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

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

**For reporting on   
FFY 2020**

**Tennessee**

U.S. Department of Education seal

**PART C DUE   
February 1, 2022**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

The FFY 2020-21 Annual Performance Report (APR) for Tennessee’s Early Intervention System (TEIS) demonstrates continued performance on compliance and results indicators, including sustained growth in the percentage of the population served while navigating the challenges of delivering services safely to vulnerable populations during the unprecedented COVID-19 global pandemic.

Additional information related to data collection and reporting

On March 16, 2020, TEIS suspended face-to-face visits with families in response to the COVID-19 pandemic. This suspension, which was not lifted until May 2021, included service coordination, eligibility evaluations, ongoing assessment, and developmental therapy. TEIS supported the use of teleconference service delivery; and implemented modified procedures for eligibility evaluation, and ongoing assessment/early childhood outcomes data collection. The impact of this suspension of face-to-face visits and teleconference service delivery will be discussed as they apply to specific indicators.

**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.**

July 1, 2020, the lead agency for Tennessee’s Part C, Individuals with Disabilities Education Act (IDEA) program transitioned from the Department of Education (DOE) to the Department of Intellectual and Developmental Disabilities (DIDD). The activities reported in this annual performance report (APR) were conducted under the supervision of DIDD.  
  
Early intervention service (EIS) programs are defined as the nine TEIS point of entry offices (TEIS POEs). Each POE has a district administrator who reports directly to the state’s director-Part C coordinator. State personnel in these offices are responsible for the following activities from referral into the system through exit from the system: 1) Part C eligibility determination and 2) all service coordination activities which include individual family service plan (IFSP) development, oversight of service delivery, and transition.  
  
The child’s official educational record is housed in a real-time, web-based data system. Tennessee Early Intervention Data System (TEIDS) contains demographic information; evaluation/eligibility information; IFSP, including the transition plan; contact logs; service logs for delivered services; and an accounts payable section for reimbursement of delivered services.  
  
In FFY 2020-21, the lead agency began work to revise its general supervision system for monitoring due to:  
1. Growth. Increases in number of children served since FY 2011.  
2. Reduction of personnel. Reduction in personnel for data and monitoring responsibilities over several years.  
3. Shifting priorities. Alignment of priorities with the new lead agency.  
  
Revisions will enable TEIS to streamline processes to operate more efficiently and meaningfully by bolstering capacity to make informed monitoring decisions that facilitate targeted support for overall program improvement.  
  
Federal technical assistance is being utilized for revision efforts: Bruce Bull (IDEA Data Center [DaSy]) and Katy McCullough (Early Childhood Technical Assistance Center [ECTA]) and DaSy). In Spring 2021, TEIS staff participated in the ECTA Effective General Supervision TA workshop with other states, “Establishing an Effective Monitoring System for Compliance and Results.”  
  
Spring 2021, stakeholders provided input and responded to proposed revisions to the monitoring system. Stakeholders included the State Interagency Coordinating Council (SICC) membership and visitors, TEIS district leadership and personnel, and TEIS-DIDD leadership.  
  
Three primary components to the revised system of monitoring with projected timeframes for implementation:   
1. Compliance. Implemented.  
Annual monitoring moved from fiscal year census data (July 1-June 30) to census data for a specific month within the fiscal year. With federal TA support, three years of historical data (FY 2018-2020) across multiple data elements were analyzed to determine if there was a particular month that was more representative of the population served by TEIS. As data analyzed were representative across all months, October was selected to facilitate monitoring and reporting timelines for issuing findings of noncompliance, annual EIS program determinations, and development of the annual public report within the same fiscal year. This decision was reviewed with TN’s OSEP federal contact.  
2. Results. Complete development and begin implementation, FFY 2022-23.  
3. Focused monitoring. Complete development and begin implementation, FFY 2022-23. This area of monitoring is planned to be embedded in both compliance and results.  
  
FFY 2020-21 avenues for monitoring activities:  
1. Annual monitoring: TEIDS enables TEIS to track through desk audits the existence of noncompliance and the verification for the correction of noncompliance. October census data were used to monitor federal compliance Indicators 1, 7, and 8C. Compliance with Indicator 8A is maintained through a TEIDS validation. Compliance with Indicator 8B is monitored through a monthly data sharing process at the state level between Part C and Part B, 619 preschool state education agency (SEA) and local education agencies (LEAs). Compliance monitoring and the issuing of written findings, when warranted, occur during Mar.-Apr. for the fiscal year.  
2. Dispute resolution: Findings of noncompliance may be issued as an outcome of one of the three dispute resolution processes (i.e., administrative complaint, mediation, due process). Identifying noncompliance and issuing a written finding may occur at any time during the year.  
3. Focused monitoring activities: Activities may be either planned or conducted as needed. Focused monitoring may occur at any time during the year.   
  
A finding of noncompliance can be issued to an EIS program through any of the monitoring activities described above. When this occurs TEIS issues a written letter of finding along with supporting data. The lead agency utilizes direction from the federal office of special education program's (OSEP) 09-02 Memorandum and OSEP’s (9-8-08) Frequently Asked Questions (FAQs) Regarding Identification and Correction of Noncompliance and Reporting on Correction in the State Performance Plan/Annual Performance Report when determining correction of noncompliance. When correction has been achieved, TEIS issues a written letter confirming correction to the program. TEIS adheres to OSEP's definition for timely correction—as soon as possible, but not more than one year from the date the written finding was issued.   
  
The 09-02 memorandum identifies a “two-prong approach” when determining correction of noncompliance. The following steps are used when determining correction:  
1. Child-level correction (prong 1). When noncompliance is discovered (e.g., a child has yet to receive an IFSP service), the Part C monitoring coordinator provides the child’s TEIDS identification number to the POE district administrator who oversees actions to correct the noncompliance, informing the monitoring coordinator who then verifies correction by reviewing the child’s record in TEIDS.  
2. Correct implementation of regulatory requirements (prong 2). A subsequent review of data is made for the monitoring coordinator to verify that the TEIS POE is correctly implementing the specific indicator regulatory requirements. Monthly census data in TEIDS are reviewed until 100% compliance is achieved.  
3. Pre-finding correction. OSEP allows for the correction of noncompliance prior to the issuance of a written letter of finding. If an incident occurs, and when appropriate, TEIS does not issue a finding. Pre-finding correction occurs through a verification of subsequent monthly census data in TEIDS demonstrating 100% compliance and the correction of any previous child-level noncompliance prior to the issuance of a written finding.  
4. Corrective Action Plans (CAPs). If correction has not been achieved within six-months of the finding, TEIS utilizes a CAP as part of its system of general supervision. The CAP provides the vehicle for the EIS program to identify systemic issues impacting noncompliance, addressing those issues through the development and implementation of a plan of correction.   
  
The lead agency has processes to track, investigate, and resolve disputes filed on behalf of children served by TEIS. With the July 1, 2020 lead agency change, oversight responsibility for dispute resolution processes transitioned to DIDD legal personnel, working with the director-Part C coordinator. The Part C monitoring coordinator provided DIDD legal with historical documents as support for this transition.

**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.**

In FFY 2020-21, the lead agency’s technical assistance (TA) system to support EIS programs (i.e., nine TEIS point of entry offices [TEIS POEs]) was led by the quality improvement manager (QIT) and team along with periodic support from the two direct services coordinators (DSCs) who provided TA to EIS programs specific to Family-Guided Routines-Based Intervention (FGRBI).  
  
The quality improvement team (QIT) implements a formal technical assistance (TA) request process for TEIS POE leadership to ensure the understanding of requests and for a mechanism to track TA provided. Additionally, the QIT utilizes a professional development calendar outlining required training for TEIS POE personnel, such as:  
• Building Best Practices (BBP) Conference. An annual conference provided by the lead agency for both TEIS POE and Early Intervention Resource Agency (EIRA) personnel. In Spring 2021 the conference was held virtually with 550+ attendees. Eleven presenters provided sessions on topics related to leadership skills, Family Guided Routines-Based Intervention (FGRBI), Assessment, Evaluation and Programming System for Infants and Toddlers (AEPS), social emotional well-being, teaming, and service coordination.   
• Quarterly training. When needed, training covers topics such as early childhood outcomes (ECO); FGRBI, Individualized Family Service Plan (IFSP) functional goal development; and the AEPS family report.   
  
The following TA activities and/or resources were provided during FFY 2020-21:  
• New hire training. The QIT finalized training revisions and began implementation of the new STAGE training (Statewide Training: Assessment, Goals, and Early Childhood Outcomes) for new service coordinators. TEIS district administrators (DAs) provided feedback for training development. It is hoped the new training will better address the needs of service coordinators (SCs) during their first year of employment. New hire training now includes four phases over a year-long timeframe. In FFY 2020-21, two cohorts completed STAGE training: pilot group (Feb.-Mar. 2021) and cohort 1 (May-June 2021). Training includes the following STAGES:  
o STAGE One. Pre-requisite activities (e.g., reading, online modules, videos, observations of experienced SCs) to prepare for training content. Service coordinators use a revised workbook with their supervisor as they progress through the training. Brief reflections are held at end in a live virtual session with QIT trainers.  
o STAGE Two. Live virtual training sessions which include practice sessions with feedback on orientation, family assessment, developing IFSP goals, early childhood outcomes (ECO), and a wrap up. STAGE two is approximately 25-30 hours depending on the number of new hires enrolled.  
o STAGE Three. Live virtual two-hour refresher session on family assessment and IFSP goals with QIT trainers. Feedback is provided from QIT trainers during the refresher session.  
o STAGE Four. A two-hour training for determining IFSP early intervention services was piloted with a small group of new and experienced SCs by QIT trainers. Training format consisted of lecture with activities.  
• TA and resources provided to TEIS POEs included:  
o Job embedded training addressing specific needs of individual TEIS POE personnel.  
o Technical assistance on topics requested by TEIS district leadership during staff meetings.  
o Online training on such topics as family-centered early intervention and guidelines for TEIDS service log entries.  
o Family assessment training with a focus on interview skills and family engagement techniques.  
o Observations of SCs for AEPS family assessment implementation.  
o FGRBI observations of initial IFSP meetings to collect data of how SCs explain roles and the purpose of the IFSP meetings. A workgroup was created among QIT personnel, TEIS district administrators, and program coordinators to review data collected from observations.   
o IFSP teaming to support SCs and contracted developmental evaluators during Initial IFSP development.  
o Participation at leadership and staff meetings to provide TA or training as needed or when requested by the TEIS district administrator. The two direct services coordinators (DCSs) also attended meetings when requested to provide information specific to FGRBI implementation.  
o Participation in local interagency coordinating council (LICC) meetings for TEIS districts. The DCSs attended these meetings to provide updates about TEIS’ efforts for FGRBI implementation.  
o Training to DAs and program coordinators (PCs) to assist personnel when face-to-face meetings transitioned to virtual meeting during the COVID-19 pandemic. The QIT led a series of live trainings covering the basics for using WebEx  
• The QIT developed center-based program guidance documents for each EIRA providing center-based services. Service coordinators use this resource with families when it is appropriate to discuss center-based services as an option for a child.  
• TA was provided to EIRAs contracted to administer the AEPS and the Battelle Developmental Inventory-2. The AEPS is used to track child progress and for the collection of early childhood outcomes (ECO) ratings. The AEPS is administered by EIRA early interventionists. The BDI-2 is utilized for the developmental evaluation used in eligibility determination. Trainings for individual agencies were provided when needed.  
• In 2020-21 the use of PEERS (Professional Education and Enrichment Resources) and the Early Intervention Credential were both discontinued due to the transition to DIDD and alignment of resources and training practices with the new lead agency. These activities may be re-evaluated in the future relative to impact/benefit and personnel resources available to manage.

**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 FFY 2020-21, the lead agency’s professional development (PD) system to support EIS service providers (i.e., Early Intervention Resource Agencies [EIRAs] and Vendors) was led by the two direct services coordinators (DSCs).  
  
In FFY 2020-21 the primary focus on professional development continued with contracted Early Intervention Resource Agencies (EIRAs) who provide the early intervention service of developmental therapy. The 35 contracted EIRAs are divided geographically for ease of access and travel by the DSCs. DSCs provided technical assistance and support through planning one-on-one meetings with agency directors and leadership, attending and/or training at staff meetings, attending and/or training at regional director meetings to discuss issues and brainstorm solutions, and observation and feedback to staff and/or agency leadership.   
  
In 2020-21, professional development activities supported by the DSCs included regular meetings with EIRA directors addressing such areas as:  
  
Family-Guided Routines-Based Intervention (FGRBI)  
The lead agency identified FGRBI as its early intervention service delivery model in Spring 2018 at which time a multi-year plan for full implementation was developed. Implementation work continued in FFY 2020-21 with a major goal to help build the confidence and competence of service providers, so they in turn can build the confidence and competence of the parents/caregivers served.   
  
FGRBI work in FFY 2020-21 included such activities as:  
• Support FGRBI training for agency new hires, new agency directors, and local interagency coordinating councils (LICCs) as needed.  
• FGRBI implementation, including the components of setting the stage and observation and opportunities to embed.  
• Adult learning principles and how FGRBI indicators support these principles  
• One on one support and brainstorming with EIRA directors to discuss and reflect on what they are noticing in home visit observations as far as how their staff implement FGRBI into their sessions. The development of coaching strategies in the general areas of observation, reflection, and information sharing was a particular focus this reporting cycle.  
• Assisting EIRA directors to build professional development plans that lay the foundation for FGRBI and help build skills in their staff for embedding learning strategies within routines specific to each family’s needs.  
• Providing workshops at staff meetings that focused on key indicators for FGRBI and allowing open discussion on how to apply it in practice.  
• Providing professional development to directors in the form of EIRA Quarterly meetings, bi-monthly Coffee Breaks (see below), and sharing resources and tools to help them coach their staff  
• Planning for a tiered approach to implementation by creating a Qualified Rater program that will build the capacity of select individuals from each agency to assist in supporting and training the staff in their agency. This program will go into effect in FFY 2021-22.   
• Providing the Building Best Practice conference in 2021 and having all presenters’ content align with the principles from FGRBI, including having contributors to the development of FGRBI attend as main presenter  
• Coffee Breaks. A new avenue for professional development added February 2021. Coffee Breaks occur two times monthly and focus on a specific indicator from the FGRBI Key Indicators checklist each month. Information is shared regarding the indicator, scenarios are discussed and scored for fidelity, and professional development ideas are shared that can be used by agencies for their early interventionists. Attendance is open but not mandatory for agency directors and identified FGRBI qualified raters. Qualified raters are individuals that have been identified by an agency that they anticipate meeting fidelity with FGRBI in their individual practice in the upcoming fiscal year and can begin to provide observation and feedback of other EI’s within their agency and provide additional FGRBI training for their agency.   
  
Center-Based Programs  
Direct service coordinators (DSCs) continued to provide technical support to home- and community-based, and center-based EIRA programs. Beginning in February 2021, and quarterly thereafter, focused support was provided to center-based programs in a separate meeting specific to center-based programs. Providing individualized time for these programs has enabled targeted professional development for classroom teachers and aides on topics such as: documentation, implementation of FGRBI principles for children receiving services in a classroom setting. Development of an activity matrix was begun during this fiscal year with input from center-based programs. It was introduced as a pilot in June 2021. Implementation will occur in FFY 2021-22. Center-based directors received individual training and support during the pandemic to continue to provide services to families that chose center-based services. Several agencies set up virtual classrooms with work supported by the DSCs.   
  
All state led support meetings, coffee breaks, and quarterly meetings were completed virtually during this reporting period. Resources continued to be shared that encouraged caregiver participation. EIRAs were supported in their efforts to provide assessments and developmental therapy during this reporting period in a virtual environment. Each agency began seeing children in person at different times throughout the fiscal year, each based their decision on the health and safety of their community and their agency’s individual policy  
  
EIRA Quarterly Meetings  
Direct service coordinators provided quarterly statewide meetings for EIRA directors in a virtual platform three times this reporting year, with one time in July being a hybrid within person and virtual method available. These meetings are set up to provide a time of rich discussion and leadership building by providing professional development workshops and team building activities. EIRA directors and leadership staff engage with each other to share ideas of how they support their team, what professional development they have used and how they deal with challenges.

**Broad Stakeholder Input:**

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

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

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

YES

**Number of Parent Members:**

5

**Parent Members Engagement:**

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

Two meetings (Nov. 18 and Jan. 13) were held with the SICC data committee to review current and historical data analyzed by members of the TEIS data and operations team for input into SPP/APR results targets and SSIP implementation and evaluation strategies. Contextual information about each results indicator and requirements for target setting were provided to set the stage for discussion. Historical data and analyses were shared with explanations along with justifications for proposed targets.   
  
The lead agency is pleased with the level of engagement from all committee members, including family members. Stakeholders, including family members, demonstrated high interest in TEIS data and its use for informing and guiding improved outcomes to children and their families and were eager to join the data committee. They asked interested and thoughtful questions and the meeting time consisted of meaningful and sincere discussion around setting six-year results indicator targets and improving outcomes for children served through TEIS. All members contributed to the discussion, including family members. The data committee agreed with TEIS-DIDD leadership on six-year results indicator targets set with the exception of Indicator 2. TEIS moved forward with the committee’s recommendation for this indicator.   
  
Committee members were interested and validated the lead agency’s future interest for additional types of data analyses, particularly around early childhood outcomes (ECO). They recommended a few future areas for data analysis consideration. Indicator specific feedback can be found for results indicators under “Provide additional information about this indicator.”

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

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

Through SSIP efforts, TEIS implemented a coordinated outreach effort to eliminate barriers to family engagement in early intervention services through improved eligibility procedures that lead to increased referrals and streamlining the referral-to-IFSP process resulting in an increase in the number of referrals resulting in IFSPs.   
  
As reported in Indicator 4 (Family Outcomes), TEIS has worked on improving the collection of family outcomes data to improve the response rate and representativeness of respondents and ensure that every family has the opportunity to have their voice heard. In addition to the family outcomes data collection process reported in the APR, TEIS implemented a supplementary process in 2020-21 to collect self-reflective information from parents about helping their child develop and learn. This information is gathered at every AEPS to obtain current information that is used by IFSP teams to support child and family outcomes.  
  
TEIS has reported efforts toward implementation of the Family-Guided Routines Based Intervention (FGRBI) evidence-based model of service delivery which focuses on increasing caregiver competence and confidence to support their child. Professional development, technical assistance, and training have been directed toward EIRAs and TEIS POEs for this work.   
  
See APR Introduction, Indicator 4 (Family Outcomes) and Indicator 11 (SSIP) for additional information.

**Soliciting Public Input:**

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

The primary mechanism used for soliciting input for SPP/APR target setting and the SIPP was the SICC data committee. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. Committee membership includes representation from: early intervention professionals; medical professionals from the TN Chapter of American Academy of Pediatrics; TN Council on Developmental Disabilities, higher education; autism; parents of TEIS children; and TEIS staff.  
  
In addition to the SICC data committee the SPP/APR, including SSIP was reviewed with the SICC chair (Jan. 18) and the with the SICC membership and attending visitors on Jan. 25.

**Making Results Available to the Public:**

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

As new six-year results targets were being determined, the draft annual performance report (APR), including indicator 11 (State Systemic Improvement Plan) was reviewed for input and feedback with TEIS-DIDD leadership and with the SICC data committee. Early January, portions of the draft were sent for review by Tennessee’s OSEP state contact, Charles Kniseley.  
  
The full APR was formally reviewed with TEIS-DIDD leadership (Jan. 10th) and then shared with the SICC chairperson (Jan. 18th) prior to a presentation to SICC membership and visitors (i.e., TEIS district office leadership, early intervention service providers, advocates, others) in attendance on Jan. 25th.

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2019 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2019 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.**

Federal report requirements for the performance of each early intervention service (EIS) program (i.e., the nine TEIS POEs) compared to the state’s SPP/APR targets are completed and posted on the state’s website no later than 120 days following the state’s submission of the APR on February 3. This report is entitled, Report to the Public. The state’s APR is also posted at the same location after the close of the federal period of clarification. An email is sent to Tennessee's part C federal OSEP contact and TEIS POE leadership informing them of the posting and the website link.   
  
TEIS uses a bi-monthly newsletter (TRI-Starts) as stakeholder communication tool. With the July 1, 2020 transition to DIDD, newsletter content become more comprehensive and strategically targeted to both families and professionals. The newsletter reports when federal reports have been posted to the website. It is also used as a communication tool about: learning opportunities, family and staff spotlights, upcoming meetings (e.g., service providers [EIRAs and vendors], SICC, Advisory Councils, Data Committee), and TEIS employment opportunities.   
  
Currently, the 2021 Report to the Public (FYY 2019-20 data), 2019-20 Annual Performance Report, and the State Systemic Improvement Plan (SSIP), Phase III, Year 5 Report are available on the State’s website under “Reports” at https://www.tn.gov/didd/for-consumers/tennessee-early-intervention-system-teis/reports---data.html

## Intro - Prior FFY Required Actions

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

## Intro - OSEP Response

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

## Intro - Required Actions

# Indicator 1: Timely Provision of Services

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

Targets must be 100%.

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

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

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

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

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

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 90.96% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.67% | 96.36% | 92.09% | 97.70% | 97.76% |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner** | **Total number of infants and toddlers with IFSPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,041 | 1,183 | 97.76% | 100% | 99.15% | 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.***

132

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

Documented exceptional family circumstances for delays in timely service delivery include: child/family sickness, family vacation/holiday, family’s preferred schedule, family “no show” for a timely scheduled appointment/visit, family forgot about a timely scheduled appointment/visit, provider waiting for physician or medical authorization for a service, weather related events (e.g., snow, ice, tornado, flood), state or local disaster recovery (e.g., flood, tornado, ice storm), state or national pandemic (e.g., Coronavirus/COVID-19).  
  
System issues for delays include service coordinator delay in notifying a provider that a service was added to an IFSP, provider delay in beginning service, difficulty in locating a provider, lack of provider availability, lack of documentation about the reason for delay.

**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).**

Tennessee defines "timely service delivery" as no longer than 30 calendar days from the date of parent consent on the Individualized Family Service Plan (IFSP) for a service."  
  
Data account for the timely receipt of all services for a child rather than individual services. For example, if a child had three new services initiated on an IFSP and any one of the services were delivered untimely, the child had untimely service delivery.

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

State database

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

October 2020

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

Beginning in FFY 2020-21, annual monitoring moved from fiscal year census data (July 1-June 30) to census data for a specific month within the fiscal year. With federal TA support, three years of historical data (FY 2018-2020) across multiple data elements were analyzed to determine if there was a particular month that was more representative of the population served by TEIS. As data analyzed were representative across all months, October was selected to facilitate monitoring and reporting timelines for issuing findings of noncompliance, annual EIS program determinations, and development of the annual public report within the same fiscal year. This decision was reviewed with TN’s OSEP federal contact.  
  
Census data from the Tennessee Early Intervention Data System (TEIDS) were used to determine the percent of Part C eligible infants and toddlers who had timely IFSP service delivery across all IFSP types (i.e., initial, six-month, annual, review change).  
  
The Statistical Analyst 4 (SA4) pulled data from TEIDS. Data were researched by three statistical analyst 2s (SA2s) for reasons where IFSP services were delivered untimely. SA2s provided researched data to assigned TEIS Point of Entry (POE) district leadership for review before the SA4 compiled and submitted final indicator reports to the Part C monitoring coordinator and district leadership.  
  
Data accounted for reasons for untimely IFSP service delivery. Refer to the section, “Provide reasons for delay” for examples of exceptional family circumstances and system reasons.

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

Administrative Complaint  
In FFY 2020-21 one administrative complaint was filed to request hippotherapy. The primary concern of the parent was around appropriate peer interactions as the child neared transition to a 619 special education preschool program.   
  
Hippotherapy is not identified as a Part C early intervention service and is not an early intervention service that TEIS-eligible children are entitled to receive. The complaint was filed in the fall of 2020 during the time of COVID-19 when center-based developmental therapy programs were not an option. Programs resumed face-to-face in spring 2021 at which time TEIS moved the service of developmental therapy from home to a center-based program for peer-group participation. The EIS program was found to have worked through the IFSP process to provide appropriate Part C early intervention services for the child throughout the challenging period of the pandemic. The complaint was investigated within timelines with no finding of noncompliance issued.   
  
COVID-19  
COVID-19 did not impact the state’s ability to collect data required for this indicator nor did it impact data completeness, validity, and reliability for this indicator. The same process was used as described in section, “Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period” for the collection of data used for annual monitoring and the development of the FFY 2020-21 APR.  
  
The additional column added to the data research template in FFY 2019-20 continued to be used to capture information about COVID-19 impact on untimely IFSP early intervention service delivery in the analysis of October 2020 data researched for FFY 2020-21 monitoring.  
  
TEIS continued use of OSEP guidance to code untimely meetings as “untimely/ exceptional family circumstances” when documentation was found in the child’s record (TEIDS) that the untimely early intervention service delivery was due to COVID-19. If there was any question about documentation, the coding of “Yes” for COVID-19 impact was not used.   
  
Breakdown of exceptional family circumstances, October 2020 data:  
# of delays not due to COVID-19: 126  
# of delays due to COVID-19: 6 (4.76%)  
Total # of delays: 132  
  
Breakdown of COVID-19 delays by early intervention service:  
Developmental Therapy: 2  
Occupational Therapy: 1  
Physical Therapy: 0  
Speech Therapy: 3  
Total: 6

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

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

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

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

In FFY 2019-20 there were three findings of noncompliance identified for Indicator 1 (FFY 2018-19 monitoring).No findings were no issued through dispute resolution processes. There were no focused monitoring activities planned or initiated from a concern brought to TEIS leadership.  
  
For the three of nine EIS programs with a finding of noncompliance issued through annual monitoring), all three findings were corrected timely (i.e., as soon as possible but in no case later than one year from the written notice of finding). The Part C monitoring coordinator verified the three programs were correctly implementing regulatory requirements for IFSP service delivery through a review of subsequent monthly data in TEIDS, demonstrating 100% compliance (prong 2 correction).   
  
Six of nine EIS programs did not have a finding of noncompliance. These six programs had pre-finding correction. The Part C monitoring coordinator verified that the programs were correctly implementing regulatory requirements, by a review of subsequent monthly data in TEIDS demonstrating 100% compliance prior to the issuance of written findings of noncompliance. All children had timely IFSP service delivery (prong 2, pre-finding correction).  
  
Pre-finding correction for prong 2 occurs by verifying that subsequent monthly census data in TEIDS demonstrate 100% compliance for timely service delivery prior to the issuance of written finding of noncompliance. Refer to “Introduction: General Supervision System” regarding how TEIS ensures EIS programs are correctly implementing regulatory requirements and for information about pre-finding correction.

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

In FFY 2019-20 there were three findings of noncompliance identified for Indicator 1 (FFY 2018-19 monitoring). No findings were issued through dispute resolution processes. There were no focused monitoring activities planned or initiated from a concern brought to TEIS leadership.  
  
For the three of nine EIS programs with a finding of noncompliance issued through annual monitoring), all three findings were corrected timely (i.e., as soon as possible but in no case later than one year from the written notice of finding). The Part C monitoring coordinator verified there was no remaining child-level noncompliance in fiscal year monitoring data. All individual children had IFSP services delivered, however late, unless they were no longer under the jurisdiction of TEIS. There was no child-level noncompliance found in subsequent monthly data reviewed when verifying correction for the indicator. Data demonstrated 100% compliance. All individual children had timely IFSP service delivery (prong 1, pre-finding correction).  
  
Six of nine EIS programs did not have a finding of noncompliance. These six programs had pre-finding correction. The Part C monitoring coordinator verified the programs had no remaining child-level noncompliance in fiscal year monitoring data. All individual children had IFSP services delivered, however late, unless the child was no longer under the jurisdiction of TEIS. There was no child-level noncompliance found in subsequent monthly data reviewed prior to the issuance of written findings of noncompliance. Data demonstrated 100%. All children had timely IFSP service delivery (prong 1, pre-finding correction).   
  
Pre-finding correction for prong 1 occurs by verifying that fiscal year and subsequent monthly census data contain no child-level noncompliance prior to the issuance of a written finding of noncompliance. Refer to “Introduction: General Supervision System” regarding how TEIS ensures there is no individual child-level noncompliance and for information about pre-finding correction.

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

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

## 1 - Prior FFY Required Actions

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

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

## 1 - OSEP Response

## 1 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 2: Services in Natural Environments

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 76.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= | 85.04% | 85.04% | 85.04% | 85.04% | 85.04% |
| Data | 83.42% | 84.66% | 83.65% | 83.24% | 83.29% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 84.00% | 84.00% | 84.00% | 84.00% | 84.00% | 84.00% |

**Targets: Description of Stakeholder Input**

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 6,471 |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Total number of infants and toddlers with IFSPs | 8,200 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings** | **Total number of Infants and toddlers with IFSPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,471 | 8,200 | 83.29% | 84.00% | 78.91% | Did not meet target | Slippage |

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

The lead agency anticipated slippage with FFY 2020-21 data. Slippage was attributed to the COVID 19 pandemic impacting the manner in which settings data were collected for accurate reimbursement of early intervention services.   
  
The Dec.1, 2020 Child Count Settings Data, significant change note for birth through 2 total by Community and by Other Setting stated, “The onset of the pandemic (COVID-19) prompted the state to all but cease "Community" setting therapies for a significant time period, replacing them with virtual (online) visits considered as "Other" in Tennessee's Settings data.”  
  
TEIS did not have a mechanism to capture vendor services delivered via telehealth in community settings to ensure appropriate reimbursement for those delivered services. This impacted services such as speech, physical therapy, and occupational therapy.   
  
The Tennessee Early Intervention Data System (TEIDS) was modified to appropriately capture services delivered via telehealth in the home/community setting while also ensuring accurate provider reimbursement. The modification was deployed July 1, 2021.

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

The SICC data committee (i.e., stakeholders, described in section, “Targets: Description of Stakeholder Input” provided input for Indicator 2 target setting.   
  
Discussion was held about why TEIS proposed a beginning target of 85% when the state target of 84.04% had not been achieved in seven years (FFY 2013-14 through 2019-20). Stakeholders believed TEIS was setting its target too high. The data stakeholder committee recommended setting a level-year target of 84% for the next six years. In reviewing historical data, stakeholders believed 84% was rigorous, yet achievable. This target is above 76% in the 2005 baseline year. Data will be reviewed annually with modifications made as determined warranted over the span of the next six years.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.  
  
The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 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**

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A1** | 2016 | Target>= | 74.90% |  | 59.00% | 59.00% | 59.00% |
| **A1** | 56.86% | Data | 68.41% | 56.86% | 58.06% | 64.60% | 66.79% |
| **A2** | 2016 | Target>= | 47.40% |  | 52.00% | 52.00% | 52.00% |
| **A2** | 49.54% | Data | 43.93% | 49.54% | 48.23% | 48.15% | 44.73% |
| **B1** | 2016 | Target>= | 78.40% |  | 58.00% | 58.00% | 58.00% |
| **B1** | 56.01% | Data | 72.01% | 56.01% | 48.23% | 48.20% | 46.18% |
| **B2** | 2016 | Target>= | 45.50% |  | 34.00% | 34.00% | 34.00% |
| **B2** | 31.93% | Data | 29.11% | 31.93% | 31.55% | 32.44% | 29.70% |
| **C1** | 2016 | Target>= | 76.90% |  | 67.50% | 67.50% | 67.50% |
| **C1** | 65.32% | Data | 76.31% | 65.32% | 60.54% | 62.50% | 63.28% |
| **C2** | 2016 | Target>= | 49.40% |  | 53.00% | 53.00% | 53.00% |
| **C2** | 51.20% | Data | 37.41% | 51.20% | 56.05% | 58.28% | 55.78% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1>= | 59.00% | 59.00% | 59.00% | 59.00% | 59.00% | 59.00% |
| Target A2>= | 52.00% | 52.00% | 52.00% | 52.00% | 52.00% | 52.00% |
| Target B1>= | 58.00% | 58.00% | 58.00% | 58.00% | 58.00% | 58.00% |
| Target B2>= | 34.00% | 34.00% | 34.00% | 34.00% | 34.00% | 34.00% |
| Target C1>= | 67.50% | 67.50% | 67.50% | 67.50% | 67.50% | 67.50% |
| Target C2>= | 53.00% | 53.00% | 53.00% | 53.00% | 53.00% | 53.00% |

**FFY 2020 SPP/APR Data**

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

5,280

**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 | 13 | 0.25% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,456 | 27.58% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,391 | 26.34% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,733 | 32.82% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 687 | 13.01% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 3,124 | 4,593 | 66.79% | 59.00% | 68.02% | Met target | No Slippage |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 2,420 | 5,280 | 44.73% | 52.00% | 45.83% | Did not meet target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 16 | 0.30% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 2,547 | 48.24% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 973 | 18.43% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,312 | 24.85% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 432 | 8.18% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 2,285 | 4,848 | 46.18% | 58.00% | 47.13% | Did not meet target | No Slippage |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 1,744 | 5,280 | 29.70% | 34.00% | 33.03% | Did not meet target | No Slippage |

**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 | 17 | 0.32% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,371 | 25.97% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 868 | 16.44% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,762 | 33.37% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 1,262 | 23.90% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 2,630 | 4,018 | 63.28% | 67.50% | 65.46% | Did not meet target | No Slippage |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 3,024 | 5,280 | 55.78% | 53.00% | 57.27% | Met target | No Slippage |

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

| **Question** | **Number** |
| --- | --- |
| The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting 618 data | 8,441 |
| 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. | 2,471 |

| **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.**

The Assessment, Evaluation, and Programming System for Infants and Children (AEPS) was utilized in FFY 2020-21 to collect Early Childhood Outcomes (ECO) entrance, ongoing, and exit ratings. Developmental assessment data from the AEPS are gathered, beginning with the initial individualized Family Service Plan (IFSP), and for every six-month and annual IFSP review that follows.   
  
Early interventionists (EIs) who provide the IFSP service of developmental therapy or contracted agencies with staff who meet the same criteria as EIs are responsible for administering the AEPS developmental assessment. They provide the assessment progress report, including ECO ratings, to TEIS service coordinators who enter the ECO ratings into TEIDS, which houses the child’s education record.   
  
The AEPS is utilized as the developmental assessment instrument because 1) it is a developmental assessment tool that has been cross-walked with the federal office of special education programs (OSEP) childhood outcomes; 2) it contains a curriculum component for program planning; and 3) it is aligned with the Tennessee Department of Education’s Tennessee–Early Learning Developmental Standards (TN-ELDS) which provide a continuum of research-based developmental milestones from birth through age five.

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

The Data and Operations Team analyzed historical and projection data for Indicator 3 (early childhood outcomes). Proposed targets were presented to TEIS-DIDD leadership, Nov., 5th. The baseline for this indicator was reset in FFY 2016-17 with new targets established at that time. Based on FFY 2020-21 data, TEIS has only met two of its revised targets in the past four years: A1, three years and C2, four years. The Data and Operations Team proposed maintaining targets from the revised FFY 2016-17 baseline to allow the data collection process additional time. FFY 2020-21 was the third full year ECO data were collected using the AEPS by EIRA early interventionists. TEIS-DIDD leadership supported the recommendation for maintaining current targets.  
  
The SICC data committee (i.e., stakeholders, described in section, “Targets: Description of Stakeholder Input” provided input for Indicator 3 targets. Data and analyses were reviewed with the Committee along with the input gathered from TEIS-DIDD leadership, Nov. 18th. Data committee members agreed with the lead agency’s proposed six-year targets. Data will be reviewed annually with modifications made as determined warranted over the span of the next six years.  
  
The COVID-19 pandemic continued to impact data collection for this indicator. Face-to-face visits continued to be suspended for the majority of 2020-21 and began being offered in May 2021 at agency and family discretion. Remote administration of the AEPS continues to be an option for families with teleconference capability.

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

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

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

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

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

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2013 | Target>= | 90.40% | 90.60% | 90.60% | 90.60% | 90.60% |
| A | 75.42% | Data | 91.37% | 88.00% | 84.99% | 97.38% | 98.26% |
| B | 2013 | Target>= | 93.40% | 93.60% | 93.60% | 93.60% | 93.60% |
| B | 78.45% | Data | 92.76% | 91.25% | 85.90% | 97.34% | 97.79% |
| C | 2013 | Target>= | 90.40% | 90.60% | 90.60% | 90.60% | 90.60% |
| C | 74.58% | Data | 91.99% | 86.58% | 81.03% | 94.95% | 96.26% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Target B>= | 96.00% | 96.00% | 96.00% | 96.00% | 96.00% | 96.00% |
| Target C>= | 93.00% | 93.00% | 93.00% | 93.00% | 93.00% | 93.00% |

**Targets: Description of Stakeholder Input**

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 4,427 |
| Number of respondent families participating in Part C | 3,109 |
| Survey Response Rate | 70.23% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 2,962 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 3,107 |
| 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 | 2,979 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 3,099 |
| 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 | 2,895 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 3,091 |

| **Measure** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- |
| A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2) | 98.26% | 95.00% | 95.33% | 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) | 97.79% | 96.00% | 96.13% | 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) | 96.26% | 93.00% | 93.66% | Met target | No Slippage |

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

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

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Survey Response Rate | 58.18% | 70.23% |

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

The lead agency will continue to implement the Help Our Parents Excel (HOPE) annual survey process designed to eliminate any barriers to participation. Since its initiation in 2018-19, TEIS has experienced annual increases in the family survey response rate of approximately 20%, with the overall rate increasing from 15% in 2017-18 (prior to HOPE process) to 70% in 2020-21. The only change to the HOPE process for 2020-21 was to add an additional option for data collection via teleconference and using the electronic signature platform used by the state.

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

Reports are provided to staff at the state, point of entry (POE) and service coordinator levels which show the response rate, race/ethnicity of respondents, and results. Additional analysis was completed across county socioeconomic status and primary language spoken. No nonresponse bias was identified. Future efforts to improve response will be at the POE level and not targeted at a specific demographic group.

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

The analysis confirms that the HOPE process, which has been designed to eliminate barriers to participation, continues to provide family outcome survey results are representative of population groups served by TEIS for 2020-21. The responses were analyzed by geography, race/ethnicity, county socioeconimc status and primary language demographics of the populations served. The overall response rate for the state was 70.23%. There was no POE with less than 50% response rate. The confidence interval calculation used for race/ethnicity representativeness is discussed in more detail below. Each county was grouped into one of three socioeconomic status (SES) categories based on census data variables appropriate to TEIS population: high, mid, low. The response rate was compared across these SES designations with the highest response rate being from the low SES counties (79%). Finally, the response rate was compared for families whose primary language was not English to those with a primary language of English. The response rates were nearly identical for these groups.

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

The response rate for the survey was 70.23% with 3109 of 4427 surveys returned. Geographically, all TEIS point of entry offices were represented in the data collection. Representativeness based on race/ethnicity demographics were evaluated using a confidence interval calculation of 95% across the three sub-indicators (4A, 4B, and 4C). The lower the confidence interval (CI) percentage, the greater the level confidence can be attributed to the data for a given demographic sub-group. Since TEIS uses a 95% CI calculation, 5% is used as a general benchmark where ny race/ethnicity subgroup with a CI calculation greater than 5% across one of the three sub-outcomes would be reason for additional analysis. For 2020-21, the state and all race/ethnicity sub-groups had CI calculations within the targeted ranges across all sub-outcomes.   
  
The overall confidence range (CI) was 0.25-0.36% across the three sub-outcomes for the state. This represents an improvement from FFY 2019-20 survey results where the overall confidence range for the state was 0.31-0.45% and a marked improvement over the 2017-18 (pre-HOPE process) CI of 2.00-2.25%.   
  
State representativeness reported by each sub-indicator:   
• Outcome A (know their rights), 0.25%, compared with 2019-20 which was 0.31%   
• Outcome B (communicate their child’s needs), 0.28%, compared with 2019-20 which was 0.35%   
• Outcome C (help their child develop and learn), 0.36%, compared with 2019-20 which was 0.45%  
  
Below, representativeness is broken out from highest to lowest confidence for family outcome survey results representing a particular race/ethnicity group across the three sub-outcomes A, B, and C:   
• White: confidence interval (CI) range, 0.39-0.41%. Improvement in CI compared to 2019-20 where survey  
 data reported a range of 0.30-0.46%   
• Black or African American: CI range, 1.34-1.72%. Similar compared to 2019-20 where survey data reported  
 a range of 1.21-1.82%.   
• Hispanic/Latino: CI range, 1.84-2.04%. Slight decline in CI compared to 2019-20 where survey data  
 reported a range of 1.42-1.67%.   
• Asian: CI range, 1.99-3.41%. Improvement in CI compared to 2019-20 where survey data reported a range  
 of 4.59-6.34%.   
• Two or more races: CI range, 0.97-2.44%. Improvement in CI compared to 2019-20 where survey data  
 reported a range of 1.28-3.43%.   
• Native Hawaiian or Pacific Islander: CI range, 3.9-3.9%. Improvement in CI compared to 2019-20 where  
 survey data reported a range of 3.39-10.72%.

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

Since FFY 2013-14, TEIS has utilized the Early Childhood Outcomes Family Outcomes Survey Revised (ECO FOS-R) side B. TEIS uses the calculation methodology recommended by the ECO center whereby a family must have a mean score of four or higher on all of the items associated with the sub-indicator to be considered as having met the criteria for that particular sub-indicator. The lead agency continues to contract with East Tennessee State University (ETSU) to support the collection and analysis of survey data.   
  
TEIS has worked to improve both its survey response rate and representativeness. In January 2019, TEIS launched its new family outcomes data collection process called, Help Our Parents Excel (HOPE). TEIS service coordinators received training on 1) purpose of the survey, 2) data collection process, 3) survey methodology, 4) federal indicator 4: family outcomes, 5) ECO FOS-R survey instrument, 6) reliability and validity measures, and 7) potential for and minimizing bias. At the time of the development and implementation of the new process, TEIS wanted to assure service coordinators that there would be no negative consequences for staff, providers, or families as a result of changes in the outcomes data. Therefore, the state opted not to address resetting baselines or changing targets for this indicator when the new process was implemented and waited until the new SPP/APR cycle to set new targets.  
  
Service coordinators collect family outcomes data for each family on their caseload with at least six months of service during the annual data collection window (generally January-April). It is notable that face-to-face services were suspended in mid-March 2020 due to the COVID-19 pandemic, which unexpectedly eliminated in-person options for survey completion during both the 2018-19 and 2019-20 survey collection periods. This change did not result in a decline in survey responses.  
  
The HOPE process allows service coordinators are allowed to use professional judgment regarding the timeframe and method most appropriate to the families on their caseload. Multiple avenues were available for the completion of surveys include phone, mail, teleconference, online, paper, and by service coordinator interview. The family may opt to utilize service coordinator direct support to complete the survey or they may prefer methods that communicate directly with ETSU. Surveys are available in English and Spanish. If other languages are needed, service coordinators were directed to the Early Childhood Technical Assistance (ECTA) Center’s website for surveys in additional languages. Interpreters may be used for survey completion. The lead agency is pleased to report that the revised process called HOPE has resulted in the following improvements:   
• The statewide response rate for 2020-21 was 70.23%, which is the highest in TEIS history. This was a increase to the 2019-20 response rate of 58.18%. Prior to the HOPE process, response rates ranged from 9.22% to 25.91%.   
• The representativeness of the survey improved in both the response rate for each population group and the confidence interval calculations for each group when comparing the data for the last three years to the years prior to the HOPE process (see representativeness section for additional information).   
• Additionally, each service coordinator received a report for their caseload detailing the response rate, race/ethnic population breakdown of responses, results of each sub-indicator, and family comments from surveys.   
  
Further details about the new family outcomes data collection process called, Help Our Parents Excel (HOPE) are available in the State Systemic Improvement Plan (SSIP) Phase III, Year 4 report on the TEIS website at https://www.tn.gov/didd/for-consumers/tennessee-early-intervention-system-teis/reports---data.html.  
  
The Data and Operations Team analyzed historical and projection data for Indicator 3 (early childhood outcomes). Proposed targets were presented to TEIS-DIDD leadership, Nov., 5th:  
• Outcome A: Know their rights. The beginning target (95%) is set above the FFY 2013-14 baseline data of 75.42% and is well above the state’s previous target of 90.00%  
• Outcome B: Communicate Needs. The beginning target (96%) is set above the FFY 2013-14 baseline data of 78.45% and is well above the state’s previous target of 93.00%  
• Outcome C: Develop and Learn. The beginning target (93%) is set above the FFY 2013-14 baseline data of 74.58% and is well above the state’s previous target of 90.00%  
  
The SICC data committee (i.e., stakeholders, described in section, “Targets: Description of Stakeholder Input” provided input for Indicator 3 targets. Data and analyses were reviewed with the Committee along with the input gathered from TEIS-DIDD leadership, Nov. 18th. Data committee members agreed with the lead agency’s proposed six-year targets. Data will be reviewed annually with modifications made as determined warranted over the span of the next six years.

## 4 - Prior FFY Required Actions

None

## 4 - OSEP Response

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

## 4 - Required Actions

# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 0.74% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 0.89% | 0.89% | 0.89% | 0.89% | 0.89% |
| Data | 0.92% | 1.12% | 1.20% | 1.38% | 1.49% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 1.49% | 1.50% | 1.51% | 1.52% | 1.53% | 1.54% |

Targets: Description of Stakeholder Input

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 1 with IFSPs | 1,209 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 1 | 79,891 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,209 | 79,891 | 1.49% | 1.49% | 1.51% | Met target | No Slippage |

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

The Data and Operations Team analyzed historical and projection data for Indicator 5 (birth to one year of age). Proposed targets were presented to TEIS-DIDD leadership, Nov, 5th. The beginning target (1.49%) is set above the state’s previous target of 0.89% and is above 0.74% in the 2005 baseline year. Leadership expressed that targets were achievable, with conservative increases across the six years.  
  
The SICC data committee (i.e., stakeholders, described in section, “Targets: Description of Stakeholder Input” provided input for Indicator 5 targets. Data and analyses were reviewed with the Committee along with the input gathered from TEIS-DIDD leadership, Nov. 18th. Data committee members were in agreement with the lead agency’s proposed six-year targets. Data will be reviewed annually with modifications made as determined warranted over the span of the next six years.  
  
During the discussion, committee members mentioned a future area for data analysis for which they would have interest: comparison of the number of children served with state prevalence data. TEIS has comparison data using 618 Child Count and U.S. Census population estimates by age, county, and TEIS POEs—the Committee expressed interest in a similar analysis using state prevalence data. This type of analysis was noted as a future meeting topic.  
  
Mentioned in the APR introduction, section for “General Supervision System”, the lead agency is the process of developing a monitoring plan. The plan will include results for children and families. Child find is a variable that will be a component in the future plan. Types of analyses are currently in process of being developed.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

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

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 2.37% | 2.37% | 2.37% | 2.37% | 2.37% |
| Data | 2.08% | 2.34% | 2.77% | 3.17% | 3.43% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 3.37% | 3.40% | 3.43% | 3.46% | 3.49% | 3.52% |

Targets: Description of Stakeholder Input

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 3 with IFSPs | 8,200 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 3 | 242,447 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 8,200 | 242,447 | 3.43% | 3.37% | 3.38% | Met target | No Slippage |

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

The Data and Operations Team analyzed historical and projection data for Indicator 6 (birth through two years of age). Proposed targets were presented to TEIS-DIDD leadership, Nov, 5th. The beginning target (3.37%) is set above the state’s previous target of 2.37% and is above 1.80% in the 2005 baseline year. Leadership expressed that targets were achievable, with conservative increases across the six years.  
  
The SICC data committee (i.e., stakeholders, described in section, “Targets: Description of Stakeholder Input” provided input for Indicator 6 target setting. After discussing TEIS-DIDD leadership’s input into proposed targets, Data Committee members were in agreement with the lead agency’s proposed six-year targets. The target was increase one percentage point from the previous target. Data will be reviewed annually with modifications made as determined warranted over the span of the next six years.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

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

## 6 - Required Actions

# Indicator 7: 45-Day Timeline

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

Targets must be 100%.

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

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

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

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

## 7 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 86.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.78% | 99.08% | 98.66% | 98.32% | 99.16% |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline** | **Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 697 | 780 | 99.16% | 100% | 99.10% | 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.**

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

Documented exceptional family circumstances for delays in timely eligibility determination and initial IFSP development include: difficulty in locating or contacting family upon receipt of referral into TEIS, child/family sickness, family’s preferred schedule, family vacation/holiday, delay in receiving medical records when requested timely, family “no show” for a timely scheduled appointment/meeting with developmental evaluator or service coordinator, weather related events (e.g., snow, ice, tornado, flood), state or local disaster recovery (e.g., flood, tornado, ice storm), state or national pandemic (e.g., Coronavirus/COVID-19).  
  
System issues for delays include developmental evaluator or service coordinator delay in contacting family and/or completing intake upon receipt of referral into TEIS, delay in TEIS requesting medical records used in eligibility determination, delay in scheduling a developmental evaluation, delay in scheduling initial IFSP meeting after eligibility is determined, poor planning of the service coordinator around approved leave or state holidays, lack of documentation about the reason for delay.

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

State database

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

October 2020

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

Beginning in FFY 2020-21, annual monitoring moved from fiscal year census data (July 1-June 30) to census data for a specific month within the fiscal year. With federal TA support, three years of historical data (FY 2018-2020) across multiple data elements were analyzed to determine if there was a particular month that was more representative of the population served by TEIS. As data analyzed were representative across all months, October was selected to facilitate monitoring and reporting timelines for issuing findings of noncompliance, annual EIS program determinations, and development of the annual public report within the same fiscal year. This decision was reviewed with TN’s OSEP federal contact.  
  
Census data from the Tennessee Early Intervention Data System (TEIDS) were used for the month of October 2020 to determine the percent of Part C eligible infants and toddlers who had eligibility determination and initial Individualized Family Service Plan (IFSP) development within 45 days of referral into Tennessee's Early Intervention System (TEIS).  
  
The Statistical Analyst 4 (SA4) pulled data from TEIDS. Data were researched by three statistical analyst 2s (SA2s) for reasons where meetings were untimely (i.e., exceptional family circumstances or system). SA2s provided researched data to assigned TEIS Point of Entry (POE) district leadership for review before the SA4 compiled and submitted final indicator reports to the Part C monitoring coordinator and district leadership.   
  
Data accounted for reasons for untimely initial IFSP meetings. Refer to the section, “Provide reasons for delay” for examples of exceptional family circumstances and system reasons.

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

In FFY 2019-20 there were no findings of noncompliance identified for Indicator 7 (FFY 2018-19 monitoring). One of the nine EIS programs demonstrated 100% compliance for the fiscal year. The other eight EIS programs not reporting 100% compliance, and which did not have a finding, the Part C monitoring coordinator verified that prong 1 and prong 2 noncompliance were corrected through a verification of data prior to the issuance of a written findings of noncompliance (i.e., pre-finding correction).   
  
Pre-finding correction occurs through verification of fiscal and subsequent monthly census data in TEIDS demonstrating 100% compliance and the correction of any previous child-level noncompliance prior to the issuance of a written finding. For the eight programs the Part C monitoring coordinator verified:  
• Prong 1: There was no child-level noncompliance through the review of fiscal and subsequent monthly census data in TEIDS prior to the issuance of a written finding of noncompliance.  
• Prong 2: Programs were correctly implementing the regulatory requirements by the verification of subsequent monthly census data in TEIDS demonstrating 100% compliance prior to the issuance of a written finding of noncompliance.  
  
Refer to “Introduction: General Supervision System” regarding how TEIS ensures EIS programs are correctly implementing regulatory requirements; ensures there is no child-level noncompliance; and for information on pre-finding correction.  
  
COVID-19 Impact  
COVID-19 did not impact the state’s ability to collect data required for this indicator nor did it impact data completeness, validity, and reliability for this indicator. The same process was used as described in section, “Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period” for the collection of data used for annual monitoring and the development of the FFY 2020-21 APR.  
  
The additional column added to the data research template in FFY 2019-20 continued to be used to capture information about COVID-19 impact on untimely eligibility determination and initial IFSP development in the analysis of October 2020 data researched for FFY 2020-21 monitoring.  
  
TEIS continued use of OSEP guidance to code untimely meetings as “untimely/ exceptional family circumstances” when documentation was found in the child’s record (TEIDS) that the untimely eligibility determination and/or initial IFSP development were due to COVID-19. If there was any question about documentation, the coding of “Yes” for COVID-19 impact was not used.   
  
Of the 76 records in October 2020 data coded untimely/ exceptional family circumstances, there were five (6.58%) documented incidences where COVID-19 impacted timeliness for initial IFSP development. Timeliness for eligibility evaluations was not impacted by the pandemic.

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

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

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

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

## 7 - Prior FFY Required Actions

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

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

## 7 - OSEP Response

## 7 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 8A: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

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

## 8A - Indicator Data

**Historical Data**

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

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

**Targets**

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

**FFY 2020 SPP/APR Data**

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

YES

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 8,441 | 8,441 | 100.00% | 100% | 100.00% | Met target | No Slippage |

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

0

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

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

State database

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

July 1 2020-June 30, 2021

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

The Tennessee Early Intervention Data System (TEIDS) contains a validation that assures all initial Individual Family Service Plans (IFSPs) are developed with a transition outcome/goal, including steps and services. This transition goal must be in place before an initial IFSP can be saved as final in the child’s educational record. The transition goal is reviewed and updated at subsequent IFSP meetings, including the formal Local Education Agency (LEA) transition planning conference.

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

COVID-19 did not impact the state’s ability to collect data required for this indicator nor did it impact data completeness, validity, and reliability for this indicator. The same process was used as described in section, “Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period” for the collection of data used for annual monitoring and the development of the FFY 2020-21 APR.

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

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

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

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

## 8A - Prior FFY Required Actions

None

## 8A - OSEP Response

## 8A - Required Actions

# Indicator 8B: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

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

## 8B - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 81.18% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.96% | 99.83% | 99.97% | 100.00% | 100.00% |

**Targets**

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

**FFY 2020 SPP/APR Data**

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

YES

| **Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 4,562 | 4,564 | 100.00% | 100% | 99.96% | Did not meet target | No Slippage |

**Number of parents who opted out**

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

0

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

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

Monthly data are pulled from the Tennessee Early Intervention Data System (TEIDS) in the state central office and shared with local education agencies (LEAs) and the state education agency (SEA) for the notification of all children served by TEIS who reach the age of transition (i.e., nine months to not fewer than 90 days prior to third birthday) and are potentially eligible for part B, 619 special education preschool services. Contact information for these children is sent to the LEA where the child resides so the LEA can contact and prepare for toddlers who may be potentially eligible for part B preschool service.

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

NO

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

State database

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

July 1 2020-June 30, 2021

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

For FFY 2020 (2020-21), the monthly notification process was found sufficient in implementing requirements for SEA/LEA notification. All toddlers who were potentially eligible for Part B had timely SEA/LEA notification.  
  
Fiscal year data, however, did not demonstrate 100% compliance due data entry errors in two TEIS Point of Entry district offices.   
1) In one district the service coordinator in error clicked on a box in TEIDS that indicated a transition conference occurred when it did not. This error caused the data system to not alert the service coordinator that an upcoming transition conference was due. The transition meeting was held late, thus SEA and LEA notification occurred late.  
2) In the other district when the family refused a transition conference with the LEA, the service coordinator in error clicked on a box in TEIDS that indicated a transition conference occurred when it did not. The error was not corrected until after the child exited the system, thus SEA and LEA notification did not occur.  
  
Subsequent monthly notification data for these two TEIS districts were reviewed to ensure the proper functioning of the SEA/LEA notification process. July 2021 data demonstrated all 73 children eligible for SEA/LEA notification had timely notification. This review confirmed the monthly notification process was working properly.

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

COVID-19 did not impact the state’s ability to collect data required for this indicator nor did it impact data completeness, validity, and reliability for this indicator. The same process was used as described in section, “Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period” for the collection of data used for annual monitoring and the development of the FFY 2020-21 APR. There were no interruptions to the monthly notification process to the SEA and LEAs due to COVID-19.

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

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

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

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

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

## 8B - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

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

## 8C - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 88.08% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.66% | 99.51% | 98.25% | 99.12% | 98.66% |

**Targets**

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

**FFY 2020 SPP/APR Data**

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

YES

| **Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 289 | 411 | 98.66% | 100% | 96.76% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Even though TEIS demonstrated substantial compliance (95%) for Indicator 8C, there was slippage from FFY 2019-20 data. A review of October 2020 monitoring data revealed compliance ranging from a high of 100% to a low of 85% in the nine TEIS Point of Entry offices. Three of the nine TEIS POEs demonstrated compliance less than 95% (substantial compliance) in October 2020 data.   
  
A review of the data in these three districts revealed system issues such as: the service coordinator scheduled the LEA transition conference after the conference due date, lack of follow-up with the family when scheduling the conference, and lack of documentation about what occurred.

**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.**

71

**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.**

40

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

Documented exceptional family circumstances for delays in timely Local Education Agency (LEA) transition conferences include: child/family sickness, family vacation/holiday, family’s preferred schedule, family “no show” for a timely scheduled meeting, weather related events (e.g., snow, ice, tornado, flood), state or local disaster recovery (e.g., flood, tornado, ice storm), state or national pandemic (e.g., Coronavirus/COVID-19).  
  
System issues for delays include service coordinator delay in contacting the LEA to schedule a conference, availability issues with LEAs to meet (e.g., spring/summer, availability of personnel for the needed number of meetings), lack of documentation about the reason for delay.

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

State database

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

October 2020

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

Beginning in FFY 2020-21, annual monitoring moved from fiscal year census data (July 1-June 30) to census data for a specific month within the fiscal year. With federal TA support, three years of historical data (FY 2018-2020) across multiple data elements were analyzed to determine if there was a particular month that was more representative of the population served by TEIS. As data analyzed were representative across all months, October was selected to facilitate monitoring and reporting timelines for issuing findings of noncompliance, annual EIS program determinations, and development of the annual public report within the same fiscal year. This decision was reviewed with TN’s OSEP federal contact.  
  
Census data from the Tennessee Early Intervention Data System (TEIDS) were used for the month of October to determine the percent of Part C eligible toddlers who had timely Local Education Agency (LEA) transition planning conferences with parent consent.  
  
The statistical analyst 4 (SA4) pulled data from TEIDS for Part C eligible toddlers who reached the age of transition (i.e., at least 90 days, and at the discretion of all parties nine months, prior to the toddler’s third birthday).. Data were researched by three statistical analyst 2s (SA2s) for reasons where meetings were untimely. SA2s provided researched data to assigned TEIS Point of Entry (POE) district leadership for review before the SA4 compiled and submitted final indicator reports to the Part C monitoring coordinator and district leadership. Data accounted for reasons for untimely LEA transition planning conferences (i.e., exceptional family circumstances or system).  
  
Data accounted for reasons for untimely LEA transition conferences. Refer to the section, “Provide reasons for delay” for examples of exceptional family circumstances and system reasons.

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

In FFY 2019-20 there were no findings of noncompliance identified for Indicator 8C (FFY 2018-19 monitoring). Three of the nine EIS programs demonstrated 100% compliance for the fiscal year. The other six EIS programs not reporting 100% compliance, and which did not have a finding, the Part C monitoring coordinator verified that prong 1 and prong 2 noncompliance were corrected through a verification of data prior to the issuance of a written findings of noncompliance (i.e., pre-finding correction).   
  
Pre-finding correction occurs through verification of fiscal and subsequent monthly census data in TEIDS demonstrating 100% compliance and the correction of any previous child-level noncompliance prior to the issuance of a written finding. For the six programs the Part C monitoring coordinator verified:  
• Prong 1: There was no child-level noncompliance through the review of fiscal and subsequent monthly census data in TEIDS prior to the issuance of a written finding of noncompliance.  
• Prong 2: Programs were correctly implementing the regulatory requirements by the verification of subsequent monthly census data in TEIDS demonstrating 100% compliance prior to the issuance of a written finding of noncompliance.  
  
Refer to “Introduction: General Supervision System” regarding how TEIS ensures EIS programs are correctly implementing regulatory requirements; ensures there is no child-level noncompliance; and for information on pre-finding correction.  
  
COVID-19 Impact  
COVID-19 did not impact the state’s ability to collect data required for this indicator nor did it impact data completeness, validity, and reliability for this indicator. The same process was used as described in section, “Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period” for the collection of data used for annual monitoring and the development of the FFY 2020-21 APR.  
  
The additional column added to the data research template in FFY 2019-20 continued to be used to capture information about COVID-19 impact on untimely transition planning conferences when October 2020 data were researched for FFY 2020-21 monitoring.  
  
TEIS continued use of OSEP guidance to code untimely meetings as “untimely/ exceptional family circumstances” when documentation was found in the child’s record (TEIDS) that the untimely or missed transition planning conferences were due to COVID-19. If there was any question about documentation, the coding of “Yes” for COVID-19 impact was not used.   
  
Breakdown of exceptional family circumstances data for FFY 2020-21:  
# of delays or missed meetings not due to COVID-19: 26  
# and (%) of delays or missed meetings due to COVID-19: 14 (35%)  
Total number of exceptional family circumstances 40

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

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

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

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

## 8C - Prior FFY Required Actions

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

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

## 8C - OSEP Response

## 8C - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 9: Resolution Sessions

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

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

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

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

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

## 9 - Indicator Data

**Not Applicable**

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

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 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1 Number of resolution sessions | 0 |
| SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1(a) Number resolution sessions resolved through settlement agreements | 0 |

**Targets: Description of Stakeholder Input**

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= |  |  |  |  | .00% |
| Data |  |  |  |  |  |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  |  |  | N/A | N/A |

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

There were no resolution sessions held during FFY 2020-21. States are not required to establish a baseline or targets if the number of mediations is less than 10.

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2020 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 ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

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

**Instructions**

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

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

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

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

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

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

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

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

NO

**Prepopulated Data**

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

Targets: Description of Stakeholder Input

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= |  |  |  |  | .00% |
| Data |  | 100.00% | 0.00% |  |  |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  |  |  | N/A | N/A |

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

There were no mediations held during FFY 2020-21. States are not required to establish baseline or targets if the number of resolution sessions is less than 10.

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2020. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 10 - Required Actions

# Indicator 11: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

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

**Measurement**

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

**Instructions**

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

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

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

Overview of the Three Phases of the SSIP

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

*Phase I: Analysis*:

- Data Analysis;

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

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

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

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

- Infrastructure Development;

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

- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

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

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

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

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

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

## 11 - Indicator Data

**Section A: Data Analysis**

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

The percent of infants and toddlers who demonstrate improved acquisition and use of knowledge and skills and who function within age expectations by the time they exit or turn age three will increase [ECO Outcome 3B, Summary Statement 2]

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

NO

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

NO

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

NO

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

https://www.tn.gov/didd/for-consumers/tennessee-early-intervention-system-teis/reports---data.html

Progress toward the SiMR

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

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 32.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 34.00% | 34.00% | 34.00% | 34.00% | 34.00% | 34.00% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Numerator equals the percent of infants/toddlers who were functioning within age expectations in ECO Outcome B by the time they turned 3 or exited the program (Outcome B; progress categories d+e) | Denominator equals all infants/toddlers who exited with at least six months of services in FFY 2020 who had both entrance and exit ECO ratings in Outcome B | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 1,744 | 5,280 | 29.70% | 34.00% | 33.03% | Did not meet target | No Slippage |

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

Early Childhood Outcomes (Indicator 3) Outcome B2   
  
Data source for the SiMR is Outcome B, summary statement 2. Numerator equals the percent of infants/toddlers who were functioning within age expectations in ECO Outcome B by the time they turned 3 or exited the program (Outcome B; progress categories d+e). Denominator equals all infants/toddlers who exited with at least six months of services in FFY 2020 who had both entrance and exit ECO ratings in Outcome B.

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

The Assessment, Evaluation, and Programming System for Infants and Children (AEPS) was utilized in FFY 2020-21 to collect Early Childhood Outcomes (ECO) entrance, ongoing, and exit ratings. Developmental assessment data from the AEPS are gathered, beginning with the initial individualized Family Service Plan (IFSP), and for every six-month and annual IFSP review that follows.  
  
Early interventionists (EIs) who provide the IFSP service of developmental therapy or contracted agencies with staff who meet the same criteria as EIs are responsible for administering the AEPS developmental assessment. They provide the assessment progress report, including ECO ratings, to TEIS service coordinators who enter the ECO ratings into TEIDS, which houses the child’s education record.  
  
The AEPS is utilized as the developmental assessment instrument because 1) it is a developmental assessment tool that has been cross-walked with the federal office of special education programs (OSEP) childhood outcomes; 2) it contains a curriculum component for program planning; and 3) it is aligned with the Tennessee Department of Education’s Tennessee–Early Learning Developmental Standards (TN-ELDS) which provide a continuum of research-based developmental milestones from birth through age five.

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

NO

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

YES

**Describe any data quality issues, unrelated to COVID-19**, **specific to the SiMR data and include actions taken to address data quality concerns.**

TEIS noted outcome B, acquisition and use of knowledge and skills, continues to trend lower than the other two outcomes. Analysis was conducted at the district and agency level to identify any potential inter-rater reliability issues and to identify the developmental domains (i.e., social-communication and cognitive) from the AEPS that used in the calculation for Outcome B. As a results of these efforts, TEIS plans to include ECO in its revised monitoring system.

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

YES

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

The COVID-19 pandemic continued to impact data collection for this indicator. Face-to-face visits continued to be suspended for the majority of 2020-21 and began being offered in May 2021 at agency and family discretion. Remote administration of the AEPS continues to be an option for families with teleconference capability. As reported in the 2019-20 APR and SSIP, the COVID-19 pandemic led to a significant increase in the number of children exiting with greater than 183 days (six months) since their more recent ECO rating and their exit. In 2018-19, there were 192 children with ECO greater than 183 days (six months) at exit. This number is comparable to 2017-18, with 176. In 2019-20, TEIS had 848 children with ECO ratings greater than 183 days at exit and in 2020-21, TEIS had 650. This means the ECO ratings do not fully capture the progress made during their time in services.   
  
In addition to the longer gaps between the ECO ratings, TEIS identified an increase in missing ECO records in 2020-21. Prior to 2020-21, TEIS averaged less than 5% of records of children with more than 183 days of service that could not be used in the ECO data collection due to missing either the entrance rating, exit rating, or both. In 2020-21, this increased to 13% of records. This increase is due to the suspension of face-to-face visits. While remote AEPS administration was available, this was only possible for families who could participate in teleconference services as observation of the child is a requirement for AEPS. The lead agency considered other options, such as implementing an alternative methodology for collecting the data that would not utilize the AEPS, but ultimately decided that since 2019-20 was the first full year with both entrance and ECO ratings collected via the AEPS, it was in the state’s best interest to maintain the reliability and validity of the ECO data to the best of our ability by not introducing alternative methods at this juncture. TEIS is continuing to monitor this and review best practices for ECO data collection to meet ongoing needs in the future.

Section B: Implementation, Analysis and Evaluation

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

YES

**If yes, please provide the following information: a description of the changes and updates to the evaluation plan; a rationale or justification for the changes; and, a link to the State’s current evaluation plan****.**

The steps in the ECO data improvement strategy were updated to reflect the current status. The last submission of the evaluation plan stated the steps were to be determined. Minor language changes/updates in the other improvement strategies were made to capture current information or areas where evaluation was on hold due to incomparability of current data to pre-pandemic baseline.  
  
TEIS's implementation and evaluation plan can be found on the "Reports and Data" section of our website at this link https://www.tn.gov/didd/for-consumers/tennessee-early-intervention-system-teis/reports---data.html

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

In 2020-21, the infrastructure improvement strategies TEIS continued to focus on were related to assimilation of TEIS into the new lead agency, including procedures for communication internally and externally with stakeholders, development of an ongoing data/reporting plan, revision of the internal monitoring systems. The work on these activities has continued through FY 2020-21 into FY 2021-22 with hiring of a new Assistant Commissioner for TEIS and ongoing restructuring of the central office to better accommodate workflow and priorities. As described in the introduction to the APR, the changes to the compliance monitoring process went into effect in FY 2020-21, which allowed TEIS to redistribute workload among personnel to support data/reporting plans and the development of a robust results monitoring system.   
  
The ongoing infrastructure improvement strategy that has been a focus from the beginning of SSIP work has been on the reduction of service coordinator (SC) caseloads. The target for standard SC caseloads in TEIS is 50 children. TEIS and DIDD leadership is current focused on achieving a goal with a realistic target of 60 children per SC. The work on the eligibility procedures improvement strategy has increased referrals and eligibility rates, which has strained the system. TEIS has converted as many positions as possible to SCs and was also granted new positions from the state legislature to reduce caseloads. However, delays in filling the new positions due to the COVID-19 pandemic and the July 1, 2020, transition in lead agency from the Department of Education to the Department of Intellectual and Developmental Disabilities (DIDD) combined with increases in referrals and staff leave/turnover mean that high caseloads continue to be an issue.

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

As reported in last year’s SSIP, TEIS’s primary infrastructure improvement is around the reduction of service coordinator (SC) caseloads, which relates to quality standards and professional development. As reported in the last SSIP, the average SC caseload in 2019-20 was 87 and in the 2020-21 SSIP report in April, the average was down to 78. However, by the end of the fiscal year it was back up to 82 due to staff vacancies. With the COVID-19 pandemic, some TEIS point of entry (POE) offices have experienced higher than usual turnover and difficulties filling vacant positions. As a result, a higher-than-normal proportion of staff is new and still in training and unable to carry a full caseload. The average caseload is monitored monthly and strategies, such as shifting personnel from other districts is utilized when needed. Additional work on this strategy in 2020-21 included a revision and training on the Targeted Case Management process to ease the burden on service coordinators.

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

NO

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

In the FY 2021-22 reporting cycle, TEIS will continue development and implementation efforts for a new monitoring plan that encompasses both compliance and results. TEIS will also report on additional activities related to service coordinator caseloads, such as a comprehensive review of operations in an effort to streamline inefficient processes and procedures and develop a more robust set of support tools for service coordinators.

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

• Eligibility Procedures: Eliminate barriers preventing eligible children from accessing early intervention services.   
• IFSP Teaming: Establish clear expectations for IFSP team members.   
• Family-Centered Services: Implement Family Guided Routines Based Intervention (FGRBI) model of service delivery.   
• Early Childhood Outcomes (ECO) Data: Improve collection, accuracy, and quality of ECO data.

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

Eligibility Procedures  
This improvement strategy was implemented to determine if TEIS was missing potentially eligible children or losing eligible children prior to initial IFSP. Through extensive data analysis, family and stakeholder input, TEIS opted to eliminate the use of screening prior to initial eligibility evaluation and streamline the front-end service through contracting for eligibility evaluations.   
  
IFSP Team Function  
This improvement strategy was implemented to support each IFSP team member, including families in their role and eliminate barriers to communication or teaming. Past work on this strategy has included development of contract performance measures/payment structures to support IFSP meeting or other teaming opportunities, development of data system enhancements to capture co-visiting, and district-specific work on IFSP teaming goals.   
  
  
Family-Centered Services  
This improvement strategy was selected to support the implementation of evidence-based practices within service delivery that emphasizes the role of the parent/caregiver in the intervention and working with the child and family to support their daily routines. This strategy has evolved into implementation of the Family Guided Routines Based Intervention (FGRBI) model of service delivery.   
  
ECO Data  
This improvement strategy focuses on efforts to improve the quality of the ECO data used to measure the SiMR. Work on this strategy has resulted in moving from professional judgement to the implementation of the AEPS tool to collect the data.

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

See the introduction to the APR for specific training, technical assistance, and professional development activities conducted during 2020-21 to support these improvement strategies.   
  
Eligibility Procedures  
Eliminate barriers preventing eligible children from accessing TEIS services. This impacts the SiMR by maximizing potential time for intervention services. Work on this activity this year primarily focused on ensuring services continued during the COVID-19 pandemic and providing guidance to allow evaluation agencies discretion with using either in-person and remote evaluation options as needed to support their staff or as requested by families.   
  
IFSP Team Function  
Establish clear expectations for role of team members, which impacts the SIMR by providing a coordinated approach to service delivery. Work on this activity this year continued to focus primarily on ongoing teleconference service delivery and ensuring regular communication with families and between team members. For the majority of service providers, face-to-face visits were not conducted in FY 2020-21, which means the majority of IFSP team meetings and services were conducted remotely.   
  
Family-Centered Services  
Implement Family-Guided Routines Based (FGRBI) model of service delivery, which impacts the SiMR by ensuring services are delivered in alignment with an evidence-based model that focuses on family needs, routines, and natural environments. Work on FGRBI implementation this year included revising the fidelity checklist used by Early Intervention Resource Agencies (EIRAs) to capture additional information when the item is “partially” observed, continued training/technical assistance for EIRAs and TEIS point of entry staff, individualized support for center-based programs, and implementation of the new developmental therapy contract process under DIDD to specifically address FGRBI implementation.   
  
ECO Data  
Improve collection, accuracy, and quality of child outcomes data, which impacts the SiMR by ensuring child outcomes data is valid and reliable. Work on this activity this year included ongoing support for remote implementation of AEPS and ensuring the AEPS inter-rater reliability certificate is a requirement in the scope of services for the new 2021-24 EIRA contracts. With this addition, this certificate will be required for all staff conducting AEPS assessments within six-months of their hire date.

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

Data collection for each strategy is described below. Challenges with current data analysis/reporting and comparing current data to previous years exist all four improvement strategies in the past year due to the ongoing suspension of face-to-face services during COVID-19 pandemic and the continued use of teleconference services. For the majority of TEIS providers, including service coordinators, face-to-face services were first allowed in May 2021 based on family preference and provider’s policies. Telehealth services continue to be an option for families and providers.   
  
Eligibility Procedures  
Data collection includes monthly analysis of referrals, number and percent of eligibility, ineligibility, and family decline by district, number/percent resulting in IFSPs, average age at referral, and average length of time from referral to eligibility. Additional analysis conducted by county socioeconomic (SES) status to monitor for any differences in eligibility rates for referrals from low SES counties.   
  
IFSP Team Function  
Data included monthly reporting/analysis of developmental therapy visits that were either IFSP team meetings or co-visits with other providers. Challenges with this strategy noted in 2019-20 relative to the COVID-19 pandemic continued in 2020-21 where both increases and declines in co-visiting were noted from providers. In both instances, inquiry into this revealed providers were problem-solving the issue of teleconference fatigue from families. In some instances, an increase in co-visiting was noted as it allowed the family to have a session with two providers at the same time. In other cases, families were overwhelmed, which resulted in a decline in co-visiting practices.   
  
Analysis was conducted to compare family engagement by socioeconomic status (SES) using county SES as a proxy. Two measures were used for this improvement strategy--family response rate to the annual family survey and total days of service. These two data points were compared to past (baseline) measures. For the family survey, response rates from low SES counties continued to be slightly higher than other SES counties. For the days of service, TEIS noted in the baseline data and subsequent analyses the total days of service for low SES counties was lower than for the children from high and mid SES counties, but for the 2020-21 data this trend has improved. TEIS will continue to monitor this area.   
  
Family-Centered Services  
Data analysis included quarterly staff observations and service log reviews by early interventionists entered into online checklists and reviewed by TEIS direct services coordinators. Challenges with data collection for this strategy noted in 2019-20 have continued in 2020-21 due to the COVID-19 pandemic as service have been delivered via teleconference, which has led families to request shorter or less frequent visits than what would be typical in a face-to-face home setting. TEIS direct services coordinators (DSCs) continued to offer technical assistance to EIRAs around implementation of FGRBI and each agency director has access to their own agency’s individual and aggregate observation data for analysis. DSCs provided coaching to agency directors on utilizing their own data.   
  
ECO Data  
Data analysis included annual APR data reporting, quarterly data reporting, monthly missing data review/follow-up, and in-depth analysis of ECO at POE and EIRA levels. Challenges with ECO data during COVID were described above in the COVID-19 section. Additional analysis on this improvement strategy included trend data over time at the POE and EIRA levels to identify any areas for inclusion in the development of the results monitoring system.

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

A monthly analysis of planned vs. delivered developmental therapy services is conducted using reports of home/community developmental therapy attendance and full-time equivalent hours for IFSP planned services. This paired with anecdotal information gathered from EIRA providers and through a qualitative analysis of information submitted through family surveys provides a possible alternate theory of why some families are requesting shorter or less frequent visits as noted above in the Family-Centered Services improvement strategy—TEIS is beginning to see success with FGRBI implementation and that families are feeling more confident and competent in identifying intervention strategies that work for their child. Additional data to support this improvement strategy could include a review of exiting data and ongoing monitoring of differences between face-to-face vs. teleconference service delivery.

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

Eligibility Procedures  
In 2021-22, TEIS will initiate plans to move from the BDI-2 to the BDI-3 instrument for eligibility evaluations. This will involve training for contracted evaluation agencies and development of procedures/protocols for remote evaluation options as remote evaluations and teleconference services will continue to be offered indefinitely. TEIS will also conduct an in-depth analysis of child find efforts to target any underserved areas.   
  
IFSP Team Function  
TEIS will continue to monitor IFSP teaming data monthly and conduct an annual analysis of length of time in services by county socioeconomic status.  
  
Family-Centered Services  
TEIS will continue with implementation of FGRBI model of service delivery with new observation checklists for EIRAs offering center-based developmental therapy and revisions to the checklists for home/community based developmental therapy EIRAs. TEIS will also continue to provide training, technical assistance, and professional development opportunities to EIRAs and vendors.   
  
ECO Data  
TEIS will review the current ECO data collection process and make decisions on any updates/changes to ECO collection procedures, such as required training. TEIS will also explore additional data analysis for this strategy, such as a deeper dive into the areas of the AEPS that comprise the SiMR and/or a review of the days of service calculation. In addition, TEIS will work with the State Interagency Coordinating Council (SICC) data stakeholder committee to develop reporting and communication strategies to share child outcomes data with public and early intervention stakeholders.

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

The SiMR and improvement strategies remained the same as previous submissions, but individual activities, timelines, and evaluation measures were updated. As TEIS continues to assimilate into the new lead agency, a review of the SSIP improvement activities, strategies, and timelines will be conducted with TEIS leadership and stakeholders to ensure the plan is reflective of current needs and priorities.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

July 1, 2020, the lead agency moved to the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). TEIS aligned its avenues for stakeholder involvement (i.e., state interagency coordinating council (SICC) membership and attending visitors; TEIS, EIRA, and Vendor committees, planned district or state stakeholder meetings) to DIDD’s structure, which is primarily through formal advisory councils. The TEIS-DIDD public information officer assisted the Part C monitoring coordinator and strategic planning coordinator to establish a SICC data committee. Using DIDD’s structure, volunteers from the SICC were invited to participate on a committee with a focus on TEIS data. A data committee was established Oct. 2021. The SICC data committee, which includes parents, will be a principle mechanism for direct TEIS stakeholder involvement related to SPP/APR efforts.   
  
TEIS data and operations team members facilitate quarterly data committee meetings. The committee will be used for input on analyses for topics such as target setting for results indicators; updates or revisions to state systemic improvement plan (SSIP); analyses related to results monitoring (area currently under development), family and early childhood outcomes analyses, etc. Pertinent information from the committee will be shared during updates in quarterly SICC meetings.   
  
Specific to developing six-year targets for APR results indicators, the TEIS data and operations team led efforts to analyze historical data back to previous indicator baselines when former targets had been set. After analyses were completed, proposed six-year targets with justifications were first presented to the TEIS-DIDD leadership for input and approval. Data and TEIS-DIDD leadership’s input were then shared with the SICC data committee Nov. 18th for response and feedback. Indicator specific feedback can be found for each results indicator under “Provide additional information about this indicator.”  
  
Additional stakeholder information.  
TEIS-DIDD Advisory Councils  
In July 2020, the TEIS-DIDD public information officer established two advisory councils: 1) Early Intervention Resource Agency (EIRA)—agencies that provide the IFSP service of developmental therapy. 2) Vendor—agencies that provide IFSP services such as speech, physical and occupational therapy.  
  
The two councils were created by DIDD to provide an open line of communication and feedback between the state and external stakeholders. Council membership is voluntary with membership from agency administrators and agency direct service providers across the three grand regions of Tennessee (East, Middle, West). Councils operate in an autonomous manner led by a chairperson recommended by the membership and appointed by the Commissioner of DIDD. The TEIS-DIDD public information officer serves as the council’s liaison and department support for quarterly meetings.  
  
In FFY 2020-21 the priority of the EIRA council was to begin to identify areas DIDD can strengthen relationships with the EIRA community. Sub-committees were also formed to focus on professional development, communication, and professionalism for EIRAs. In FFY 2020-21, the Vendor council developed and executed a survey of more than 200 vendors. The results of the survey will be used to determine the greatest areas of need for vendors moving forward. The lead agency considers both councils as TEIS stakeholders though they do not have direct impact or input into APR/SSIP efforts.  
  
Office Hours  
With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS-DIDD leadership and the DIDD communications team provided opportunities to engage various stakeholders. The DIDD Commissioner held office hours with providers and with employees every other week via teleconference. TEIS-DIDD leadership continued to hold teleconference hours for early intervention providers (EIRAs and Vendors). These calls began weekly but are now held monthly. Office hours provide opportunities for DIDD to share/discuss pertinent information with stakeholders.

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

With the continued transition to DIDD and the ongoing COVID-19 pandemic, TEIS leadership and the communications team provided opportunities to engage stakeholders in both formal and informal settings. Commissioner Turner has office hours with providers and with employees every other week. TEIS continued to implement office hours specifically for early intervention providers. These calls were every other week but are now monthly with an option to host topic-specific calls as needed. The TEIS public information officer strives to ensure that TEIS has a strong and positive social media presence and has continued offering the newsletter twice a month. A strategic push was made to encourage families to subscribe to the newsletter and to include information of interest to families as well as providers.   
  
SICC meetings continued mostly in a teleconference format, with one hybrid meeting in July. In addition to their regular meetings, SICC members had the opportunity to participate in a committee focused on TEIS data. This committee supported SSIP work and will also be engaged in early childhood outcomes communication strategies in the future. Since transition, DIDD has implemented two formal advisory groups—EIRA and vendor. These groups focused on communication and professional development.

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

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

The COVID-19 pandemic, the suspension of face-to-face services, and the transition of lead agency have continued to bring up a number of questions and concerns from stakeholders. DIDD strives to be responsive to the concerns of stakeholders and provide multiple avenues for receiving questions and input. When implementing a change that impacts providers, DIDD ensures the individuals who can best speak to the change are available on a call to directly answer questions.

**Additional Implementation Activities**

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

There are no additional activities at this time that have not already been described in this report.

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

N/A

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

N/A

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

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

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

## 11 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role**

Designated Lead Agency Director

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

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**Submitted on:**

04/26/22 8:32:21 AM

# ED Attachments

  