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

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

**For reporting on   
FFY 2019**

**Ohio**

U.S. Department of Education seal

**PART C DUE   
February 1, 2021**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State’s systems designed to drive improved results for infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. This introduction must include descriptions of the State’s General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

## Intro - Indicator Data

**Executive Summary**

DODD has continued its focus on the delivery of high quality technical assistance and professional development opportunities to EI service providers to support the effective and appropriate implementation of IDEA Part C regulations and evidence-based EI practices. At the beginning of this reporting period in July 2019, DODD had begun implementation of new policies and forms for Ohio’s Early Intervention (EI) program that reflected a year of active and meaningful stakeholder input. DODD conducted regional trainings throughout the summer and autumn of 2019 that highlighted changes in the policies as well as reaffirming other important policy aspects that were not changing. Significantly, Ohio also expanded eligibility to include children diagnosed with neonatal abstinence syndrome (NAS) and elevated blood lead levels (EBLL). In March 2020, DODD quickly changed focus to supporting local EI programs in providing EI services during the COVID-19 pandemic. DODD provided guidance related to virtual EI services, evaluations, and transition during the pandemic and also emphasized the value of resource-based service coordination as a support to families. DODD gave technical assistance to ensure parents’ protections under the Individuals with Disabilities Education Act (IDEA) during the pandemic. DODD expanded the EI website to include a COVID-19 section for the considerable guidance and resources available for EI providers. Data collection changes due to the pandemic are detailed below. DODD and Ohio’s local EI programs have made a concerted effort during the past eight months to ensure children and families maintain access to EI services. This all-important work continues to be the focus of the department.

Additional information related to data collection and reporting

While the COVID-19 pandemic has had some effect on data collection and reporting in FFY19, it has been limited for this Annual Performance Report (APR). Over the past several years, DODD has divided Ohio’s 88 local EI programs into three cohorts and monitored each cohort using one quarter of data for one of Indicators #1, 7, or 8A/8C (all local EI programs are monitored annually for Indicator #8B regardless of cohort). In this way, DODD monitors each cohort using a full quarter of data for one indicator each year and, in three years, DODD completes monitoring in all three indicators for each cohort. The quarters used for each cohort change from year to year to ensure that data from all parts of the year are ultimately utilized and are, thus, representative. For this reporting period, DODD made the decision not to utilize the April-June 2020 quarter as it would not be representative of local EI programs’ compliance due to the pandemic. Instead, DODD used either the October-December 2019 quarter or January-March 2020 quarter. This resulted in a schedule change for only one indicator from what had been planned in 2019. In March 2020, DODD implemented a “COVID-19 non-compliance reason” and provided guidance for local EI programs about its use. This guidance was refined in July 2020 after the Office of Special Education Programs (OSEP) provided guidance to states about situations where non-compliance due to the COVID-19 pandemic may be acceptable. Although there was slippage for several of the Indicator #3 components, analysis does not suggest that this slippage is due to the pandemic. Instead, DODD believes that this slippage is a result of training and technical assistance related to improving the accuracy of child outcomes summary (COS) statement scoring. Finally, DODD primarily used an online format for its family questionnaire, the results of which are reported in this APR as part of Indicator #4. The response rate was down only somewhat from previous years with this new format.

**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.**

In Ohio, the requirements for EI providers are outlined in Ohio Administrative Code at 5123-10-01 (Early Intervention Services - Procedural Safeguards); 5123-10-02, Appendix A, Appendix B, and Appendix C (Early Intervention Eligibility and Services); 5123-10-03 (Early Intervention Services - System of Payments); and 5123-10-04 (Credentials for EI Service Coordinators and EI Service Coordination Supervisors). These rules apply to any EI service provider or other entity responsible for carrying out a requirement of Part C EI in Ohio, and DODD is directly responsible for overseeing the implementation of these rules.  
  
In addition to these rules, Ohio utilizes its website, guidance documents, memos, conference calls, and newsletters to provide technical assistance around the requirements of IDEA Part C. EI program consultants also reiterate the rules through various communication methodologies including individual calls, e-mails, conference calls, webinars, on-site trainings, and on-site focused technical assistance about the requirements. Topic-specific guidance on rules is also offered via web-based training modules. The lead agency monitors all EI programs annually on a rotating schedule through three compliance indicators: 45-Day timeline; Timely Receipt of Services; and Transition, including Transition Planning Conference and Transition Steps and Services. Local Educational Agency (LEA) notification is monitored for every program annually. Any EI program with less than 100% compliance on any of these indicators is issued a finding and provided with targeted technical assistance, as needed. Data for the program are monitored monthly until compliance is verified at 100%. Finally, all local EI programs have a technical assistance plan that addresses these priorities.

**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.**

Six regional EI program consultants work at DODD and provide timely, high quality technical assistance to all 88 Ohio county EI programs. The program consultants work closely with the data and monitoring team to ensure that technical assistance is targeted to local program needs. Program consultants make site visits, engage in conference calls, and complete record reviews and other activities to support local programs’ implementation of state and federal Part C regulations and best EI practices. All local programs have an active technical assistance and training plan drafted in concert with the assigned program consultant. This plan reflects local needs and strengths and serves as a roadmap for implementation of IDEA and evidence-based EI practices. During this reporting period, and in conjunction with Ohio’s State Systemic Improvement Plan (SSIP) work, there was particular focus on improving the accuracy of child outcomes summary (COS) statement ratings. Starting in March, DODD provided a wealth of technical assistance around best practices for delivering EI services virtually. DODD worked with national tele-EI expert, Larry Edelman, to provide support to local EI programs in Ohio. DODD also provided more intensive training in best tele-EI practices to a smaller group of practitioners in the state who could serve as a resource to local EI programs. This work remains ongoing.  
  
DODD continues to communicate via a formal update memo on a bi-weekly basis with the EI field to provide important updates and explanations about program requirements, due dates, and training opportunities. The memo is geared to local EI program leadership, but any interested person can sign up to receive the communication. As of November 2020, the communication reaches approximately 4000 recipients. The communications are also archived on the EI program’s website.

**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.**

In this reporting period, Ohio continued to provide a significant number of trainings. Of particular note, was a multi-module “course” for service coordinators. This course details all of service coordinators’ responsibilities in EI under state and federal regulations as well as best practices in EI. The course was required as of July 2019 for service coordinators seeking an initial credential to work as a service coordinator in Ohio’s EI system. DODD also provided trainings related to serving children diagnosed with NAS or EBLL, the two new diagnoses part of Ohio’s EI eligibility expansion. Many of Ohio’s EI trainings are available in an electronic format so they can be accessed remotely and at convenient times for participants.   
  
Stakeholder input is sought throughout development of all DODD-created trainings. Not only does DODD involve its State Inter-Agency Coordinating Council (SICC) in discussions and activities related to these trainings, but also pilots all DODD-created trainings with local stakeholders. Any feedback from the SICC, pilot participants, and other stakeholders is incorporated into updated versions of the trainings prior to broader release to the EI field.

**Stakeholder Involvement:**

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

Stakeholders in Ohio are engaged in numerous ways, including calls, public postings inviting input and feedback, quarterly State Interagency Coordinating Council (SICC) meetings, and requests for feedback before any significant program change is made.   
  
The lead agency invites public comment on the APR, annual application for Part C IDEA funds, and any rule or form changes. The public is invited to provide comment for a minimum of thirty calendar days for any document submitted to the USDOE/OSEP. All documents are posted on the program website (https://ohioearlyintervention.org/) for a minimum of sixty calendar days.  
  
Targets for the state performance plan (SPP) were a topic of much discussion over an extend period of time with the SICC and broader EI stakeholder group in order to allow members sufficient time to review data, request additional data, and ask questions. Members discussed the targets at the March 2019, May 2019, and August 2019 SICC meetings before settling on targets. In this time period, DODD presented data, offered recommendations, sought feedback, and supported the SICC in finalizing targets. After the clarification period for the FFY18 APR and feedback from OSEP in spring 2020, DODD again discussed targets with the SICC. At its May 2020 meeting, the SICC also discussed whether it would be appropriate to update the state’s baseline data for Indicators #2, 3, 4, 5, and 6 given significant program changes over the past ten years.  
  
EI program leadership meets frequently with EI stakeholder organizations and committees. EI program leadership attends regularly scheduled meetings of stakeholder groups related to county boards of developmental disabilities; the Developmental Disabilities Council; the Universal Newborn Hearing Sub-Committee; and Family and Children First Council, which is responsible for overseeing the work of EI service coordination at the local level in Ohio. In addition, EI program leadership takes part in numerous state cross-agency initiatives. At these meetings, EI program leadership provides updates relevant to the stakeholder group being addressed and seeks stakeholder input about the EI program.  
  
Announcements and solicitations for feedback are distributed widely via the program’s bi-weekly communication and EI website to EI providers, parents, stakeholders, grantees, service providers, and county boards of developmental disabilities. In addition to these electronic communication strategies, DODD engages numerous workgroups, including the SICC and a larger, more diverse EI Stakeholder group, at quarterly in-person meetings to discuss any business in Early Intervention that needs input, feedback, or assistance.

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

NO

**Reporting to the Public:**

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

DODD provides the public with a report on each EIS program’s performance on the APR indicators, as well as each program’s determination category by posting the 88 EI program reports on the program website (https://ohioearlyintervention.org/) by June 1 of each calendar year. The FFY18 reports were sent to all local EIS programs and posted to the EI website in January 2020. The FFY19 reports will be sent to local programs and added to the EI website by June 2021.

## Intro - Prior FFY Required Actions

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

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

## Intro - OSEP Response

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

## Intro - Required Actions

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

# Indicator 1: Timely Provision of Services

**Instructions and Measurement**

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

**Compliance indicator:** Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must be based on actual, not an average, number of days. Include the State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

**Measurement**

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

**Instructions**

If data are from State monitoring, describe the method used to select early intervention service (EIS) programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

The State’s timeliness measure for this indicator must be either: (1) a time period that runs from when the parent consents to IFSP services; or (2) the IFSP initiation date (established by the IFSP Team, including the parent).

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

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

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

## 1 - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.46% | 99.05% | 99.16% | 98.64% | 99.40% |

**Targets**

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

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner** | **Total number of infants and toddlers with IFSPs** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,172 | 1,362 | 99.40% | 100% | 99.93% | 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.***

189

**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).**

Ohio defines timely receipt of early intervention services as services that are delivered for the first time within 30 days of the signed IFSP to which they are added.

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

State monitoring

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

For compliance analyses, EIS programs were selected for Indicator 1, Indicator 7, or Indicators 8A and C. Ohio has implemented a monitoring cycle that ensures an even and representative selection of EIS programs each fiscal year for one of the aforementioned compliance indicators. All local programs have data analyzed for all of these compliance indicators within a three-year period. DODD completes activities related to each of these one at a time on a rotating schedule throughout each year. As part of this process, findings are issued as soon as possible after noncompliance is identified (within less than three months of discovery), as specified in #7 of the FREQUENTLY ASKED QUESTIONS REGARDING IDENTIFICATION AND CORRECTION OF NONCOMPLIANCE AND REPORTING ON CORRECTION IN THE STATE PERFORMANCE PLAN (SPP)/ANNUAL PERFORMANCE REPORT (APR).  
   
Twenty-eight EIS programs were scheduled to have their data for this indicator monitored for FFY 2019. All children among the 28 selected EIS programs who had services due to start between January 1, 2020 and March 31, 2020 were included in Ohio’s FFY19 TRS analysis. Ohio used monitoring data from its data system to determine the percent compliant for this indicator. One noncompliant record was identified in one local program during the baseline analysis, but DODD looked at more recent data as part of the analysis, and the local program subsequently corrected the noncompliance and therefore was not issued a finding.   
  
The 1,361 child records counted as being compliant include 189 that were non-timely due to documented exceptional family circumstances. These 189 child records are included in the numerator and denominator. No findings were issued as a result of the baseline analysis. See below for a breakdown of reasons for untimely receipt of services:  
• Exceptional family circumstances: 189 children  
• System reason: 1 child  
  
No TRS findings were due for correction in FFY19. One TRS finding was reported in Ohio’s FFY18 APR based on FFY18 data, but this finding was identified and issued in FFY19, so correction is due in FFY20 and the status of correction will be reported in Ohio’s FFY20 APR.

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

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

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

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

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

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 2: Services in Natural Environments

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 83.91% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= | 85.00% | 90.00% | 95.00% | 100.00% | 100.00% |
| Data | 86.29% | 94.41% | 98.14% | 98.95% | 98.43% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 98.00% |

**Targets: Description of Stakeholder Input**

At the August 13, 2014 SICC meeting, stakeholders proposed that we use the FFY 2012 data as the FFY 2013 target, given we were setting a target for activities which had already taken place. That methodology was applied to all performance indicators. Target methodologies, or different ways we could set the targets, were discussed at the August 2014 SICC meeting. A proposal was provided back to the SICC and the larger EI Stakeholder group in November 2014 at which time each indicator’s proposed set of targets was discussed at an in-person meeting. Consensus was reached, with some edits from that discussion resulting in the targets posted for public comment within the APR on November 25, 2014. After the collection of public comment, no changes were needed or made to the targets agreed upon by the SICC and EI Stakeholders.  
  
At the state’s March 2019 SICC and larger EI stakeholder group meeting, DODD provided an overview of the APR indicators, along with a summary of the state’s targets and results for the FFY13 through FFY18 APR cycle, indicating that the group would have a discussion at the following meeting to set targets for the next APR cycle. At the May 2019 meeting, the group had an in-depth discussion about SPP/APR targets and determined the starting target for the next SPP/APR cycle for all indicators should be the FFY17 percentage (rounded down) and the state’s targets should gradually increase by the end of the SPP/APR cycle. By the state’s August 2019 meeting, DODD had become aware that the current SPP/APR cycle would be extended for one year, and informed the SICC and larger EI stakeholder group of this. The group reviewed the targets discussed at the previous meeting, and agreed to keep the FFY19 targets the same as what had been discussed, but adjusted targets as needed so they were greater than the baseline percentage.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 11,831 |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Total number of infants and toddlers with IFSPs | 11,995 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings** | **Total number of Infants and toddlers with IFSPs** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 11,831 | 11,995 | 98.43% | 98.00% | 98.63% | Met Target | No Slippage |

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

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3: Early Childhood Outcomes

**Instructions and Measurement**

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

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

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

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

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

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

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

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

**Measurement for Summary Statement 1:**

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

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

**Measurement for Summary Statement 2:**

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

**Instructions**

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

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

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

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

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

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

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

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

## 3 - Indicator Data

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

NO

**Targets: Description of Stakeholder Input**

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A1** | 2008 | Target>= | 60.00% | 61.00% | 62.00% | 63.00% | 64.00% |
| **A1** | 63.02% | Data | 63.22% | 57.97% | 54.26% | 54.04% | 53.94% |
| **A2** | 2008 | Target>= | 67.00% | 68.00% | 69.00% | 70.00% | 71.00% |
| **A2** | 63.34% | Data | 65.65% | 67.17% | 67.87% | 67.72% | 65.40% |
| **B1** | 2008 | Target>= | 60.00% | 61.00% | 62.00% | 63.00% | 64.00% |
| **B1** | 62.85% | Data | 62.16% | 62.69% | 62.08% | 60.73% | 61.63% |
| **B2** | 2008 | Target>= | 61.00% | 62.00% | 63.00% | 64.00% | 65.00% |
| **B2** | 62.93% | Data | 59.96% | 63.24% | 62.68% | 60.81% | 57.59% |
| **C1** | 2008 | Target>= | 65.00% | 66.00% | 67.00% | 68.00% | 69.00% |
| **C1** | 62.50% | Data | 65.31% | 62.78% | 64.87% | 63.82% | 63.80% |
| **C2** | 2008 | Target>= | 65.00% | 66.00% | 67.00% | 68.00% | 69.00% |
| **C2** | 63.49% | Data | 63.71% | 60.22% | 60.16% | 58.10% | 56.16% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1>= | 63.10% |
| Target A2>= | 67.00% |
| Target B1>= | 62.90% |
| Target B2>= | 63.00% |
| Target C1>= | 63.00% |
| Target C2>= | 63.50% |

**FFY 2019 SPP/APR Data**

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

8,156

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

| **Outcome A Progress Category** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 75 | 0.92% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 2,371 | 29.07% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 931 | 11.41% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,621 | 19.87% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 3,158 | 38.72% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 2,552 | 4,998 | 53.94% | 63.10% | 51.06% | Did Not Meet Target | Slippage |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 4,779 | 8,156 | 65.40% | 67.00% | 58.59% | Did Not Meet Target | Slippage |

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

Ohio’s new IFSP form implemented in July 2019 more prominently emphasizes the assessment and COS process and the EI TA consultants have prioritized the COS process in local programs’ TA and training plans this reporting year. Thus, DODD believes the slippage is primarily due to improved processes for obtaining COS scores and better data quality.

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

Ohio’s new IFSP form implemented in July 2019 more prominently emphasizes the assessment and COS process and the EI TA consultants have prioritized the COS process in local programs’ TA and training plans this reporting year. Thus, DODD believes the slippage is primarily due to improved processes for obtaining COS scores and better data quality.

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 74 | 0.91% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 2,505 | 30.71% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,517 | 18.60% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 2,202 | 27.00% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 1,858 | 22.78% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 3,719 | 6,298 | 61.63% | 62.90% | 59.05% | Did Not Meet Target | Slippage |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 4,060 | 8,156 | 57.59% | 63.00% | 49.78% | Did Not Meet Target | Slippage |

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

Ohio’s new IFSP form implemented in July 2019 more prominently emphasizes the assessment and COS process and the EI TA consultants have prioritized the COS process in local programs’ TA and training plans this reporting year. Thus, DODD believes the slippage is primarily due to improved processes for obtaining COS scores and better data quality.

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

Ohio’s new IFSP form implemented in July 2019 more prominently emphasizes the assessment and COS process and the EI TA consultants have prioritized the COS process in local programs’ TA and training plans this reporting year. Thus, DODD believes the slippage is primarily due to improved processes for obtaining COS scores and better data quality.

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 58 | 0.71% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 2,454 | 30.09% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,514 | 18.56% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 2,658 | 32.59% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 1,472 | 18.05% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 4,172 | 6,684 | 63.80% | 63.00% | 62.42% | Did Not Meet Target | Slippage |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 4,130 | 8,156 | 56.16% | 63.50% | 50.64% | Did Not Meet Target | Slippage |

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

Ohio’s new IFSP form implemented in July 2019 more prominently emphasizes the assessment and COS process and the EI TA consultants have prioritized the COS process in local programs’ TA and training plans this reporting year. Thus, DODD believes the slippage is primarily due to improved processes for obtaining COS scores and better data quality.

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

Ohio’s new IFSP form implemented in July 2019 more prominently emphasizes the assessment and COS process and the EI TA consultants have prioritized the COS process in local programs’ TA and training plans this reporting year. Thus, DODD believes the slippage is primarily due to improved processes for obtaining COS scores and better data quality.

**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 | 11,886 |
| 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. | 3,793 |

| **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.**

Beginning in January 2015, the Child Outcomes Summary process was integrated into the child and family assessment and overall IFSP process. At that time, Ohio began to collect the following Child Outcomes Summary statements (adopted from Maryland), using its data system, for each of the three outcome areas:  
  
• Relative to same age peers, child’s functioning might be described as like that of a much younger child. He shows early skills, but not yet immediate foundational or age expected skills in this outcome area  
• Relative to same age peers, child is showing some emerging or immediate foundational skills, which will help him to work toward age appropriate skills in the area of (outcome).  
• Relative to same age peers, child is not yet using skills expected of his age. He does however use many important and immediate foundational skills to build upon in the area of this outcome  
• Relative to same age peers, child shows occasional use of some age expected skills, but more of his skills are not yet age expected in the area of this outcome  
• Relative to same age peers, child shows many age expected skills, but continues to show some functioning that might be described like that of a slightly younger child in the area of this outcome  
• Relative to same age peers, child has the skills that we would expect of his age in regard to this outcome; however, there are concerns  
• Relative to same age peers, child has all of the skills that we would expect of a child his age in the area of this outcome  
  
The COS is required as part of the initial assessment process, as well as annually, so entry COS are completed as part of the IFSP process and documented on Ohio’s IFSP form, as well as in the state data system. Local programs still use the decision tree, along with all the information discussed in the child and family assessments to help them choose which statement above best describes the child's development comparable to same-age peers. Each statement above corresponds to a score of 1 through 7, respectively.  
  
Exit COS are also required for all children who have been served in Early Intervention in Ohio, and are exiting for a reason other than being deceased or loss of contact with the family. The Exit COS is not a part of any other particular process, but, like the entry and annual COS, is completed by the IFSP team, including the family.

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

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

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

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

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2006 | Target>= | 95.00% | 96.00% | 98.00% | 99.00% | 100.00% |
| A | 94.53% | Data | 93.13% | 93.84% | 94.82% | 95.43% | 96.46% |
| B | 2006 | Target>= | 97.00% | 98.00% | 99.00% | 100.00% | 100.00% |
| B | 94.74% | Data | 94.88% | 95.17% | 95.42% | 95.92% | 96.82% |
| C | 2006 | Target>= | 96.00% | 97.00% | 98.00% | 99.00% | 100.00% |
| C | 93.39% | Data | 94.67% | 94.48% | 94.50% | 94.89% | 96.14% |

**Targets**

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

**Targets: Description of Stakeholder Input**

At the August 13, 2014 SICC meeting, stakeholders proposed that we use the FFY 2012 data as the FFY 2013 target, given we were setting a target for activities which had already taken place. That methodology was applied to all performance indicators. Target methodologies, or different ways we could set the targets, were discussed at the August 2014 SICC meeting. A proposal was provided back to the SICC and the larger EI Stakeholder group in November 2014 at which time each indicator’s proposed set of targets was discussed at an in-person meeting. Consensus was reached, with some edits from that discussion resulting in the targets posted for public comment within the APR on November 25, 2014. After the collection of public comment, no changes were needed or made to the targets agreed upon by the SICC and EI Stakeholders.  
  
At the state’s March 2019 SICC and larger EI stakeholder group meeting, DODD provided an overview of the APR indicators, along with a summary of the state’s targets and results for the FFY13 through FFY18 APR cycle, indicating that the group would have a discussion at the following meeting to set targets for the next APR cycle. At the May 2019 meeting, the group had an in-depth discussion about SPP/APR targets and determined the starting target for the next SPP/APR cycle for all indicators should be the FFY17 percentage (rounded down) and the state’s targets should gradually increase by the end of the SPP/APR cycle. By the state’s August 2019 meeting, DODD had become aware that the current SPP/APR cycle would be extended for one year, and informed the SICC and larger EI stakeholder group of this. The group reviewed the targets discussed at the previous meeting, and agreed to keep the FFY19 targets the same as what had been discussed, but adjusted targets as needed so they were greater than the baseline percentage.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 1,271 |
| Number of respondent families participating in Part C | 10,570 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 1,224 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 1,269 |
| B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs | 1,235 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 1,270 |
| C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn | 1,225 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 1,269 |

| **Measure** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- |
| A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2) | 96.46% | 95.00% | 96.45% | 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) | 96.82% | 95.00% | 97.24% | 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) | 96.14% | 94.00% | 96.53% | Met Target | No Slippage |

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

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

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

DODD convened a work group in early 2019 to discuss ways to improve the response rate for the 2019 EI family questionnaire and the representativeness of respondents. As a result of this work group, DODD prepared a visually appealing one page flyer that provided an overview and explained the purpose of the family questionnaire, including how the data would be used. DODD again distributed informational flyers to recipient families prior to collecting questionnaire responses in 2020 and included information and reminders about the questionnaire in several of its bi-weekly communications to the EI field. EI service coordinators were encouraged to use personalized text messages or e-mails to families with links to the online versions of the questionnaire. DODD monitored and provided updates to local programs regarding the response rates throughout the data collection period. EI Program consultants also had conversations with local programs regarding response rates and representativeness of respondents.  
  
Despite these new efforts in 2019 and 2020, Ohio’s response rate and representativeness remained similar to past years. After the data collection period was over, DODD also surveyed service coordinators about their involvement in the family questionnaire to understand what they view as barriers to increasing response rates and to obtain input regarding how the process could be improved. DODD will have additional conversations with Ohio’s ICC about ways to improve response rates and representativeness. Finally, DODD is working with software developers for the statewide EI data system to enable better collection of parent e-mail addresses in order to provide parents directly with links to the annual family questionnaire.

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

Questionnaire Responses  
Of the 10,772 families who were identified as having children being served on June 1, 2020, a total of 10,570 received questionnaires (with those not receiving questionnaires being due to a deceased child or not having up-to-date address information for the family in the data system). DODD received completed questionnaires from 1,271 families, which is a response rate of 12.02%. Eighty-six of Ohio’s eighty-eight counties were represented in the responses to the Family Questionnaire. The following table outlines the methods families used to respond to the questionnaire. Table 1 in the attachment in this section outlines the methods families used to respond to the questionnaire.  
  
Respondent Representativeness   
In an effort to increase representativeness of respondents, Ohio communicated with local programs in a more targeted manner regarding encouraging families, especially those in typically underrepresented categories, to respond to the questionnaire. Specifically, DODD:  
• Frequently included information about Ohio’s EI Family Questionnaire in the state’s bi-weekly EI Program Updates newsletter  
• Reached out to Contract Managers in local programs that have a high density of families in underrepresented categories, asking them to encourage these families to respond to the questionnaire  
  
Table 2, Table 3, and Table 4 in the attachment in this section provide a comparison of the race/ethnicity categories, age ranges, and gender between the respondents and non-respondents of the questionnaire, as well as the totals for all children served in EI in Ohio on June 1, 2020 whose families received the questionnaire.   
  
Age categories and gender of children in respondent families were comparable to non-respondents and all children served on June 1, 2020 whose families received questionnaires. White families continued to be overrepresented and Black families were underrepresented among respondents, despite the state’s efforts to increase representativeness. Other race and ethnicity group respondents were similar to the overall group receiving the questionnaire. Ohio will continue to make efforts to further increase representativeness of Black respondents with future questionnaires.

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

The Ohio Department of Developmental Disabilities used a modified version of the Early Childhood Outcomes Center’s (ECO) 2010 Family Outcomes Questionnaire. These items from the ECO Family Questionnaire were adapted for Ohio and used on a survey distributed to families in order to gather data for this indicator:  
1. Early Intervention has helped me to know my rights in the program.  
2. Early Intervention has helped me to communicate my child’s needs.  
3. Early Intervention has helped me to help my child learn and develop.  
  
Each question had a five-point scale with the following anchors:  
• Strongly Disagree  
• Disagree  
• Neither Agree nor Disagree  
• Agree  
• Strongly Agree  
  
Ohio added total responses of ‘Agree’ and ‘Strongly Agree’ for each question to determine what percentage of families were helped by EI in the three areas of this indicator.  
  
The following modifications to the ECO survey were made:  
• Early Intervention was substituted for Part C throughout the questionnaire as that is how families “know” Part C in Ohio.  
• The verbiage of the survey was adjusted to be at a 5th grade reading level.  
• The adapted OSEP items (Early Intervention has helped me to know my rights in the program; Early Intervention has helped me to communicate my child’s needs; and Early Intervention has helped me to help my child learn and develop) were the first questions on the questionnaire rather than dispersed throughout the survey as they are on the 2010 OSEP version of the questionnaire.  
• DODD added additional open-ended questions to obtain input from families regarding their experiences receiving EI services virtually during the COVID pandemic, for use in Ohio’s State Systemic Improvement Plan, and to conduct a more in depth qualitative analysis of the survey data.  
  
Families served in Early Intervention on June 1, 2020 were identified as potential recipients. DODD did not mail questionnaires to families as has been done in previous years, and instead collected questionnaire data primarily online due to the COVID pandemic. The questionnaire links were opened in early August 2020 and due to be completed by October 1, 2020. In an effort to maximize the number of survey respondents, Ohio implemented the following strategies in its administration of the family questionnaire:  
• Questionnaire recipients were mailed an information sheet explaining why DODD distributes the questionnaire and how data are used. The information sheets included the questionnaire links and the child’s unique identifier to be used in completing the questionnaire.  
• DODD provided local programs a list of questionnaire recipients and the questionnaire links so they could encourage families to respond.  
• DODD included all families served at a point in time close to the questionnaire distribution in the population receiving the questionnaire.  
• The questionnaire was translated into Spanish and distributed to families whose primary caregiver was identified as primarily Spanish-speaking in Ohio’s Early Intervention Data System (EIDS).  
• Families were provided the option to respond to the questionnaire via mail if they did not have access to complete it online.  
• The questionnaire was highlighted in several editions of the Part C Coordinator’s bi-weekly communication to Ohio’s EI field.

## 4 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

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

In an effort to increase representativeness of respondents, Ohio communicated with local programs in a more targeted manner regarding encouraging families, especially those in typically underrepresented categories, to respond to the questionnaire. Specifically, DODD:  
• Frequently included information about Ohio’s EI Family Questionnaire in the state’s bi-weekly EI Program Updates newsletter  
• Reached out to Contract Managers in local programs that have a high density of families in underrepresented categories, asking them to encourage these families to respond to the questionnaire  
  
Table 2, Table 3, and Table 4 in the attachment in this section provide a comparison of the race/ethnicity categories, age ranges, and gender between the respondents and non-respondents of the questionnaire, as well as the totals for all children served in EI in Ohio on June 1, 2020 whose families received the questionnaire.   
  
Age categories and gender of children in respondent families were comparable to non-respondents and all children served on June 1, 2020 whose families received questionnaires. White families continued to be overrepresented and Black families were underrepresented among respondents, despite the state’s efforts to increase representativeness. Other race and ethnicity group respondents were similar to the overall group receiving the questionnaire. Ohio will continue to make efforts to further increase representativeness of Black respondents with future questionnaires.   
  
DODD convened a work group in early 2019 to discuss ways to improve the response rate for the 2019 EI family questionnaire and the representativeness of respondents. As a result of this work group, DODD prepared a visually appealing one page flyer that provided an overview and explained the purpose of the family questionnaire, including how the data would be used. DODD again distributed informational flyers to recipient families prior to collecting questionnaire responses in 2020 and included information and reminders about the questionnaire in several of its bi-weekly communications to the EI field. EI service coordinators were encouraged to use personalized text messages or e-mails to families with links to the online versions of the questionnaire. DODD monitored and provided updates to local programs regarding the response rates throughout the data collection period. EI Program consultants also had conversations with local programs regarding response rates and representativeness of respondents.  
  
Despite these new efforts in 2019 and 2020, Ohio’s response rate and representativeness remained similar to past years. After the data collection period was over, DODD also surveyed service coordinators about their involvement in the family questionnaire to understand what they view as barriers to increasing response rates and to obtain input regarding how the process could be improved. DODD will have additional conversations with Ohio’s ICC about ways to improve response rates and representativeness. Finally, DODD is working with software developers for the statewide EI data system to enable better collection of parent e-mail addresses in order to provide parents directly with links to the annual family questionnaire.

## 4 - OSEP Response

## 4 - Required Actions

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

# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

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

**Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 5 - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 1.20% | 1.30% | 1.30% | 1.40% | 1.40% |
| Data | 1.01% | 0.97% | 0.96% | 0.92% | 0.99% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 1.40% |

Targets: Description of Stakeholder Input

At the August 13, 2014 SICC meeting, stakeholders proposed that we use the FFY 2012 data as the FFY 2013 target, given we were setting a target for activities which had already taken place. That methodology was applied to all performance indicators. Target methodologies, or different ways we could set the targets, were discussed at the August 2014 SICC meeting. A proposal was provided back to the SICC and the larger EI Stakeholder group in November 2014 at which time each indicator’s proposed set of targets was discussed at an in-person meeting. Consensus was reached, with some edits from that discussion resulting in the targets posted for public comment within the APR on November 25, 2014. After the collection of public comment, no changes were needed or made to the targets agreed upon by the SICC and EI Stakeholders.  
At the state’s March 2019 SICC and larger EI stakeholder group meeting, DODD provided an overview of the APR indicators, along with a summary of the state’s targets and results for the FFY13 through FFY18 APR cycle, indicating that the group would have a discussion at the following meeting to set targets for the next APR cycle. At the May 2019 meeting, the group had an in-depth discussion about SPP/APR targets and determined the starting target for the next SPP/APR cycle for all indicators should be the FFY17 percentage (rounded down) and the state’s targets should gradually increase by the end of the SPP/APR cycle. By the state’s August 2019 meeting, DODD had become aware that the current SPP/APR cycle would be extended for one year, and informed the SICC and larger EI stakeholder group of this. The group reviewed the targets discussed at the previous meeting, and agreed to keep the FFY19 targets the same as what had been discussed, but adjusted targets as needed so they were greater than the baseline percentage.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 1 with IFSPs | 1,324 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 1 | 133,487 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,324 | 133,487 | 0.99% | 1.40% | 0.99% | Did Not Meet Target | No Slippage |

**Compare your results to the national data**

Ohio ranked 16th out of 18 among states with Category B Eligibility (Category B: 25% in two or more domains, 30% delay in one or more domains, 1.3 standard deviations in two domains, 1.5 standard deviations in any domain, 33% delay in one domain) and 17th out of 20 among states whose lead agency is an agency other than Health or Education.

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

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

**Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 2.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 2.70% | 2.80% | 2.80% | 2.90% | 2.90% |
| Data | 2.46% | 2.45% | 2.45% | 2.53% | 2.70% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 2.70% |

Targets: Description of Stakeholder Input

At the August 13, 2014 SICC meeting, stakeholders proposed that we use the FFY 2012 data as the FFY 2013 target, given we were setting a target for activities which had already taken place. That methodology was applied to all performance indicators. Target methodologies, or different ways we could set the targets, were discussed at the August 2014 SICC meeting. A proposal was provided back to the SICC and the larger EI Stakeholder group in November 2014 at which time each indicator’s proposed set of targets was discussed at an in-person meeting. Consensus was reached, with some edits from that discussion resulting in the targets posted for public comment within the APR on November 25, 2014. After the collection of public comment, no changes were needed or made to the targets agreed upon by the SICC and EI Stakeholders.  
  
At the state’s March 2019 SICC and larger EI stakeholder group meeting, DODD provided an overview of the APR indicators, along with a summary of the state’s targets and results for the FFY13 through FFY18 APR cycle, indicating that the group would have a discussion at the following meeting to set targets for the next APR cycle. At the May 2019 meeting, the group had an in-depth discussion about SPP/APR targets and determined the starting target for the next SPP/APR cycle for all indicators should be the FFY17 percentage (rounded down) and the state’s targets should gradually increase by the end of the SPP/APR cycle. By the state’s August 2019 meeting, DODD had become aware that the current SPP/APR cycle would be extended for one year, and informed the SICC and larger EI stakeholder group of this. The group reviewed the targets discussed at the previous meeting, and agreed to keep the FFY19 targets the same as what had been discussed, but adjusted targets as needed so they were greater than the baseline percentage.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 3 with IFSPs | 11,995 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 3 | 407,786 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 11,995 | 407,786 | 2.70% | 2.70% | 2.94% | Met Target | No Slippage |

**Compare your results to the national data**

Ohio ranked 16th out of 18 among states with Category B Eligibility (Category B: 25% in two or more domains, 30% delay in one or more domains, 1.3 standard deviations in two domains, 1.5 standard deviations in any domain, 33% delay in one domain) and 15th out of 20 among states whose lead agency is an agency other than Health or Education.

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

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 6 - Required Actions

# Indicator 7: 45-Day Timeline

**Instructions and Measurement**

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

**Compliance indicator:** Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must address the timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

**Measurement**

Percent = [(# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

**Instructions**

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

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide actual numbers used in the calculation.

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

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

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

## 7 - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.86% | 95.06% | 97.23% | 99.00% | 96.29% |

**Targets**

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

**FFY 2019 SPP/APR Data**

| **Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline** | **Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 848 | 1,231 | 96.29% | 100% | 99.68% | Did Not Meet Target | No Slippage |

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

**This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.**

379

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

State monitoring

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

For compliance analyses, EIS programs were selected for Indicator 1, Indicator 7, or Indicators 8A and C. Ohio has implemented a monitoring cycle that ensures an even and representative selection of EIS programs each fiscal year for one of the aforementioned compliance indicators. All local programs have data analyzed for all of these compliance indicators within a three-year period. DODD completes activities related to each of these one at a time on a rotating schedule throughout each year. As part of this process, findings are issued as soon as possible after noncompliance is identified (within less than three months of discovery), as specified in #7 of the FREQUENTLY ASKED QUESTIONS REGARDING IDENTIFICATION AND CORRECTION OF NONCOMPLIANCE AND REPORTING ON CORRECTION IN THE STATE PERFORMANCE PLAN (SPP)/ANNUAL PERFORMANCE REPORT (APR).  
  
Thirty EIS programs were scheduled to have their data for this indicator monitored for FFY19. Ohio used monitoring data from its data system to determine its percent compliance for this indicator. All children among the 30 selected EIS programs who had 45-Day timelines ending between October 1, 2019 through December 31, 2019 were included in Ohio’s FFY19 45-Day analysis. Of the 1,231 child records examined, 1,227 (99.68 percent) were compliant. A total of one finding was issued to one EIS program upon completion of the baseline analysis. This finding was identified and issued in FFY19 and therefore due for correction in FFY20 and the status of correction will be reported in the FFY20 APR.  
  
The 1,227 child records counted as being compliant include 379 that were non-timely due to documented exceptional family circumstances. These 379 child records are included in the numerator and denominator. See below for a breakdown of reasons for all missed 45-Day timelines:  
• Exceptional family circumstances: 379 children  
• Staff error: 3 children  
• System reason: 1 child  
Three findings for this indicator were due for correction in FFY19. These findings were reported in the FFY17 APR and based on FFY17 data, but not identified and issued until FFY18. All three findings were corrected in a timely manner and verified in accordance with OSEP Memorandum 09-02. DODD ensured that the EIS program (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. Six additional findings were reported in the FFY18 APR and based on FFY18 data, but not identified and issued until FFY19, so the status of correction will be reported in the FFY20 APR.

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 3 | 3 | 0 | 0 |

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

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

Three findings for this indicator were due for correction in FFY19, all of which were reported in the FFY17 APR and based on FFY17 data, but not identified and issued until FFY18. All three findings were corrected in a timely manner and verified in accordance with OSEP Memorandum 09-02. DODD ensured that the EIS program (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.  
  
The EIS programs found to be noncompliant with 45-Day Timelines were issued a finding of noncompliance via a written memorandum that included the noncompliant status and informed the local program that the noncompliance must be corrected as soon as possible, but in no case more than one year from identification. The memos were issued as soon as possible after noncompliance was identified (within three months of discovery).  
  
To ensure local programs are correctly implementing each regulatory requirement, Ohio requests records for verification of correction as follows:   
• DODD examines data on a monthly basis to determine local program compliance. Data are pulled on or just after the first of each month and local programs receive missing data inquiries, as necessary.  
• In order to correct any findings, local programs must first have two consecutive months of data at 100% face value, at which point DODD requests a representative sample of records for verification.   
• If a local program does not correct within six monthly data analyses, the local program will go on a Corrective Action Plan (CAP).  
• If a local program has no applicable records during one of the first six months of analyses, the month will still count towards the six months. A month with no applicable records, however, will not impact two consecutive months that occur immediately prior to and following the null month.  
  
The state verified a randomly selected, representative sample of child records from the local programs to ensure that for each child, the required components were completed within 45 days or that any delays in this timeline were due to family reasons. The state continued to examine data and request records to verify until all 45-Day requirements were found to be met for all children as determined by requested child records. In all cases, the needed sample size was calculated using an online sample size calculator with a 95% confidence level and 15% confidence interval. Specifically, verification to indicate correction occurred in the local program as follows:  
• Coshocton: 3 records verified; timelines ending in January and February 2019  
• Richland: 13 records verified; timelines ending in October and November 2018  
• Wyandot: 4 records verified; timelines ending in September and October 2018

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

Ohio ensured each local program corrected the individual case of noncompliance through the state's baseline analyses. An explanation of noncompliance (referred to as a noncompliance reason or "NCR" in Ohio) is required upon late completion of all required components. Thus, in the bulk of cases of late completion, the state automatically ensures required actions have been completed when determining baseline compliance percentages. In addition, the state, as part of its baseline analyses, determined if any child for whom a required component was late had exited or moved from the EIS program’s jurisdiction. For this indicator, Ohio ensured that components of the 45-Day timeline were completed for all children, albeit late, or that the child was subsequently exited from EI.

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

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

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

## 7 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 8A: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

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

## 8A - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.17% | 98.53% | 99.04% | 95.05% | 98.27% |

**Targets**

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

**FFY 2019 SPP/APR Data**

**Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday. (yes/no)**

YES

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 475 | 576 | 98.27% | 100% | 97.74% | 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.**

88

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

State monitoring

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

For compliance analyses, EIS programs were selected for Indicator 1, Indicator 7, or Indicators 8A and C. Ohio has implemented a monitoring cycle that ensures an even and representative selection of EIS programs each fiscal year for one of the aforementioned compliance indicators. All local programs have data analyzed for all of these compliance indicators within a three-year period. DODD completes activities related to each of these one at a time on a rotating schedule throughout each year. As part of this process, findings are issued as soon as possible after noncompliance is identified (within less than three months of discovery), as specified in #7 of the FREQUENTLY ASKED QUESTIONS REGARDING IDENTIFICATION AND CORRECTION OF NONCOMPLIANCE AND REPORTING ON CORRECTION IN THE STATE PERFORMANCE PLAN (SPP)/ANNUAL PERFORMANCE REPORT (APR).  
  
Thirty EIS programs were scheduled to have their data for this indicator monitored for FFY19. Ohio used monitoring data from its data system to determine its percent compliance for this indicator. All children among the 30 selected EIS programs who had IFSPs with Transition Steps and Services due between January 1, 2020 and March 31, 2020 were included in Ohio’s FFY19 Transition Steps and Services analysis. Of the 576 child records examined, 563 (97.74 percent) were compliant. A total of two findings were issued to two EIS programs upon completion of the baseline analysis; these findings were identified and issued in FFY20 and therefore the status of their correction will be reported in the FFY21 APR.  
  
The 563 child records counted as being compliant include 88 that were non-timely due to documented exceptional family circumstances . These 88 child records are included in the numerator and denominator. See below for a breakdown of reasons for missed Transition Steps and Services timelines:  
• Exceptional family circumstances: 88  
• Staff error: 13  
  
Six Steps and Services findings were due for correction in FFY19. Two of these finding were based on FFY17 data and included in the FFY17 APR, and four were based on FFY18 data and included in the FFY18 APR, but all of which were identified and issued in FFY18. All of these findings were corrected in a timely manner and verified in accordance with OSEP Memorandum 09-02. DODD ensured that the EIS program (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.

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 6 | 6 | 0 | 0 |

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

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

Six findings for this indicator were due for correction in FFY19. Two of these finding were based on FFY17 data and included in the FFY17 APR, and four were based on FFY18 data and included in the FFY18 APR, but all of which were identified and issued in FFY18. All of these findings were corrected in a timely manner and verified in accordance with OSEP Memorandum 09-02. DODD ensured that the EIS program (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.  
  
The EIS programs found to be noncompliant with Transition Steps and Services were issued a finding of noncompliance via a written memorandum that included the noncompliant status and informed the local program that the noncompliance must be corrected as soon as possible, but in no case more than one year from identification. The memos were issued as soon as possible after noncompliance was identified (within three months of discovery).  
  
To ensure local programs are correctly implementing each regulatory requirement, Ohio requests records for verification of correction as follows:   
• DODD examines data on a monthly basis to determine local program compliance. Data are pulled on or just after the first of each month and local programs receive missing data inquiries, as necessary.  
• In order to correct any findings, local programs must first have two consecutive months of data at 100% face value, at which point DODD requests a representative sample of records for verification.   
• If a local program does not correct within six monthly data analyses, the local program will go on a Corrective Action Plan (CAP).  
• If a local program has no applicable records during one of the first six months of analyses, the month will still count towards the six months. A month with no applicable records, however, will not impact two consecutive months that occur immediately prior to and following the null month.  
  
The state verified a randomly selected, representative sample of child records from the local programs to ensure that for each child, an IFSP within the required timeframe included Transition Steps and Services or that any delays in this timeline were due to family reasons. The state continued to examine data and request records to verify until all Transition Steps and Services were found to be met for all children as determined by requested child records. In all cases, the needed sample size was calculated using an online sample size calculator with a 95% confidence level and 15% confidence interval. Specifically, verification to indicate correction occurred in the local program as follows:  
  
• Clark: 8 records verified; timelines ending in August and September 2018  
• Portage: 9 records verified; timelines ending in November and December 2018  
• Erie: 7 records verified; timelines ending in March and April 2019  
• Knox: 3 records verified; timelines ending in March and April 2019  
• Licking: 12 records verified; timelines ending in March and April 2019  
• Wood: 12 records verified; timelines ending in March and April 2019

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

Ohio ensured each local program corrected the individual case of noncompliance through the state's baseline analyses. An explanation of noncompliance (referred to as a noncompliance reason or "NCR" in Ohio) is required upon late completion of all required components. Thus, in the bulk of cases of late completion, the state automatically ensures required actions have been completed when determining baseline compliance percentages. In addition, the state, as part of its baseline analyses, determined if any child for whom a required component was late had exited or moved from the EIS program’s jurisdiction. For this indicator, Ohio ensured that for all children potentially eligible for Part B, an IFSP contained Transition Steps and Services, albeit late, or that the child was subsequently exited from EI.

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

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

## 8A - Prior FFY Required Actions

None

## 8A - OSEP Response

## 8A - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 8B: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

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

## 8B - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 0.00% | 100.00% | 99.61% | 100.00% | 100.00% |

**Targets**

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

**FFY 2019 SPP/APR Data**

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

YES

| **Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,207 | 7,047 | 100.00% | 100% | 100.00% | Met Target | No Slippage |

**Number of parents who opted out**

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

840

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

Ohio EIS programs are required to send quarterly reports to the LEA by February 1st; May 1st; August 1st; and November 1st each year that include all children who will be turning three within a year from the report due date, as long as the family provides consent to share information. Although the report due dates do not correspond to a state or federal fiscal year, because each report includes all children who will be turning three within a year of the report due date, the state ensures that, over the course of the four report submissions, LEAs are notified of children potentially eligible for Part B at least 90 days prior to any child’s third birthday. The state requires EIS programs to submit proof to DODD that they submitted the February 1 report to the relevant LEAs, which, for the past several years, has been used to determine compliance for this indicator. As part of this process, findings are issued as soon as possible after noncompliance is identified (within less than three months of discovery), as specified in #7 of the FREQUENTLY ASKED QUESTIONS REGARDING IDENTIFICATION AND CORRECTION OF NONCOMPLIANCE AND REPORTING ON CORRECTION IN THE STATE PERFORMANCE PLAN (SPP)/ANNUAL PERFORMANCE REPORT (APR).  
  
Ohio created a data set from reports distributed to LEAs from EIS programs. Reports due February 1, 2020 were generated using Ohio’s statewide data system of all children turning three between February 1, 2020 and January 31, 2021 who were potentially eligible for Part B, excluding toddlers whose families opted out from notification (840 families opted out, which are not included in the numerator or denominator). The LEAs were informed in a timely manner for all 6,207 (100%) toddlers turning three in the referenced timeframe and whose families did not opt out of notification. DODD also ensured the SEA was notified of all 6,207 children for the February 1, 2020 reporting date in a timely manner, as well as for each quarterly reporting date throughout the fiscal year. As the requirements for the indicators are always the same, a sample of the data from one of the required quarterly reports within the fiscal year is presumed to represent the state and counties’ compliance for the entire fiscal year. No LEA/SEA findings were issued based on FFY19 data.   
  
There were no LEA/SEA findings due for correction in FFY19.

**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.**

Ohio created a data set from reports distributed to LEAs from local Help Me Grow EI programs. Reports due February 1, 2020 were generated using Ohio’s statewide data system of all children turning three between February 1, 2021 and January 31, 2020 potentially eligible for Part B, excluding toddlers whose families opted out of notification (840 families opted out, which are not included in the numerator or denominator). Currently, counties are required to send quarterly reports to the LEA (due February 1st, May 1st, August 1st, and November 1st each year) that include all children who will be turning three within a year from the report due date, as long as the family provides consent to share information. Counties are then required to submit proof of doing so to DODD for the February 1 report, which is used for the APR compliance analysis. The LEAs were informed in a timely manner for all 6,207 (100%) toddlers turning three in the referenced time frame and whose families did not opt out of notification. DODD ensured the SEA was notified of all 6,207 children for the February 1, 2020 reporting date in a timely manner, as well as for each quarterly reporting date throughout the fiscal year. As the requirements for the indicators are always the same, a sample of the data from one of the required quarterly reports within the fiscal year is presumed to represent the counties’ compliance for the entire fiscal year.

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

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

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

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

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

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

## 8B - Required Actions

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

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

## 8C - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.90% | 99.65% | 98.09% | 97.44% | 97.95% |

**Targets**

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

**FFY 2019 SPP/APR Data**

**Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services (yes/no)**

YES

| **Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 444 | 573 | 97.95% | 100% | 100.00% | Met Target | No Slippage |

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

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

10

**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.**

119

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

State monitoring

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

For compliance analyses, EIS programs were selected for Indicator 1, Indicator 7, or Indicators 8A and C. Ohio has implemented a monitoring cycle that ensures an even and representative selection of EIS programs each fiscal year for one of the aforementioned compliance indicators. All local programs have data analyzed for all of these compliance indicators within a three-year period. DODD completes activities related to each of these one at a time on a rotating schedule throughout each year. As part of this process, findings are issued as soon as possible after noncompliance is identified (within less than three months of discovery), as specified in #7 of the FREQUENTLY ASKED QUESTIONS REGARDING IDENTIFICATION AND CORRECTION OF NONCOMPLIANCE AND REPORTING ON CORRECTION IN THE STATE PERFORMANCE PLAN (SPP)/ANNUAL PERFORMANCE REPORT (APR).  
  
Thirty EIS programs were scheduled to have their data for this indicator monitored for FFY 2019. Ohio used monitoring data from its data system to determine its percent compliance for this indicator. All children among the 30 selected EIS programs who had Transition Planning Conferences due between January 1, 2020 and March 31, 2020 were included in Ohio’s FFY19 Transition Planning Conference analysis. Of the 563 child records examined, all 563 (100% percent) were compliant. No findings were issued upon completion of the baseline analysis.  
  
The 563 child records counted as being compliant include 119 that were non-timely due to documented exceptional family circumstances . These 119 child records are included in the numerator and denominator. See below for a breakdown of reasons for missed TPC timelines:  
• Exceptional family circumstances: 119 children  
  
There were eight TPC findings due for correction in FFY19. One of these findings was included in the FFY17 APR and based on FFY17 data, and seven were included in the FFY18 APR and based on FFY18 data, but all were identified and issued in FFY18. All of these findings were corrected in a timely manner and verified in accordance with OSEP Memorandum 09-02. DODD ensured that each EIS program (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.

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 8 | 8 | 0 | 0 |

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

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

Eight findings for this indicator were due for correction in FFY19. One of these findings was included in the FFY17 APR and based on FFY17 data, and seven were included in the FFY18 APR and based on FFY18 data, all of which were identified and issued in FFY18. All of these findings were corrected in a timely manner and verified in accordance with OSEP Memorandum 09-02. DODD ensured that each EIS program (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.   
  
The EIS programs found to be noncompliant with Timely Transition Planning Conferences were issued a finding of noncompliance via a written memorandum that included the noncompliant status and informed the local programs that the noncompliance must be corrected as soon as possible, but in no case more than one year from identification. The memos were issued as soon as possible after noncompliance was identified (within three months of discovery).   
  
To ensure local programs are correctly implementing each regulatory requirement, Ohio requests records for verification of correction as follows:   
• DODD examines data on a monthly basis to determine local program compliance. Data are pulled on or just after the first of each month and local programs receive missing data inquiries, as necessary.  
• In order to correct any findings, local programs must first have two consecutive months of data at 100% face value, at which point DODD requests a representative sample of records for verification.   
• If a local program does not correct within six monthly data analyses, the local program will go on a Corrective Action Plan (CAP).  
• If a local program has no applicable records during one of the first six months of analyses, the month will still count towards the six months. A month with no applicable records, however, will not impact two consecutive months that occur immediately prior to and following the null month.  
  
The state verified a randomly selected, representative sample of child records from the local programs to ensure that Timely Transition Planning Conferences occurred for each child. The state continued to examine data and request records to verify until all TPC requirements were found to be met for all children as determined by requested child records. In all cases, the needed sample size was calculated using an online sample size calculator with a 95% confidence level and 15% confidence interval. Specifically, verification to indicate correction occurred in the local program as follows:  
  
• Portage: 14 records verified; timelines ending in June and July 2018  
• Auglaize: 5 records verified; timelines ending in March and April 2019  
• Coshocton: 6 records verified; timelines ending in April and May 2019  
• Highland: 5 records verified; timelines ending in March and May 2019 (no applicable records for April 2019)  
• Licking: 12 records verified; timelines ending in March and April 2019  
• Pickaway: 6 records verified; timelines ending in March and May 2019 (no applicable records for April 2019)  
• Shelby: 5 records verified; timelines ending in March and April 2019  
• Wood: 12 records verified; timelines ending in March and April 2019

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

Ohio ensured each local program corrected the individual case of noncompliance through the state's baseline analyses. An explanation of noncompliance (referred to as a noncompliance reason or "NCR" in Ohio) is required upon late completion of all required components. Thus, in the bulk of cases of late completion, the state automatically ensures required actions have been completed when determining baseline compliance percentages. In addition, the state, as part of its baseline analyses, determined if any child for whom a required component was late had exited or moved from the EIS program’s jurisdiction. For this indicator, Ohio ensured that TPCs were held for all children potentially eligible for Part B, albeit late, or that the child was subsequently exited from EI.

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

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

## 8C - Prior FFY Required Actions

None

## 8C - OSEP Response

## 8C - Required Actions

# Indicator 9: Resolution Sessions

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

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

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

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

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Select yes to use target ranges.**

Target Range not used

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

NO

**Prepopulated Data**

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

**Targets: Description of Stakeholder Input**

Not applicable

**Historical Data**

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

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

**Targets**

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

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 100.00% |  |  | N/A | N/A |

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

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

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

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

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

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

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

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

NO

**Prepopulated Data**

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

Targets: Description of Stakeholder Input

Not applicable

**Historical Data**

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

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

**Targets**

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

**FFY 2019 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  |  |  | N/A | N/A |

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

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

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

## 10 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role**

Designated Lead Agency Director

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

**Name:**

Kimberly Hauck

**Title:**

Deputy Director of Policy

**Email:**

kim.hauck@dodd.ohio.gov

**Phone:**

614-466-7290

**Submitted on:**

04/26/21 9:13:56 AM

# ED Attachments

  