Part C State Office staff to ensure successful correction of noncompliance.  
  
Compliance with Indicator 8a is defined as developing a transition plan including steps and services of transition completed at least 90 days prior to, and at the discretion of all parties, not more than nine months prior to the toddler’s third birthday. Target for Indicator 8a is 100% compliance. Fourteen of 15 local FCESS programs achieved 100% compliance. In the data report, 270 records were reviewed for FFY20 reporting and 269 IFSPs contained a transition plan developed at least 90 days or more and less than 9 months prior to the child’s third birthday. One local program did not meet 100% compliance for Indicator 8a. Gateways Community Services (GCS) data indicated 96% compliance. Documentation submitted and reviewed showed that a parent signature was not obtained on the transition plan. Therefore, NH did not meet the 100% compliance target for Indicator 8a. Through review of the transition monitoring data report and verification of submitted documentation, NH achieved 99.63% compliance for Indicator 8a.   
  
A finding of noncompliance for Indicator 8a was issued to Gateways Community Services. GCS local program is engaged in a corrective action plan that includes one year of quarterly monitoring review of data and documentation by the Part C State Office. Technical assistance is provided by the Part C State Office staff to ensure successful correction of noncompliance.

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

NH Part C State Office was unable to conduct onsite monitoring for FFY20 due to the COVID-19 pandemic. The Part C State Office directed local programs to electronically submit documentation from the children’s records identified in the program’s Transition Monitoring report. The Part C State Office monitoring team reviewed this documentation to verify compliance.

**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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 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 | 99.60% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.17% | 100.00% | 100.00% | 98.11% | 96.97% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 262 | 270 | 96.97% | 100% | 97.04% | Did not meet target | No Slippage |

**Number of parents who opted out**

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

0

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

During the monitoring review process of the data report and verification of documentation submitted, it was noted that four notifications were not completed at least 90 days prior to a child’s third birthday for those potentially eligible for Part B preschool services due to system delays. Reasons for those delays included: local service provider predated the referral page prior to sending to the parent for signature, LEA and SEA were never made after the family had initially opted out and then decided to make a referral to the LEA prior to 90 days before the child’s third birthday, local service provider did not send notification until parent signed release, and one record did not include documentation of the date notification was sent to the LEA so the date could not be verified.  
  
NH had four children who exited Part C where notification to SEA and LEA occurred less than 90 days prior to their third birthday due to exceptional family circumstances (EFC). Submitted documentation identified the EFC reasons due to parent/guardian canceling timely Transition Plan meetings, family non responsive during COVID-19 pandemic, and parent request to not notify as local school districts were not in-person.

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

New Hampshire local programs send notifications to the LEA and enter notification dates to SEA and LEA into the state NHLeads data system. Data is then transmitted to the State Educational Agency (SEA). The Part C office obtains the Transition Monitoring Report from NHLeads and verifies dates with documentation from the child’s chart.

**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 monitoring

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

All 15 New Hampshire (NH) Part C FCESS local programs are monitored using the NHLeads state database system throughout the year. To verify that information in the data system is valid and reliable for FFY20 reporting, the Part C State Office monitoring team reviewed the Transition Monitoring report (including the months of July – November) for each local program. The Transition Monitoring report indicates the LEA and SEA notification date and the yes or no option to opt-out. Each program was required to submit documentation of notifications for each child identified in the monitoring report. Review of documentation verified that information in the data system is valid and reliable. If a finding of noncompliance is identified, local programs must then engage in a corrective action plan process that includes one year of quarterly monitoring. Technical assistance is provided to local programs by the Part C State Office staff to ensure successful correction of noncompliance.  
  
Compliance with Indicator 8b is defined as notification (consistent with any opt-out policy adopted by the State) to the LEA and the SEA at least 90 days prior to a child’s third birthday for those potentially eligible for Part B preschool services. Target for Indicator 8b is 100% compliance for all local FCESS programs in NH. NH statewide compliance of 98.52% did not meet the target of 100% compliance for Indicator 8b by 1.48%. This FFY20 data of 98.52% shows an increase from FFY19 98.11%. Eleven of the 15 local programs achieved 100% compliance in the data report and review of individual child documentation. In the data report, 270 records were reviewed for FFY20 reporting and 262 were found to have timely notifications sent to both the LEA and SEA at least 90 days prior to the child’s third birthday and four notification were delayed due to exceptional family circumstances. Therefore [(262+4)/270] 98.52% of children notifications to the LEA and SEA were in compliance.   
  
During the monitoring review process of the data report and verification of documentation submitted, it was noted that four notifications were not completed at least 90 days prior to a child’s third birthday for those potentially eligible for Part B preschool services within four out of 15 local programs. The local programs included Northern Human Services (NHS), Pathways of River Valley (PW), Community Partners (CP), and Gateways Community Services (GCS). NHS achieved 94.74% compliance due to one of 19 notifications to the LEA was not being sent at least 90 days prior to the child’s third birthday. The local service provider predated the referral page prior to sending to the parent for signature. The parent sent the referral form back to the local program months after the Transition Plan meeting. PW achieved 88.89% compliance due to one of nine records showed the notification to the LEA and SEA was never made after the family had initially opted out and then decided to make a referral to the LEA prior to 90 days before the child’s third birthday. CP achieved 95.24% compliance due to one of 21 records reviewed indicated a service provider did not send notification until the parent signed the release. A notification to LEA and SEA does not require a parent signature. GCS achieved 95.83% compliance due to one of 24 records reviewed did not include documentation of the date notification was sent to the LEA.   
  
Although late, all four notifications to the LEA and SEA were completed prior to the child’s third birthday. All four programs were issued a finding of noncompliance for Indicator 8b and are engaged in a corrective action plan process that includes one year of quarterly monitoring review of data and documentation by the Part C State Office. Technical assistance is provided to local programs by the Part C State Office staff to ensure successful correction of noncompliance.

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

NH Part C State Office was unable to conduct onsite monitoring for FFY20 due to the COVID-19 pandemic. The Part C State Office directed local programs to electronically submit documentation from the children’s records identified in the program’s Transition Monitoring report. The Part C State Office monitoring team reviewed this documentation to verify compliance.

**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.***

Noncompliance reported in FFY19 State Performance Plan (SSP)/Annual Performance Report (APR) for Indicator 8b, LEA and SEA notification, included three late notifications completed less than the 90-days prior to the child’s third birthday. Following two pre-finding notifications, one program provided staff training and achieved 100% compliance in the subsequent pre-finding data report within the pre-finding 90-day correction period prior to the issuance of a finding of noncompliance. Although the second program also provided staff training to the issuance of a pre-finding, subsequent pre-finding data reports indicated noncompliance and the state issued one finding.  
  
The local program, PathWays of River Valley (PW), data was reported as 67% compliant with two late notifications to the SEA missing documentation that notification was sent. Although the notification was late, less than 90 days prior to the child’s third birthday, documentation reviewed showed the notification was provided to the LEA and SEA prior to the child’s third birthday. In order to verify that the local PW program was correctly implementing the regulatory requirements for Indicator 8b, the state reviewed subsequent pre-finding data from NHLeads, the state’s Part C data system, during the 90-day pre-finding period. The subsequent data report included 16 transition records with 15 notifications to the LEA and SEA completed 90 days or more prior to the child’s third birthday. One record was missing data notification to the LEA and SEA. Individual child documentation submitted and reviewed indicated the notification to the LEA and SEA were completed 90 days or more prior to the child’s third birthday. The State determined the program did achieve 100% compliance for Indicator 8b during the 90-day pre-finding correction period prior to issuing a finding of noncompliance for FFY19 reporting.  
  
The local program Community Bridges (CB) data was reported as 89% compliant with one late notification to the LEA and SEA due to a staff member misfiling documentation to be entered into the state data system. Although the notification was late, less than 90 days prior to the child’s third birthday, the notification was provided to the LEA and SEA prior to the child’s third birthday. In order to verify that the local CB program was correctly implementing the regulatory requirements for Indicator 8b, the state reviewed subsequent pre-finding data from NHLeads, the state’s Part C data system, during the 90-day pre-finding period. The subsequent data report included 61 transition records including 55 timely notification, 4 late notifications due to exceptional family circumstances (EFC), and one late notification to the LEA and SEA due to staff member not turning in paperwork in a timely manner, resulting in 98% compliance. The State determined the program did not achieve compliance for Indicator 8b during the 90-day pre-finding correction period and issued a finding of noncompliance for FFY19 reporting. The program then engaged in a corrective action plan (CAP) for one year, which included quarterly data monitoring, specific staff member training and increased supervision. The State reviewed subsequent quarterly data reports that included 17 transition records in first quarter at 100% compliance, 18 records in second quarter at 83% compliance with three late notifications, 15 transition records in third quarter at 100% compliance, and 14 records in the fourth quarter at 100% compliance. Through review of pre-finding data reports and individual child documentation, the state Part C office verified that the program was functioning at 100% compliance within one year of issuing a finding and correctly implementing the regulatory requirements for Indicator 8b.The state provided TA to ensure completion and success of the FFY19 CAP.

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

For the local PW program and CB program with noncompliance on Indicator 8b, the state Part C staff used NHLeads, the state’s Part C data system, and individual child documentation to verify that for each instance of noncompliance involved in the FFY19 SPP/APR that the children have a notification sent to the LEA and SEA. The state Part C Office has verified that the local PW program achieved 100% compliance during the pre-finding correction period and the CB local program with a finding of noncompliance identified in FFY19 and reported by New Hampshire under this indicator in the FFY19 SPP/APR are both correctly implementing the regulatory requirements, consistent with OSEP Memorandum 09-02.

**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

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**

For the local PathWays or River Valley program and Community Bridges program with noncompliance on Indicator 8b, the state Part C staff used NHLeads, the state’s Part C data system, and individual child documentation to verify that for each instance of noncompliance involved in the FFY19 SPP/APR that the children have a notification sent to the LEA and SEA. The state Part C Office has verified that the local PW program achieved 100% compliance during the pre-finding correction period and the CB local program with a finding of noncompliance identified in FFY19 and reported by New Hampshire under this indicator in the FFY19 SPP/APR are both correctly implementing the regulatory requirements, consistent with OSEP Memorandum 09-02.  
  
The local program Community Bridges (CB) data was reported as 89% compliant with one late notification to the LEA and SEA due to a staff member misfiling documentation to be entered into the state data system. Although the notification was late, less than 90 days prior to the child’s third birthday, the notification was provided to the LEA and SEA prior to the child’s third birthday. In order to verify that the local CB program was correctly implementing the regulatory requirements for Indicator 8b, the state reviewed subsequent pre-finding data from NHLeads, the state’s Part C data system, during the 90-day pre-finding period. The subsequent data report included 61 transition records including 55 timely notification, 4 late notifications due to exceptional family circumstances (EFC), and one late notification to the LEA and SEA due to staff member not turning in paperwork in a timely manner, resulting in 98% compliance. The State determined the program did not achieve compliance for Indicator 8b during the 90-day pre-finding correction period and issued a finding of noncompliance for FFY19 reporting. The program then engaged in a corrective action plan (CAP) for one year, which included quarterly data monitoring, specific staff member training and increased supervision. The State reviewed subsequent quarterly data reports that included 17 transition records in first quarter at 100% compliance, 18 records in second quarter at 83% compliance with three late notifications, 15 transition records in third quarter at 100% compliance, and 14 records in the fourth quarter at 100% compliance. Through review of pre-finding data reports and individual child documentation, the state Part C office verified that the program was functioning at 100% compliance within one year of issuing a finding and correctly implementing the regulatory requirements for Indicator 8b.The state provided TA to ensure completion and success of the FFY19 CAP.

## 8B - OSEP Response

## 8B - 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 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 | 69.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 99.06% | 98.04% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 259 | 270 | 98.04% | 100% | 98.89% | Did not meet target | No Slippage |

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

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

0

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

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

8

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

Eight transition conferences were delayed due to exceptional family circumstances (EFC). The EFCs included a family moving to another town and rejecting services at the start of the COVID-19 pandemic, family requesting the transition conference be schedule at the same time as the disposition of referral meeting to reduce the number of meetings, scheduling difficulties due to family cancelation of timely meetings, and family requesting transfer from one local program to another which delayed scheduling the transition conference.  
  
Three transition conferences were late due to systems delay. One local program held three transition conferences prior to sending notification to the LEA and SEA. Although non-compliant (less than 90 days prior to child’s third birthday), all transition conferences did occur prior to the children’s third birthdays.

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

State monitoring

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

All 15 New Hampshire (NH) Part C FCESS local programs are monitored using the NHLeads state database system throughout the year. To verify that information in the data system is valid and reliable for FFY20 reporting, the Part C State Office monitoring team reviewed the Transition Monitoring report (including the months of July – November) for each local program. The Transition Monitoring report indicates the date the transition conference occurred. Each program was required to electronically submit documentation of transition conference for each child identified in the monitoring report. Review of documentation verified that information in the data system is valid and reliable. If a finding of noncompliance is identified the local program must then engage in a corrective action plan process that includes one year of quarterly monitoring. Technical assistance is provided to local programs by the Part C State Office staff to ensure successful correction of noncompliance.  
Compliance with Indicator 8c is defined as the transition conference occurring at least 90 days prior to a child’s third birthday for those potentially eligible for Part B preschool services. Target for Indicator 8c is 100% compliance for all local FCESS programs in NH. NH statewide compliance of 98.89% did not meet the target of 100% compliance for Indicator 8c by 1.11%. This FFY20 data of 98.89% shows a 0.85% increase from FFY19 98.04%. Fourteen of the 15 local programs achieved 100% compliance in the data report and review of individual child documentation. In the data report, 270 records were reviewed for FFY20 reporting and 259 were found to have timely transition conferences occurring 90 days or more prior to the child’s third birthday and eight were delayed due to exceptional family circumstances (EFC). Therefore 98.89% [(259+8)/270] of transition conferences were in compliance.  
  
During the monitoring review process, a discovery of noncompliance was identified in the data report and review of individual child documentation at one local program, Region 7 Easterseals (ES07). Region 7 Easterseals achieved 84.21% compliance. Three transition conferences within local program ES07 were completed prior to notification of the LEA and SEA. Although non-compliant, all transition conferences did occur prior to the children’s third birthdays.   
  
A finding of noncompliance for Indicator 8c was issued to ES07. The local program must engage in a corrective action plan process that includes one year of quarterly monitoring review of data and documentation by the Part C State Office. Technical assistance is provided to local programs by the Part C State Office staff to ensure successful correction of noncompliance.

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

NH Part C State Office was unable to conduct onsite monitoring for FFY20 due to the COVID-19 pandemic. The Part C State Office directed local programs to electronically submit documentation from the children’s records for the random sample identified in the program’s Transition Monitoring report. The Part C State Office monitoring team reviewed this documentation to verify compliance.

**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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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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## 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**

Noncompliance reported in FFY19 State Performance Plan (SSP)/Annual Performance Report (APR) for Indicator 8c, Transition Conference, included two conferences that occurred less than 90-days prior to the child’s third birthday within two local programs. Local program Easterseals R7 (ES7) data was reported as 86% compliance with one late transition conference. Local program Easterseals R0 (ES10) data was reported as 86% compliance with one late transition conference. The state identified these delayed transition conferences as a discovery of noncompliance. The local programs provided staff training and achieved 100% compliance in the subsequent pre-finding data reports and individual child documentation within the pre-finding 90-day period prior to the issuance of a finding of noncompliance.   
  
In order to verify that the local ES7 program was correctly implementing the regulatory requirements for Indicator 8c, the state reviewed subsequent pre-finding data from NHLeads, the state’s Part C data system, during the 90-day pre-finding correction period for this local program. The subsequent data report included 20 transition records indicating 17 transition conferences occurred 90-days or more prior to the child’s third birthday and 3 records were missing data entries. The state review of individual child documentation for the three records missing data entries and determined all transition conferences occurred 90-days or more prior to the child’s third birthday.   
  
In order to verify that the local ES10 program was correctly implementing the regulatory requirements for Indicator 8c, the state reviewed subsequent pre-finding data from NHLeads, the state’s Part C data system, during the 90-day pre-finding correction period for this local program. The subsequent data report included 28 transition records indicating 21 transition conferences occurred 90-days or more prior to the child’s third birthday and 7 records occurred late with no documented reason in the data system. The state review of individual child documentation for these seven records determined four transition conferences occurred 90-days or more prior to the child’s third birthday and three transition conferences were delayed due to exceptional family circumstances (EFC). Documented EFC included families initially opting out of the notification process.  
  
Based on review of ES7 and ES10 local programs subsequent pre-finding data reports and individual child documentation, the Part C State Office determined the programs achieved 100% compliance during the 90-day pre-finding correction period prior to the issuance of a finding and was correctly implementing the regulatory requirements for Indicator 8c. Therefore, no findings of noncompliance were issued to these local programs for Indicator 8c in FFY19 due to pre-finding data showing local programs correctly implementing regulatory requirements.

## 8C - OSEP Response

## 8C - 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 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.**

New Hampshire Part C did not have any family complaints involved in a hearing process during FFY20.

## 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

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= |  |  |  |  | .00% |
| 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 meet its 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)?**

New Hampshire’s (NH) SiMR measures the percentage of infants and toddlers who were functioning within age expectations in Outcome 3B Summary Statement 2 (SS2) by the time they turned 3 years of age or exited the program and demonstrated improved acquisition and use of knowledge and skills (including early language/communication).  
https://www.dhhs.nh.gov/dcbcs/bds/earlysupport/documents/fcessmeasresultffy20.pdf

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

NO

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

NO

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

NO

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

NH Theory of Action https://www.dhhs.nh.gov/dcbcs/bds/earlysupport/documents/fcess-nhssip-toa.pdf NH Logic Model https://www.dhhs.nh.gov/dcbcs/bds/earlysupport/documents/fcesslogicmodel.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** |
| --- | --- |
| 2020 | 48.44% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 48.44% | 48.44% | 48.54% | 48.54% | 48.64% | 48.64% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Number 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 (d+e) | Total number of infants and toddlers exiting the program during FFY20. (a+b+c+d+e) | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 651 | 1,344 | 53.65% | 48.44% | 48.44% | N/A | N/A |

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

New Hampshire’s state data system NHLeads maintains entry and exit data for Indicator 3 including 3B SS2 ratings used to analyze for the SiMR.

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

New Hampshire (NH) local programs enter Child Outcome Summary (COS) entry and exit ratings into the state’s NHLeads data system. The Part C State Office obtains a COS exit report that includes all infants and toddlers exiting the system in a given fiscal year. COS ratings are calculated for all children who are at least six months old and have received services for at least six months. Data calculations represent the percentage of infants and toddlers with IFSPs who demonstrate improved acquisition and use of knowledge and skills (including early language/communication) for Indicator 3 Outcome B Summary Statement 2. The data is analyzed by the State Part C office and with stakeholders via email and meetings, to determine progress towards the SiMR.  
  
NH’s COS data is also disaggregated by race and gender to measure progress towards the SiMR. The state will know that the system has succeeded when the following have occurred. The percentage of males in Outcome B Summary Statement 1 (3B SS1) and Outcome B Summary Statement 2 (3B SS2), and the percentage of children identified as in a minority group in 3B SS2 show improved outcomes. NH anticipates that the improvement strategies targeting these groups will result in improved outcomes for all children across NH.

**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)**

NO

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.**

New Hampshire (NH) has not made any revisions to the current SSIP evaluation plan. This plan can be found at https://www.dhhs.nh.gov/dcbcs/bds/earlysupport/documents/fcessevalplan101721.pdf. Although NH has completed the Diversity and Cultural Competency (D&CC) and the Child Outcome Summary (COS) trainings for statewide staff outlined in the evaluation plan, data slippage has continued following the statewide COS training between September 2017 and May 2018. Analysis of data before and after the training shows patterns of statistically significant change in entry ratings and progress categories indicating practitioners increased understanding and accurately applying COS rating criteria. Prior to the 2017 statewide COS training, 31.92% of infants and toddlers received entry ratings of 1-3 for functional acquisition and use of knowledge and skills and 46.48% received entry ratings of 4 and 5. FFY20 COS 3B acquisition and use of knowledge and skills data shows 9.01% of infants and toddlers received entry ratings of 1-3 and 61.41% received entry ratings of 4 and 5. These findings are consistent with data that are more accurate and reliable after the COS training event. NH data previously included children with entry ratings prior to COS training and exit ratings post COS training. FFY20 data is the beginning of a new cohort that includes all children with entry and exit ratings post COS training.  
  
In addition, NH continues to scale up the use of Division for Early Childhood Recommended Practices (DEC RPs) across all local programs through Sustainable Early Engagement for Change (SEE Change) outlined in the evaluation plan. FFY20 data shows nine of 15 local programs are currently engaged in SEE Change and implementing DEC RPs at various levels. NH plans to scale up to include the remaining six local programs in FFY22. Following the complete scale up of all local programs in FFY23, NH will review the current evaluation plan for revisions.

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

New Hampshire (NH) continues to support the Comprehensive System of Personnel Development (CSPD) through (a) implementing evidence-based practices (EBPs) with fidelity, (b) scaling up EBPs across the system using principles of implementation science, and (c) sustaining promising practices with ongoing support. This structure of the CSPD system is a multi-tiered system to support staff as they learn and implement new evidence-based practices. The multi-tiered system includes in-state trainers and coaches using adult learning strategies to support local staff within each content area for ongoing integration of promising practices and sustain changes in practice. NH maintains funding within the CSPD budget to support trainers and coaches within each content area.   
  
All newly hired local staff are required to complete both the Diversity and Cultural Competence (D&CC) and Child Outcome Summary (COS) trainings within the first year of hire. During FFY20, D&CC trainings were not provided due to COVID-19 restrictions on in-person meetings. This training has not yet been developed for virtual. The COS training has been developed to provide virtually and was provided to 22 newly hired local staff during FFY20.  
  
The COS training program facilitated by ECTA staff throughout FFY16 included (a) COS evidence-based best practice; (b) data based decision-making, (c) adult learning strategies, and (d) facilitation strategies. The state rolled out the COS training to all 15 Part C FCESS local programs between September 2017 through May 2018. The training addressed a number of common misconceptions that had previously led to inaccuracies in ratings. This training has increased the capacity of providers’ understanding of COS, engage families in COS rating discussion, and increase consistency of accurately rating a child’s functional skills across outcome areas, including acquisition and use of knowledge and skills. The three years of data percentage decrease is consistent with changes in practice that would occur when providers had better understanding and more accurately applied COS rating criteria. Current performance of outcomes data are consistent with those expected from data that are more accurate. NH’s data collection system is becoming stronger and the observed decreases in the SiMR are an expected result from the training and practitioners understanding of COS rating criteria. NH believes that focus on increasing understanding of COS and COS ratings for FCESS staff statewide, has addressed data quality for Part C child outcomes.  
  
Sustainable Early Engagement for Change (SEE Change) involves implementing the Division of Early Childhood Recommended Practices (DEC RPs) for engaging children and families. During FFY20, three local programs were implementing these EBPs. Each local program implementing SEE Change maintains a Local Leadership Team (LLT) to guide the process within their individual program. Five new local programs, engaged in a virtual Adult Learning Strategies to Support Family Engagement and Peer Coaching training, during January and February 2021, provided by national trainers. The SEE Change State Leadership Team (SLT) includes Part C State Office staff and program directors from each of the three local programs implementing EBPs.

**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.**

By maintaining the Comprehensive System of Personnel Development (CSPD) infrastructure, the state ensures consistency of knowledge, understanding, and skills across the local programs and staff. D&CC and COS short-term and intermediate outcomes continued to be achieved including incorporating each family’s culture (priorities & beliefs) into IFSP outcomes and engaging families in COS rating discussions as observed through IFSP documentation reviews of individual child records. This knowledge and awareness assists professionals in identifying appropriate practices for families to implement into their natural environments.   
  
During FFY20 all 15 program including 206 staff participated in a COS Refresher training, which reviewed intermediate outcomes including the importance of family engagement in COS rating discussions and identifying natural environment activities to enhance child development and achieve outcomes. Twenty-two newly hired local program staff completed the COS training (short-term outcome) which included understanding of COS data, understanding functional outcomes, and how to engage families into COS rating discussions.  
  
SEE Change intermediate outcomes include: each local program maintaining a Local Leadership Team to guide the process within their individual program, the State Leadership team (SLT) uses data for decisions to scale-up, observations that families are increasing their engagement and use of practices within their natural environment, and observation of providers’ change in practices with implementing DEC RPs with families. Change in providers’ practices through DEC RPs using a coaching model enhances family engagement, which enhances their child’s development.  
  
The state has scaled up to include three additional programs totaling four out of 15 local programs implementing DEC RPs through SEE Change. Data collected from the SEE Change shows an average of family engagement increasing by 0.49% and child engagement increasing by 0.62% across the three additional programs. Provider practice data shows an average increase between 0.56% - 0.95% in providers’ to implement DEC RPs including environmental, family, instruction, and interaction practices focused on increasing family engagement.  
  
Research shows increased levels of family engagement is likely to enhance child growth and development across outcome areas including 3B SS2 acquisition and use of knowledge and skills (including early language/communication). NH believes that supporting local programs through the CSPD infrastructure with D&CC, COS, and SEE Change trainings and materials encourages change in professionals’ practice and increases their understanding of family priorities. Through D&CC, COS, and SEE Change increasing family engagement, local program professionals and families will enhance individual child development, and address the SiMR to improve child outcomes for all children and families.

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

NO

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

The State will continue to maintain the Comprehensive System of Personnel Development (CSPD) infrastructure to support the Diversity and Cultural Competency (D&CC), Child Outcome Summary (COS), and Sustainable Early Engagement for Change (SEE Change) trainings. D&CC and COS trainings will be provided for all newly hired local staff. The D&CC trainings will ensure all local staff are able to engage in conversation with families to understand the family’s beliefs, priorities, and concerns. The COS trainings will ensure all local staff understand COS data collection, functional outcomes, rating criteria, and appropriately engage families in COS rating discussions.

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

Diversity and Cultural Competence (D&CC) evidence-based practices focus on adult learning strategies. Trainers are prepared to use these evidence-based adult learning strategies to increase the cultural competence of local staff who work with children and families. Trainers use the evidence-based model to increase awareness of cultural bias, competence, and differences.  
  
Sustainable Early Engagement for Change (SEE Change) uses evidence-based practices from the Division of Early Childhood Recommended Practices (DEC RPs) related to engagement. The DEC RPs that focus on family engagement include environmental (E3, E4, and E5), family (F1, F3, F4, F5, and F6), Instruction (INS2, INS3, INS4, INS5, INS6, INS7, INS8, INS10, and INS13), and Interaction (INT1, INT2, INT3, and INT4, and INT5). Implementation of these DEC RPs is expected to increase the capacity of providers to engage children and their families and increase the caregivers’ capacity to engage with their children. Focusing on increasing the level of child and family engagement is a strategy that research shows is likely to enhance child growth and development across outcome areas including 3B SS2 acquisition use of knowledge and skills (including early language/communication). NH believes that focus on engagement will improve child outcomes addressing the SiMR.

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

Diversity and Cultural Competence (D&CC)  
NH Office of Health Equity (OHE), formerly the Office of Minority Health and Refugee Affairs (OMHRA) introduced the national D&CC evidence-based training to NH Part C in January 2015. This training included use of evidence-based adult learning strategies through a train-the-trainer model. Trainers are prepared to use these evidence-based adult learning strategies to increase the cultural competence of staff who work with children and families. The evidence-based model increases awareness of cultural bias, competence, and differences. Evidence-based adult learning strategies are a foundational facet of this training. Self-assessment, reflection, action planning, and other adult learning strategies that respect the breadth of experience of the NH FCESS staff have been key factors in the trainings success.  
  
All 15 local FCESS program staff completed the D&CC training during FFY17. NH believes that a focus on cultural awareness with all families will address the SiMR for Part C to improve child outcomes, as the SiMR is disaggregated by gender and race. Local staff have increased their capacity to engage families in cultural conversations that include priorities, beliefs, and values. This will ensure that IFSPs reflect family culture and families will value services provided, demonstrating achievement of D&CC intermediate outcomes of the logic model.  
  
  
Sustainable Early Engagement for Change (SEE Change)  
The SEE Change teaches providers how to coach parents using evidence-based engagement practices from the Division of Early Childhood Recommended Practices (DEC RPs) related to child and family engagement. Collaboration with national TA providers focused on building NH’s capacity to strengthen professional development, design support, and to improve the outcomes of children who are at risk for or who have developmental delays or disabilities. DEC RPs related to child and family engagement are used to enhance the effectiveness of the FCESS program staff and families (a) implemented DEC RPs, (b) engaged in coaching, (c) maintained state and local leadership teams for planning and evaluation, and (d) collected data on child engagement, family engagement, coaching fidelity, and provider practice fidelity.  
  
Through SEE Change, the capacity of providers to engage children and their families will increase the caregivers’ capacity to engage with their children. Implementation of DEC RPs increases the level of child and family engagement that research shows is likely to enhance child growth and development across outcome areas. NH believes that focus on engagement of families will enhance their child’s development and address the SiMR to improve child outcomes.

**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.**

Diversity and Cultural Competence (D&CC) trainers are prepared to use evidence-based adult learning strategies to increase the cultural competence of staff who work with children and families. Staff increase awareness of cultural bias, competence, and differences. NH believes that a focus on cultural awareness with all families will address the SiMR to improve child outcomes in the disaggregated data of gender and race. Local staff increase their capacity to engage families in cultural conversations that include priorities, beliefs, and values, which ensures that IFSP outcomes reflect family culture, and in turn families’ value the services that are provided.   
  
  
Sustainable Early Engagement for Change (SEE Change) increases practitioner’s ability to coach parents and caregivers using evidence-based engagement practices from the Division of Early Childhood Recommended Practices (DEC RPs). These practices increase the capacity of providers to engage families and increase the caregivers’ capacity to engage with their child. Through the adoption of evidence-based practices, SEE Change focuses on increasing the level of child and family engagement, which is a strategy that research shows is likely to enhance child growth and development across outcome areas including acquisition and use of knowledge and skills (including language/communication). NH believes that change in provider practice to focus on child and family engagement will address the SiMR to improve child outcomes with engaged families.

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

Family Outcome Survey (FOS) data is reviewed yearly to measure families reporting of satisfaction in regards to their culture (priorities, values, and beliefs) being respected. The FOS data for FFY20 showed 95.81% of families reported above average satisfaction with practitioners listening to and respecting their choices. Data also showed 93.46% of families reported above average satisfaction with practitioner talking with them about what they think is important for their child. This data supports a consistently positive impact of the D&CC trainings on family satisfaction regarding their culture (priorities, values, and beliefs) being respected.  
  
  
The following SEE Change tools measure change in providers’ practices consistent with fidelity and change in child and family engagement. Reaching Potentials through Recommended Practices Observation Scale – Home Visiting (RP2 OS-HV) measures provider implementation of DEC RPs with families on a scale of 0-5. Observations are conducted monthly by peer-to-peer coaches via in-person or virtually, then discussed during coaching sessions. Scoring data is reported to the Part C State Office quarterly. Local and state leadership teams’ review individual provider and overall program data for fidelity. Engagement Assessment Scale for ESS (EASE) measures the child and caregivers level of engagement on a scale of 1-4. Videos of engagement are viewed monthly during peer-to-peer coaching sessions; data is recorded monthly and reported to the Part C State Office quarterly. Both local and state leadership teams, review child and caregiver engagement data for overall increases in engagement due to change in provider practices. FFY20 RP2 OS-HV data supports change in practice with an overall average points increasing implementation of DEC RPs following categories: environment 0.95%, family 0.73%, instruction 0.57%, and interaction 0.54%. EASE data supports increased child and family engagement with an overall average points increase of child 0.62% and caregiver 0.49% with families receiving services from providers implementing DEC RPs.

**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.**

The Child Outcome Summary (COS) Indicator 3B SS2 data disaggregated by individual local program indicates the four programs who are fully trained and implementing SEE Change DEC RPs have improved COS percentages in comparison to local programs who have not yet actively engaged in SEE Change. Three years of COS comparison data shows two of the four programs fully implementing DEC RPs demonstrate improved percentages in outcome 3B SS2. Three of these four programs show two years of data above the state data reported during FFY19, 53.65%, and FFY20, 48.44%. Of the 11 local programs not yet fully implementing the DEC RPs, six programs show data below the state FFY20 reported data with two of these six programs significantly below the state data, influencing statewide overall performance.

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

New Hampshire (NH) will continue to provide both Diversity and Cultural Competence (D&CC) and Child Outcome Summary (COS) required trainings to newly hired statewide local FCESS staff two to three times per year, which will maintain a level of knowledge and understanding statewide. The Comprehensive System of Personnel Development (CSPD) budget will continue to fund these trainings through individual line items. Family Outcome Survey’s will continue to provide stakeholders with data about the impact D&CC trainings have on family’s priorities, beliefs, and values. Indicator 3B COS data will advise stakeholders on the effects of the COS training and identify future trainings needed. State Leadership Teams will continue to meet as needed to ensure sustainability.  
  
Five local programs engaged in an “Evidence-Based Adult Learning Strategies to Support Family Engagement & Peer Coaching” training provided by national trainers and a state SEE Change training which included DEC RPs focused on family and child engagement and data collection during FFY20. These programs will begin implementing the DEC RPs during FFY21. The state anticipates a total of 11 out of 15 local programs engaged in SEE Change at various levels during FFY21.  
  
NH Part C State Office plans to further scale-up Sustainable Early Engagement for Change (SEE Change) to include three additional local programs during FFY21. The programs will participate in an “Evidence-Based Adult Learning Strategies to Support Family Engagement & Peer Coaching” training provided by the national trainers. The state anticipates that these three additional programs will begin implementation of the DEC RPs beginning FFY22 increasing the number of local programs across the state to include 12 out of 15 local programs implementing DEC RPs focused on child and family engagement. Analysis of change in provider practice and child/family engagement will continue with current data collection tools. The CSPD budget will continue to fund SEE Change through an individual line item.  
  
NH Part C Coordinator continues to hold a place on the Pyramid Model State Leadership and iSocial State Leadership teams. This involvement with state leadership promises to align the Part C system with key early childhood system partners in the state to benefit from a shared system of personnel support. These partnerships will also help to align Part B, Part C, and other early childhood partners for infrastructure improvements to the early childhood system. The line items in the CSPD budget will assist in facilitating training and accessing trainers. NH Part C State Office will pursue national technical assistance personnel as needed, such as ECTA.

**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.**

New Hampshire (NH) reported in the FFY19 submission that (1) additional COS trainers would be sought and teamed with current Master Cadre during FFY20, (2) six additional programs would be trained and implementing SEE Change using DEC RPs, and (3) that NH anticipated all 15 local programs would be implementing DEC RPs by June of 2023. Due to the COVID-19 continued pandemic, Part C Office staff capacity, and local program staff capacity, NH had difficulty meeting the initial timelines set.   
  
COS trainers are continued to be sought and compensation is available. However, local staff capacity is low due to lack of staffing and individual staff dealing with their own individual family, school, and work schedules during the COVID-19 pandemic. The state will continue to seek COS trainers.   
  
Due to local staff capacity and/or lack of staffing, of the six local programs who engaged in the evidence-based Adult Learning Strategies training by national trainers during FFY20, one program needed to step out of the process and did not complete the in-state SEE Change training. The remaining five programs needed to postpone the beginning of implementation at the program level due to various reasons (i.e. staffing or other program issues). NH anticipates scaling up to include the final six local programs who have not yet begun any trainings for SEE Change. These programs will be divided into two groups with one group implementing DEC RPS during FFY23 and the other group implementing during FFY24. The COVID-19 pandemic and the state staffing capacity has changed NH’s timeline for complete implementation of the DEC RPs across all local programs across the state from June 30, 2023 to June 30, 2024.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

The Part C State Office intentionally invites and engages stakeholders of those interested and/or affected by significant decisions regarding the Part C System. Stakeholders in NH include (a) families, (b) providers, (c) Area Agencies (AAs), (d) other early childhood programs, (e) advocates, and (f) other programs serving children and their families, including but not limited to programs in areas of education, family support, and health.   
  
The Interagency Coordinating Council (ICC) membership reflects federal membership requirements. Although there are some vacancies in the appointed membership that the ICC is working to fill, it is well attended by the current members. The ICC has increased family member participation during FFY20. Families are reimbursed for mileage and childcare to participate in meetings, work groups, WESS orientation and other times when stakeholder input may be collected. Remote participation is available through the use of technology, video conferencing, email, public hearing, and phone calls. NH is continuously working on ICC family recruitment and documents to explain the importance and purpose of the ICC.  
  
Stakeholder input is gathered through stakeholder activities such as: (a) group email discussions, (b) face-to-face meetings, (c) conference calls, and (d) web workshops to enhance decision making for the statewide system. The primary stakeholder meetings include the Quarterly FCESS meetings and the ICC meetings, which typically convene every other month. However, due to the continued COVID-19 pandemic during FFY20, ICC meetings were rescheduled and held virtually monthly. FCESS state and local staff participate in public awareness activities, organizations, councils, and committees as stakeholders to give and gather input throughout the year. Annual Family Outcome Surveys help the Part C system to gather family input. Strong partnership with New Hampshire Family Voices (NHFV) and Parent Information Center (PIC) enable the state staff to gather family input through their networks.  
  
The Part C State office held stakeholder meetings with ICC on 11/6/20, 12/4/20, 2/5/21, 4/2/21, 6/4/21, 9/10/21, 10/1/21, and 12/3/21 and Quarterly Director meetings on 12/9/20, 3/10/21, 6/9/21, 9/29/21, and 12/8/21. These stakeholder meetings included reviewing six years of data, trendlines, and average actual growth for each indicator. Following review of data and discussions 2020 – 2025 targets were set for Indicators 2, 4, 5, and 6. A new baseline and 2020 – 2025 targets were set for Indicator 3a, b, and c. Meetings also included review and discussion of SSIP data and a new baseline and 2020 – 2025 targets were set for SiMR. Raw data and data charts for each indicator scheduled to be discussed were sent to all stakeholders via email prior to meetings along with indicator measurments. The Part C State Office requested stakeholders review the data and submit any questions they may have prior to scheduled meetings. During the meetings, the Part C State Office staff explained the individual indicators data, the trendline and actual growth, and posed questions to determine target setting. Stakeholders engaged in conversations regarding improvement strategies. All stakeholders were encouraged to submit further thoughts/suggestions via email or phone following meetings for further evaluation and progress. The Part C State Office collected and compared feedback for both stakeholder groups and finalized 2020 - 2025 target setting for FFY20 SSP/APR. Stakeholder feedback for 2020 – 2025 target setting is reported within each specific indicator included in this FFY20 SSP/APR report.

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

Stakeholder feedback and support for the SSIP informs and drives all aspects of the work moving forward. Throughout the implementation of the SSIP content areas, the Part C State Office shares updates and data with early childhood partners at Interagency Coordinating Council (ICC) meetings four to five times per year and with Area Agency and local program staff at quarterly FCESS staff meetings four times per year. In addition to updating and sharing data, the Part C Office actively solicits input into the necessary infrastructure and improvement strategies.   
  
The Part C State Office works with the Parent Information Center (NH’s federally funded parent center) and NH Family Voices (NH’s federally funded Family-to-Family Health Information Center) to gather family feedback. Evidence of SSIP updates and feedback are included in ICC and Quarterly meeting agendas and notes. The FCESS website publicly posts ICC notes, following approval by the Council. At each of the stakeholder meetings, NH’s Part C State Office staff answer questions, review data, and gather feedback to inform the continued SSIP implementation and evaluation process. Stakeholder input is received through face-to-face meetings, distance/remote meetings, email discussions, and phone. State and Local Leadership Teams for each content area use stakeholder feedback, data, and information collected from staff to inform their planning and evaluation. The Bureau for Family Centered Services (BFCS) administration is also engaged in feedback cycles about SSIP activities. BFCS administrators give feedback and guidance regarding infrastructure development, system change, and budget management. This feedback informs the Part C State Office staff and State Leadership Teams about funding and planning for each SSIP activity.  
  
The Part C State office held stakeholder meetings with ICC on 12/3/21 and FCESS Directors on 12/8/21 to review seven years, 2013-2019, of COS SSIP Indicator 3 Summary Statement 2 and disaggregated gender and minority data showing a continued decrease during FFY18-20 following a statewide COS training event that occurred during FFY17. Current data is consistent with changes in practice that would occur when practitioners understand and more accurately apply rating criteria. Stakeholders also reviewed the State Child Outcomes Data Profile New Hampshire Part C 2019, provided by ECTA and DaSy, which showed that NH statewide performance has moved from being more than one standard deviation above the national average to closer to the national average after NH’s statewide COS training. This data is indicative of increased data quality and actually a better reflection of the functioning and progress of children who have been served in NH all along.  
  
The Part C office provided stakeholders data for review via email prior to meetings. During meetings, review of data included average year over year growth/change and trend line forecasting. Due to 2013 SiMR baseline and previous targets being set prior to the statewide training event and FFY18-20 data showing a continued decrease following training, the state and stakeholders agreed to set a new baseline using FFY20 data of 48.44%. SiMR targets for 2020-2025 show an increase of 0.2% over new 2020 baseline of 48.44% by FFY25 target of 48.64%. This rate of increase will maintain NH to be close or above the national average rate.  
  
Stakeholders also provided input to establish a new baseline for FFY20 and targets for FFY20-25 for the SiMR subsets of gender and minority groups. Indicator 3 Outcome B (3B) Summary Statements 1 and 2 (SS1 and SS2) are disaggregated by gender in 3B SS1 and 3B SS2 and by race (minority group) in 3B SS2. A new baseline of 60.22% was set for boys 3B SS1 with FFY20 data and targets increasing to 60.42% in 2025. The new baseline for boys 3B SS2 of 46.27% was set with FFY20 data and targets increasing to 47.27% in 2025. A new baseline of 35.56% was set for the minority group 3B SS2 with FFY20 data and targets increasing to 38.06% in 2025. It is anticipated that the improvement strategies targeting boys and children included in the minority group, will result in improved outcomes for all children across NH.  
  
Stakeholders indicated that data collected during FFY18-19 included a cohort of infants and toddlers who received COS entry ratings prior to training and exit ratings post training. FFY20 current data includes a new base cohort of infants and toddlers with entry and exit ratings post training. Therefore, FFY20 current data indicates a new starting baseline in all data points. Furthermore, the stakeholder groups will be engaged in reviewing exit data by gender and race due to questions regarding families of these boys and minority subgroups may be withdrawing from the Part C system sooner than families of girls or the white group.

**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.**

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

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

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

In response to OSEP FFY 2020 Indicator 11 Response: “OSEPs Required Actions to the State’s FFY 2019 SPP/APR required the State to make available the attachment(s) not posted on the US Department of Education’s IDEA website as soon as practicable, but no later than 120 days after the date of the determination letter. The State has not publicly posted the attachment(s).”   
  
New Hampshire’s website has been under a new website redesign for the past year. Due to the redesign and development of the new site, documents were moved from the old to the new, misplaced, or accidently deleted. NH is unable to make edits to its current website until the new website launches. The new website is projected to launch on May 3, 2022. NH will repost the FFY2019 SPP/APR attachments as soon as available to do so.

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.  
  
The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 11 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role**

Designated Lead Agency Director

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

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Nicole Bushaw

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**Submitted on:**

04/20/22 10:03:15 AM

# ED Attachments

  