

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2021

Iowa



PART C DUE
February 1, 2023

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

- 1) Met target and no slippage: Indicators C6, C8B
- 2) Did not meet target and no slippage: Indicators C1, C2, C5, C7, C8A, C8C
- 3) Did not meet target and slippage: Indicator C3

Additional information related to data collection and reporting

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.

Infrastructure

Iowa's Early ACCESS Integrated System of Early Intervention Services (Early ACCESS or EA) was established to implement Part C of the Individuals with Disabilities Education Act 2004 (IDEA). Iowa developed a statewide system of interagency agreements among four Signatory Agencies: Iowa Departments of Education, Public Health, Human Services, and University of Iowa Child Health Specialty Clinics. The Department of Education is the Lead Agency; each Signatory Agency has personnel on the Early ACCESS (EA) State Team responsible for the implementation and monitoring of the EA system.

In 1974, Iowa established a law requiring a free appropriate public education (FAPE) to meet the needs of children, under 21 requiring special education [Chapter 256B.2(3)]. It mandated the creation of statewide intermediate education agencies, or Area Education Agencies (AEAs), to provide equity in services in accordance with IDEA. The nine AEAs (Regional Grantees or Regions) are responsible for child find, early intervention services, service coordination, transition, personnel development, special education services and support.

Framework for General Supervision

The ECTA Center developed Streamlining and Integrating Part C General Supervision Activities (2012) to provide a framework for a general supervision system. Early ACCESS operationalized the six-step monitoring and program improvement framework to implement general supervision activities.

Step 1: Identify an Issue

The EA State Team annually conducts monitoring activities of Regional Grantees using data collected on compliance indicators through data systems. The lead agency maintains statewide procedures for monitoring compliance and assuring the collection of valid and reliable data; it facilitates the review and analysis of data to ensure accuracy and consistency. The findings determine necessary actions and responses for noncompliance or performance issues requiring corrective action or improvement activities. Additional information gathered from monitoring activities is utilized to address procedural or data entry issues to ensure accurate and reliable data. Iowa uses the following data systems for statewide monitoring activities to identify performance and compliance issues.

Consolidated Accountability and Support Application (CASA) is a state-level system for data reports, compliance information, and monitoring. The system includes a corrective action log for citations of noncompliance and facilitates communication and notifications between the Lead Agency and Regional Grantees. The application records required actions, dates, and documentation.

Iowa used a cloud-based survey system to collect family outcomes data (Indicator 4) in FFY 2021. The lead agency uses the Family Outcomes Survey-Revised: Part C (2010) and is responsible for distributing and collecting surveys sent to all families whose children were in EA for at least 6 months. Surveys were disseminated by: 1) a link to an online survey emailed to families; and 2) paper copies with postage paid return envelopes to families who preferred a paper survey. The survey included questions with demographic variables for age-range of child, child's race/ethnicity, and zip code.

Iowa's IDEA data systems, Legacy and ACHIEVE, support the statewide web-based IFSP and provides data for Part C Section 618 (Indicators 2, 5, 6, 9, 10) and APR Indicators 1, 3, and 7.

Steps 2 and 3: Determine the Extent/Level of the Issue and Determine the Cause of the Issue

Iowa analyzes data to determine the level, extent, and cause of issues. Iowa IDEA general supervision responsibilities utilize infrastructure supports including governance structures, project management processes, and statewide tools.

- Procedures Governance Council (PGC) is responsible for statewide procedures and guidance for EA providers. This includes maintaining awareness of information and guidance provided by OSEP to ensure compliance with IDEA. The PGC serves as the collaborative structure for procedures and system processes used for differentiated accountability.

- Professional Learning Governance Council (PLGC) is responsible for professional learning for EA providers and administrators. The PLGC supports statewide development and dissemination of early intervention services which lead to improved outcomes for infants, toddlers, and families.

- ACHIEVE Governance Council (AGC) is responsible for Iowa's data systems and the documentation of support and services provided within the EA system. The AGC is facilitating the maintenance of the Legacy System as well as the ongoing development and implementation of Iowa's new data system, ACHIEVE.

Step 4: Assign Accountability for the Issue

Corrective action or improvement plans are a system output as a result of Step 4 activities. After State monitoring activities are complete, findings of noncompliance or areas needing improved performance are identified. Notification of performance on IDEA requirements is made to Regional Grantees through regional data profiles and annual determinations. Regional Grantees are also notified of noncompliance or performance issues and any required corrective actions or improvement activities.

The EA quality assurance/monitoring consultant verifies results prior to releasing notification to the Regional Grantees. When written notification is sent, the 365-day timeline begins. Citations for individual child noncompliance are included in the notification to Regional Grantees, as well as when a Corrective Action Plan (CAP) or improvement activities are required. The CAP requires Regional Grantees to conduct a root cause analysis. Additionally, the EA State Team has regularly scheduled meetings to discuss related topics with EA Regional Administration and Leadership Team.

Step 5: Ensure and Verify Resolution of the Issues

Iowa uses new data pulled from the Iowa's data systems, Legacy and ACHIEVE, to verify correction of noncompliance or resolution of the issue. When findings of noncompliance occur, the Lead Agency requires all individual findings of noncompliance be corrected and verified within 365 days. The lead agency quality assurance consultant is responsible for monitoring correction of all individual child noncompliance including a verification process of correction (Prong 2) within the 365-day timeline.

As part of the verification (Prong 2) process, the lead agency conducts a review of data from five IFSPs with dates subsequent to the corrective activities in each Region. If Regional Grantees do not achieve 100% compliance during the first verification process, they are required to complete additional corrective or improvement actions. After those actions are completed, the verification process is repeated by the lead agency with review of five additional IFSPs dated after the correction period. Regions must reach 100% compliance through the verification process within 365 days to report timely and accurate corrections. Corrective actions include assuring EA services were provided even though the required timeline (C1, C7, C8) was not met, unless the child was no longer in the jurisdiction of the EA system.

Step 6: Follow Up on Resolution of the Issue

The resolution of issues is necessary when performance has not improved or noncompliance is not corrected in a timely manner. States are required to have in place a range of formalized strategies and/or sanctions for enforcement with written timelines. Such sanctions may include:

- Requiring training and technical assistance;
- Directing use of funds;
- Imposing special conditions on contracts;
- Denying or recouping payments; and
- Terminating contracts.

To date, Iowa has a record of completing accurate and timely corrections of noncompliance and has not employed sanctions. State and regional policies ensure, if needed, sanctions could be used to guarantee resolution of issues identified in previous steps of the framework.

Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to early intervention service (EIS) programs.

The EA State Team, which is representative of the four signatory agencies, provides training and technical assistance for Regional Grantees and directly supports completion of any corrective action and continuous improvement activities. Training and technical assistance (framework outputs) are provided for evidence-based implementation and intervention practices, implementation of corrective action plans or improvement activities, and SPP/APR indicators. When technical assistance addressing compliance is individualized for a Regional Grantee, the EA quality assurance consultant is responsible for ensuring the needs are met. Additionally, regularly scheduled meetings with Regional Grantees provide opportunities for the EA State Team to identify technical assistance needs, provide resources, and assist with solutions to address monitoring, performance topics, and other system and regional needs.

Statewide Leadership Meetings

The EA State Team meets with Area Education Agency Directors of Special Education (Regional Grantee Administrators), Early ACCESS Grantee Leadership Team, and the Signatory Agency Leadership Team to provide technical assistance and to obtain input and recommendations regarding regional needs. A priority is placed on activities supportive of consistency in communication and implementation of IDEA across the statewide system. These meetings provide opportunities for:

- Statewide discussion and collaboration;
- Dissemination of information;
- Activities to support Early ACCESS (IDEA Part C) Regional Grantee leadership and providers;
- Reciprocal learning; and,
- Coordination with the early care, health, and education systems.

The Regional Grantee Administrators, Iowa's State Director of Special Education, and the Lead Agency's Chief of the Bureau of Early Childhood meet monthly to provide information and collaboration on the implementation of statewide activities addressing Early ACCESS and special education. During the last two years, this leadership team has also utilized weekly, virtual meetings to discuss more timely topics, in particular in regard to ACHIEVE. The Bureau Chief is the Early ACCESS liaison to the Regional Grantee Administrators (also referred to as AEA Directors of Special Education).

The EA Grantee Leadership Team (also known as the EA Leadership Group) meets four times per year. Approximately 30 members attend meetings which include Regional Grantee liaisons, signatory agency liaisons, Early ACCESS coordinator, Chief of the Bureau of Early Childhood, Iowa Educational Services for the Blind and Visually Impaired liaison, and Area Education Agency Director of Special Education. The EA Grantee Leadership Team meetings allow for training and technical assistance to occur either during the meeting or to plan/coordinate technical assistance efforts needed throughout the state. Meeting minutes, support and guidance documents, and video recordings of training and technical assistance are shared with the members.

The Signatory Agency Leadership Team meets as needed and includes an administrator and consultant/liaison from Iowa Department of Public Health, Iowa Department of Human Services, Child Health Specialty Clinics of the University of Iowa, and the Iowa Department of Education. These individuals are also appointed members of the Iowa Council for Early ACCESS. Every five years, the signatory agencies execute a Memorandum of Agreement (MOA) which describes how each state agency will support the Early ACCESS system. In 2018, a new five-year MOA was signed, and an action plan created to ensure goals are met. Included in the action plan are strategies to incorporate the self-assessment for each of the components of the Early Childhood Technical Assistance Center's System Framework for a High Quality Part C System.

The EA State Team provides professional learning and technical assistance to support Early ACCESS service coordinators, providers, data technicians, and administrators to support the implementation of Iowa's Early ACCESS system. The EA State Team includes the Part C coordinator, CSPD consultant, quality assurance/monitoring consultant, data consultant, autism consultant, and the Chief of the Bureau of Early Childhood from the Lead Agency (Iowa Department of Education) and an Early ACCESS liaison from each of the other three signatory agencies (Iowa Department of Public Health, Child Health Specialty Clinics, and the Iowa Department of Human Services). The EA State Team meets twice a month to address Early ACCESS system needs related to procedures, policies, personnel development, data systems, data, monitoring and compliance, collaboration, and Early ACCESS system improvement. Lead Agency consultants for Medicaid and IDEA Part B 619 attend as needed. The EA State Team is responsible for providing professional learning and technical assistance for the Regional Grantees as well as facilitating technical assistance from national experts and OSEP-funded centers and resources. In addition, designated staff from the EA State Team are members of Iowa's leadership team responsible for the development and implementation of Iowa's data systems, Legacy and ACHIEVE.

Iowa's Early ACCESS system continues to focus on implementing the Guiding Principles and Practices for Delivery of Family Centered Services (2004). These principles and practices serve as the foundation for designing and delivering family centered services by all Early ACCESS providers and partners. The principles guiding practices are:

- 1) The overriding purpose of providing family-centered help is family empowerment, which in turn benefits the well-being and development of the child.
- 2) Mutual trust, respect, honesty, and open communication characterize the family/provider relationship.
- 3) Families are active participants in all aspects of decision-making. They are the ultimate decision-makers in the amount, type of assistance, and the support they seek to use.
- 4) The ongoing work between families and providers is about identifying family concerns (priorities, hopes, needs, outcomes, or wishes), finding family strengths, and the services and supports that will provide necessary resources to meet those needs.
- 5) Efforts are made to build upon and use families' informal community support systems before relying solely on professional, formal services.
- 6) Providers across all disciplines collaborate with families to provide resources that best match what the family needs.
- 7) Support and resources need to be flexible, individualized and responsive to the changing needs of families.
- 8) Providers are cognizant and respectful of families' culture, beliefs, and attitudes as they plan and carry out all interventions.

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.

Iowa's Comprehensive System of Personnel Development (CSPD) has multiple system components in place at state and local levels to ensure early interventionists are effectively providing services to improve results for eligible infants and toddlers with disabilities and their families, including: 1) Service Coordination (SC) Training; 2) Iowa Distance Mentoring Model of Personnel Development (IA DMM); and 3) Early Childhood Comprehensive System of Personnel Development (EC CSPD).

Service Coordination Training

The Iowa Administrative Rules for Early ACCESS state, "...a service coordinator must be a person who has completed a competency-based training program with content related to knowledge and understanding of eligible children, these rules, the nature and scope of services in Early ACCESS in the state, and the system of payments for services, as well as service coordination responsibilities and strategies. The competency-based training program, approved by the department, shall include different training formats and differentiated training to reflect the background and knowledge of the trainees..." [281-120.34(5)].

Iowa ensures Early ACCESS service coordinators meet the established qualifications by successfully completing training. Iowa's Early ACCESS Service Coordination Competency Training consists of six components: 1) shadowing experienced service coordinators; 2) successful completion of the five online training modules; 3) completing and turning in five application activities; 4) one face-to-face workshop that is six hours and occurs after the service coordinator has had an active caseload for at least 60 days and has completed the online modules; 5) mentoring; and 6) being observed and receiving feedback on an early intervention home visit. The training process is completed in approximately eight months, though it may take up to one year, depending on when the Early ACCESS service coordinator begins employment.

The Early ACCESS Service Coordination Competency Training is annually reviewed and revised to provide knowledge and skills for service coordinators. Revisions are based upon data from Regional Grantee administrators and liaisons, Early ACCESS service coordinators, and the Early ACCESS State Team.

Iowa Distance Mentoring Model of Personnel Development (IA DMM)

The Iowa Distance Mentoring Model (IA DMM) for Early ACCESS is a professional development approach designed to facilitate coordinated and consistent implementation of high-quality early intervention (EI) services and support. Beginning in 2013, the IA DMM for Early ACCESS has been a multi-year project with the Communication and Early Childhood Research and Practice Center (CEC-RAP) at Florida State University. The Early ACCESS CSPD coordinator has collaborated with the CEC-RAP Center to provide professional development and coaching support to build capacity and sustain the implementation of evidence-based service delivery. Incorporating evidence-based practices for professional development with technology strategies and supports, DMM engages Early ACCESS providers, service coordinators, and program administrators in a systematic change process to increase the use of evidence-based practices with children and families.

Local, state, and national personnel have joined together to design, implement, and evaluate an innovative personnel development approach to improve outcomes for young children and their families. IA DMM uses evidence-based professional development practices including individualized coaching with performance-based feedback and peer mentoring to promote situated learning. The desired outcome is to align Early ACCESS services and support to current evidence-based practices for family centered services in natural environments. The focus is on improved outcomes for infants and toddlers enrolled in Iowa's Early ACCESS system and their families. Improved outcomes promote learning and development in preparation for each child's success in school and community settings. The scope includes a comprehensive family-centered model of early intervention service delivery designed to support Early ACCESS providers' use of embedded intervention strategies in everyday family routines and activities, as well as evidence-based adult learning strategies including caregiver coaching.

The Active Implementation Frameworks from the National Implementation Research Network (NIRN) are applied continually to increase the capacity of Early ACCESS service providers to implement, scale, and sustain the evidence-based practices of coaching caregivers in family guided routines based interventions (FGRBI). Iowa ensures the following components are in place to support the success of implementation: 1) implementation teams at regional and state levels; 2) usable interventions; 3) implementation drivers; 4) stages of implementation; and 5) improvement cycles.

Project evaluation is a critical element of IA DMM. The evaluation plan continues to measure change on four system levels: 1) family participants, 2) direct service providers, 3) implementing agencies (regional implementation teams), and 4) state level systems (state implementation team and Lead Agency). To date, the focus has been building the internal capacity of providers in Early ACCESS to provide coaching and FGRBI expertise to their peers. While these efforts continue, Iowa has also begun planning efforts with the Regional Grantee Administrators to organize the state and regional infrastructure for professional learning and coaching of service providers to support statewide scaling and sustainability.

Early Childhood Comprehensive System of Personnel Development (EC CSPD)

The partnership between Iowa and the National Early Childhood Personnel Center (ECPC) was established through an intensive technical assistance grant designed to build state capacity to foster professional development of the early childhood education workforce that 1) enhanced knowledge and skills of practitioners and those who support them including administrators, technical assistance providers, and faculty; 2) supported the implementation and sustainability of evidence-based practices; and 3) increased the size of the workforce skilled in providing inclusive intervention practices.

Since the intensive technical assistance from ECPC concluded, Iowa continues to:

- Utilize a framework model for a high quality, effective, and efficient Comprehensive System of Personnel Development;
- Meet with the core EC CSPD Team with cross agency members, including Iowa's IDEA Part C and Part B 619 coordinators, who routinely meets to

support and sustain EC CSPD efforts in the field;

- Explore, install, implement, and standardize a comprehensive system of personnel development including the Cross-Disciplinary Early Childhood Competencies;
- Partner with pre-service and in-service professional development providers across disciplines (community colleges, institutes of higher education, and area education agencies);
- Develop, review, and revise support materials to ensure that products are useful, practical, and reflect a high-quality system; and
- Encourage and support state early childhood stakeholders to be instrumental in providing their leadership and expertise on implementation teams designed to develop and sustain an accountable and effective personnel development infrastructure.

Broad Stakeholder Input:

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

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa's nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

A five-step process was used by the EA State Team with each stakeholder group to review and discuss data and provide input for the FFY 2021 APR:

1. The importance of stakeholder input regarding the EA system is reviewed. This includes ensuring stakeholder feedback is reported in the APR and used for improvement activities.
2. Stakeholders are provided baseline, target, and trend data for each compliance and performance indicator.
3. Members work in small and large groups to analyze data and draw conclusions.
4. A question-and-answer period occurs to clarify data questions and concepts. The EA State Team facilitates discussion and answers questions.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually
 - Early ACCESS Service Providers
 - Early ACCESS Signatory Agencies (Departments of Health, Human Services, and Iowa Child Health Specialty Clinics)
 - Early Head Start / Head Start
 - Iowa IDEA Part C Lead Agency (Department of Education)
 - Medical / Health Care Providers
 - Mental Health Providers
 - Parent Training and Information Center
 - Parents of Children with Disabilities
 - Personnel Preparation / Institutes of Higher Education
 - Private Health Insurance / Insurance Commission
 - Special Education / IDEA Part B 619
 - State Legislators
2. Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; weekly and monthly meetings.
3. Early ACCESS Grantee Leadership Team; five meetings held annually
 - Regional Grantee Administration
 - Regional Grantees
 - Signatory Agencies
 - Specialized Lead Consultants
4. Early ACCESS SSIP (C11) Team; held every 2 months
 - EA CSPD
 - Lead Agency EA Leadership
 - Regional Grantee Administration
5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

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

YES

Number of Parent Members:

7

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.

As a primary means of involvement, parent members of ICEA have been involved in every aspect of stakeholder engagement. As with all ICEA members, parents analyzed the historical data of each indicator and engaged in the discussions regarding improvement strategies to reach the targets. Discussions of data were intentionally structured to provide a means for active, two-way communication among stakeholders.

Evaluation of progress is conducted by comparing annual indicator data to the identified targets. Additional evaluation methods may be added as improvement strategies are implemented and progress data are shared and reviewed with stakeholders.

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.

Activities for increasing capacity of parent involvement included Lead Agency hosted public webinars, in-person meetings, and online surveys. The Lead Agency and EA State Team also worked with leadership from Iowa's Parent Training and Information Center (PTIC) to connect with families for input and feedback in stakeholder activities.

Soliciting Public Input:

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

Stakeholder engagement and public input for Iowa's FFY 2021 APR for Early ACCESS Integrated System of Early Intervention Services included:
 -- Routine discussions and input from Regional Grantee Administrators, Grantee Leadership, signatory agencies, and Iowa Council for Early ACCESS (ICEA); and,
 -- Public stakeholders are provided access to Iowa's FFY 2021 APR from the Lead Agency's web page, using direct links to the OSEP public reporting web page.

Evaluating progress:

Progress of the state's performance on the indicators is shared annually with ICEA; members are involved in any needed revisions to targets or baseline data. Regional Grantee Administrators (AEA Directors of Special Education) also annually review both state and regional data. Current and future efforts include public posting of state and regional data as well as routine data reviews with various stakeholder groups. Routines also include stakeholder discussion of current strategies, impact, and considerations for improvement. The data and acquired information from stakeholders assist the Lead Agency and signatory partners with adjustments of priorities and activities in the state's improvement plan.

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.

June 2023: A direct link to the final submitted FFY 2021 APR will be provided on the Lead Agency's public reporting website for early intervention and special education, which is the end result of the target setting, data analysis, development of improvement strategies, and evaluation.

Ongoing: Progress of the State's performance on the indicators is shared with ICEA and Regional Grantees through scheduled routine data reviews, which include making needed revisions to targets or baseline data.

Reporting to the Public:

How and where the State reported to the public on the FFY 2020 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 2020 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 2020 APR in 2022, is available.

The Lead Agency publicly reported performance and progress and/or slippage in meeting the APR indicator targets of each Regional Grantee (AEA) through the following channels and timelines:

AEA Regional Data Profiles posted on the Iowa Department of Education website under "District and Area Education Agency (AEA) Data Profiles" no later than 120 days from submission at: https://educateiowa.gov/pk-12/special-education/special-education-public-reporting#District_and_Area_Education_Agency_AEA_Data_Profiles

Iowa Part C State Performance Plan (SPP)/Annual Performance Report (APR) posted on Iowa Department of Education website under "State Performance Plan and Annual Performance Report" no later than 120 days from submission at: https://educateiowa.gov/pk-12/special-education/special-education-public-reporting#State_Performance_Plan_and_Annual_Performance_Report

AEA Regional Data Profiles and Iowa Part C SPP/APR provided electronically to the following groups no later than 120 days from submission:

- Iowa Council for Early ACCESS;
- Regional Grantee Administrators;
- Early ACCESS Grantee Leadership Team;
- Lead Agency Administration; and,
- Regional and State Implementation Teams.

Intro - Prior FFY Required Actions

The State's IDEA Part C determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.

The State must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2020 SPP/APR

Iowa's Lead Agency has regular calls with the OSEP State Lead for Part C to discuss continuous improvement efforts. Information from technical assistance centers shared by the OSEP State Lead were reviewed and used with the ICEA and Early ACCESS Regional Grantees. The Early ACCESS State Team has used the OSEP-funded Early Childhood Technical Assistance (ECTA) Center training materials and resources to ensure quality professional development for Early Childhood Outcomes (ECO) occurs at the agency level (e.g., Decision Tree for summary rating discussions, age-expected child development resources and Child Outcomes Summary process materials). Use of the ECO materials has provided the Lead Agency assurance all IFSP teams in the state have access to training on how to implement consistent procedures for gathering, analyzing, and reporting these data.

As a result of technical assistance, Iowa has taken several steps to intentionally address the ECO process within the state system. Internally, a state level team consisting of staff and administration from early intervention (Part C) and special education (Part B 619, 611) was convened specifically to review and address ECO processes and data use. One identified need has been consistent statewide procedures and practices in collecting child outcome data from early intervention through preschool. As part of Iowa's Comprehensive System of Personnel Development, the State is requiring the completion of ECTA Childhood Outcomes Summary Process online module for service coordinators and providers serving children, birth to three.

Throughout the 2021-22 program year, Iowa has also utilized national experts to lead statewide community of practice webinars for Early ACCESS service providers targeting practices related to Early Childhood Outcomes, authentic assessment, and family guided routines based interventions. In addition to professional learning, Iowa's new IFSP/IEP system, ACHIEVE, has intentionally integrated Early Childhood Outcomes concepts and terminology throughout processes for the evaluation, eligibility determination, and IFSP development. For example, IFSP Teams interact with an embedded ECO Decision Tree within ACHIEVE to determine children's functioning within age expectations at entry, annually, and at exit of services.

Additional professional learning modules have been developed in partnership with Regional Grantee professional learning leads to address early intervention evaluation and assessment practices; integration of Early Childhood Outcomes into present levels of development; child and family outcomes; and progress monitoring. A third statewide professional development series was compiled through collaborative efforts with IDEA Part C and 619 national and local experts to scaffold provider knowledge and application of child development learning progressions.

Intro - OSEP Response

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

The State's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 22, 2022, determination letter informed the State that it must report with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

Intro - Required Actions

The State's IDEA Part C determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.

The State must report, with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	98.80%	99.56%	98.26%	NVR	99.54%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
590	662	99.54%	100%	99.85%	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.

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Provide reasons for delay, if applicable.

Regional grantees provided reasons for delay related to family cancellations, staff schedules, agency closure for holidays, and staff illness.

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).

Services are considered timely if initiated within 30 calendar days from the date in which parental consent for services was obtained. Data are based on the actual number of days, not the average, between the date of parental consent for services and the date documented on the IFSP service log notes for delivery of first service.

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).

The data was selected from the full reporting period.

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

Data for this indicator were taken from Iowa's data systems, Legacy and ACHIEVE, for the current full reporting period and reflect all new early intervention services from both initial IFSPs and subsequent IFSPs. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children from all Regional Grantees was created ensuring a confidence level of 95% +/- 5% margin of error. The lead agency conducted the reviews using an Excel data collection form. Data are based on the actual number of days, not the average, between the parental consent for services and the date documented on the IFSP service log notes for delivery of first service. Services are considered timely if initiated within 30 calendar days from the date in which parental consent for services was obtained (state criteria).

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

Three Regional Grantees (AEAs) did not meet the 100% target in FFY 2020 and were notified of findings of noncompliance. The Regional Grantees were required to analyze root causes and correct each case of noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program, as soon as possible and no later than one year from the date of notification of noncompliance. The corrective actions were completed, followed by verification by the lead agency.

The Regional Grantees made corrections with the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency quality assurance/monitoring consultant was responsible for verifying timely corrections. In each Region with findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. All three Regional Grantees demonstrated implementation of the requirement with 100% compliance through additional data review by the lead agency.

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

During FFY 2020, three instances of noncompliance were identified within three Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified the individual cases were corrected by (a) verifying services were eventually provided unless the child was no longer within the jurisdiction of the Early ACCESS program, and (b) verifying each Regional Grantee performing below 100 percent compliance during the prior reporting period is correctly implementing requirements.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 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.

Response to actions required in FFY 2020 SPP/APR

1 - OSEP Response

1 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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 (EMAPS)).

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	96.10%

FFY	2016	2017	2018	2019	2020
Target>=	96.60%	96.60%	96.60%	96.60%	96.60%
Data	99.07%	98.39%	97.76%	98.29%	93.99%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	96.60%	96.64%	96.68%	96.72%	96.76%

Targets: Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa's nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

A five-step process was used by the EA State Team with each stakeholder group to review and discuss data and provide input for the FFY 2021 APR:

1. The importance of stakeholder input regarding the EA system is reviewed. This includes ensuring stakeholder feedback is reported in the APR and used for improvement activities.
2. Stakeholders are provided baseline, target, and trend data for each compliance and performance indicator.
3. Members work in small and large groups to analyze data and draw conclusions.
4. A question-and-answer period occurs to clarify data questions and concepts. The EA State Team facilitates discussion and answers questions.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually
 - Early ACCESS Service Providers
 - Early ACCESS Signatory Agencies (Departments of Health, Human Services, and Iowa Child Health Specialty Clinics)
 - Early Head Start / Head Start
 - Iowa IDEA Part C Lead Agency (Department of Education)
 - Medical / Health Care Providers
 - Mental Health Providers

- Parent Training and Information Center
- Parents of Children with Disabilities
- Personnel Preparation / Institutes of Higher Education
- Private Health Insurance / Insurance Commission
- Special Education / IDEA Part B 619
- State Legislators

2. Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; weekly and monthly meetings.

3. Early ACCESS Grantee Leadership Team; five meetings held annually

- Regional Grantee Administration
- Regional Grantees
- Signatory Agencies
- Specialized Lead Consultants

4. Early ACCESS SSIP (C11) Team; held every 2 months

- EA CSPD
- Lead Agency EA Leadership
- Regional Grantee Administration

5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,596
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	2,722

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,596	2,722	93.99%	96.60%	95.37%	Did not meet target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

The State’s Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa’s nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

A five-step process was used by the EA State Team with each stakeholder group to review and discuss data and provide input for the FFY 2021 APR:

1. The importance of stakeholder input regarding the EA system is reviewed. This includes ensuring stakeholder feedback is reported in the APR and used for improvement activities.
2. Stakeholders are provided baseline, target, and trend data for each compliance and performance indicator.
3. Members work in small and large groups to analyze data and draw conclusions.
4. A question-and-answer period occurs to clarify data questions and concepts. The EA State Team facilitates discussion and answers questions.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa’s IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually
 - Early ACCESS Service Providers
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 - Early Head Start / Head Start
 - Iowa IDEA Part C Lead Agency (Department of Education)
 - Medical / Health Care Providers
 - Mental Health Providers
 - Parent Training and Information Center
 - Parents of Children with Disabilities
 - Personnel Preparation / Institutes of Higher Education
 - Private Health Insurance / Insurance Commission
 - Special Education / IDEA Part B 619
 - State Legislators
2. Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; weekly and monthly meetings.
3. Early ACCESS Grantee Leadership Team; five meetings held annually
 - Regional Grantee Administration
 - Regional Grantees
 - Signatory Agencies
 - Specialized Lead Consultants
4. Early ACCESS SSIP (C11) Team; held every 2 months
 - EA CSPD
 - Lead Agency EA Leadership
 - Regional Grantee Administration
5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020

A1	2018	Target>=	45.63%	46.13%	46.63%	46.63%	46.29%
A1	46.29%	Data	45.53%	46.36%	46.29%	45.83%	44.23%
A2	2018	Target>=	70.90%	71.40%	71.90%	71.90%	59.67%
A2	59.67%	Data	65.24%	60.46%	59.67%	54.78%	53.32%
B1	2018	Target>=	51.33%	51.83%	52.33%	52.33%	51.21%
B1	51.21%	Data	50.48%	53.86%	51.21%	51.63%	50.93%
B2	2018	Target>=	51.09%	51.59%	52.09%	52.09%	42.94%
B2	42.94%	Data	48.39%	44.20%	42.94%	36.92%	38.10%
C1	2018	Target>=	57.08%	57.58%	58.08%	58.08%	57.40%
C1	57.40%	Data	58.54%	55.02%	57.40%	53.83%	54.56%
C2	2018	Target>=	72.24%	72.74%	73.24%	73.24%	63.08%
C2	63.08%	Data	68.24%	63.32%	63.08%	58.42%	55.95%

Targets

FFY	2021	2022	2023	2024	2025
Target A1>=	46.29%	48.63%	50.97%	53.31%	55.65%
Target A2>=	59.67%	59.77%	59.87%	59.97%	60.07%
Target B1>=	51.21%	54.06%	56.91%	59.76%	62.21%
Target B2>=	42.94%	43.33%	43.71%	44.09%	44.47%
Target C1>=	57.40%	59.73%	62.05%	64.38%	66.70%
Target C2>=	63.08%	63.18%	63.28%	63.38%	63.48%

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

1,871

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	55	2.94%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	616	32.92%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	233	12.45%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	358	19.13%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	609	32.55%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	591	1,262	44.23%	46.29%	46.83%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they	967	1,871	53.32%	59.67%	51.68%	Did not meet target	Slippage

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
turned 3 years of age or exited the program							

Provide reasons for A2 slippage, if applicable

The State attributes slippage to interrupted and inconsistent service delivery models from 2019-2020 to 2021-2022 as a result of the COVID-19 pandemic, which may have impacted the majority or entire early intervention experience for infants, toddlers, and their families in this reporting period. Additional analysis of the data for functioning within age expectations showed one of the nine Regional Grantees (AEA) met the target. Regional Grantees indicated a continued need for Early Childhood Outcome (ECO) Summary training for new and existing staff as a reason for slippage. Furthermore, Regional Grantees indicated a need for training and support for providers' use of family guided routines based interventions and caregiver coaching in order to improve child and family outcomes.

The lead agency continued to emphasize the ECO decision-making process: 1) align the "progress" question on the ECO summary with procedures; 2) use of the ECO Decision-Making Tree document; 3) use of assessment data when making ECO rating decisions; and 4) understand the relationship of ECO with Iowa's Early Learning Standards. The lead agency has used the OSEP-funded Early Childhood Technical Assistance Center training materials and resources to ensure quality professional development for ECO occurs statewide within every region (e.g., Decision Tree for summary rating discussions, age-expected child development resources, and Child Outcomes Summary process materials). Use of the ECO training materials has provided assurance all IFSP teams in the state have access to training on how to implement consistent procedures for gathering, analyzing, and reporting these data.

A state level team consisting of staff and administration from early intervention (Part C) and special education (Part B 619, 611) was convened specifically to review and address ECO processes and data use in order to support a statewide child outcomes measurement system which is consistent from early intervention through entering kindergarten. The new IFSP/IEP system, ACHIEVE, was launched in April of this data collection year and includes integration of the three ECO areas into the present levels of development as part of the IFSP and IEP processes. The ACHIEVE system supports the IFSP team members, including parents, in participating in the ECO process and ultimately determining accurate present levels of development and progress for children in Early ACCESS. Professional development emphasizing alignment of assessment data with the three ECO areas is ongoing. Stakeholders from the various agencies were included in the development of the IFSP/IEP system and will be engaged in the processes for continuous professional development.

The lead agency will continue to monitor progress for all regions on this indicator through regularly scheduled data verification reports, file reviews, technical assistance, and support and monitoring implementation of corrective action plans. Monitoring will include data and root cause analysis by both the lead agency and Regional Grantees.

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	12	0.64%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	748	39.98%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	382	20.42%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	476	25.44%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	253	13.52%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	858	1,618	50.93%	51.21%	53.03%	Met 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	729	1,871	38.10%	42.94%	38.96%	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	10	0.53%

Outcome C Progress Category	Number of Children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	583	31.16%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	222	11.87%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	498	26.62%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	558	29.82%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	720	1,313	54.56%	57.40%	54.84%	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	1,056	1,871	55.95%	63.08%	56.44%	Did not meet 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	2,994
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.	1,123

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 ECO Summary process, nationally referred to as Child Outcomes Summary process, is used to summarize the child's skills and behaviors in comparison to the functioning expected for the age of the child and the child's progress in each of the three ECO areas.

The procedures used by IFSP teams have included, but were not limited to: a review of data from the initial evaluation; interviews; observations; behavior checklists; structured interactions; play-based assessments; adaptive and developmental scales; and, curriculum-based, criterion-referenced and norm-referenced assessment instruments. The assessment instruments commonly used by teams included, and not limited to the: Developmental Assessment of Young Children-2; Carolina Curriculum for Infants and Toddlers with Special Needs; Hawaii Early Learning Profile; Developmental Observation Checklist System; and the Assessment, Evaluation and Programming System for Infants and Children.

Data for this indicator were taken from Iowa's data systems, Legacy and ACHIEVE, and reflect a year-round count (July to June) of children who have exited Early ACCESS, IDEA Part C services and were reported on Iowa's current reporting year's IDEA Part C Exiting Collection. Missing data were checked by comparing ECO data with the number of children exiting Early ACCESS, IDEA Part C and reported in the current reporting year's IDEA Part C Exiting Collection minus the number of children who had received IDEA Part C services for less than six months.

Provide additional information about this indicator (optional).

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

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

Data Source

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

Measurement

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Instructions

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

Provide the actual numbers used in the calculation.

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

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

Report the number of families to whom the surveys were distributed 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	2016	2017	2018	2019	2020
A	2014	Target>=	93.00%	93.00%	93.00%	93.00%	79.84%
A	79.84%	Data	81.45%	86.75%	72.05%		77.19%
B	2014	Target>=	93.00%	93.00%	93.00%	93.00%	85.86%
B	###C04BBA SEDA TA###	Data	88.19%	90.06%	86.02%		85.96%
C	2014	Target>=	93.00%	93.00%	93.00%	93.00%	83.25%

C	83.25 %	Data	85.54%	87.95%	78.88%		87.72%
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Targets

FFY	2021	2022	2023	2024	2025
Target A>=	79.84%	80.84%	81.84%	82.84%	83.84%
Target B>=	85.86%	86.86%	87.86%	88.86%	89.86%
Target C>=	83.25%	84.25%	85.25%	86.25%	87.25%

Targets: Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa's nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

A five-step process was used by the EA State Team with each stakeholder group to review and discuss data and provide input for the FFY 2021 APR:

1. The importance of stakeholder input regarding the EA system is reviewed. This includes ensuring stakeholder feedback is reported in the APR and used for improvement activities.
2. Stakeholders are provided baseline, target, and trend data for each compliance and performance indicator.
3. Members work in small and large groups to analyze data and draw conclusions.
4. A question-and-answer period occurs to clarify data questions and concepts. The EA State Team facilitates discussion and answers questions.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually
 - Early ACCESS Service Providers
 - Early ACCESS Signatory Agencies (Departments of Health, Human Services, and Iowa Child Health Specialty Clinics)
 - Early Head Start / Head Start
 - Iowa IDEA Part C Lead Agency (Department of Education)
 - Medical / Health Care Providers
 - Mental Health Providers
 - Parent Training and Information Center
 - Parents of Children with Disabilities
 - Personnel Preparation / Institutes of Higher Education
 - Private Health Insurance / Insurance Commission
 - Special Education / IDEA Part B 619
 - State Legislators
2. Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; weekly and monthly meetings.
3. Early ACCESS Grantee Leadership Team; five meetings held annually
 - Regional Grantee Administration
 - Regional Grantees
 - Signatory Agencies
 - Specialized Lead Consultants
4. Early ACCESS SSIP (C11) Team; held every 2 months
 - EA CSPD
 - Lead Agency EA Leadership
 - Regional Grantee Administration
5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	942
Number of respondent families participating in Part C	342
Survey Response Rate	36.31%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	267
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	342
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	295
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	335
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	277
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	327

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 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)	77.19%	79.84%	78.07%	Did not meet 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)	85.96%	85.86%	88.06%	Met target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	87.72%	83.25%	84.71%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

A sample was pulled in March 2021 from Iowa's data systems, Legacy and ACHIEVE, for all children who were in Early ACCESS for at least 6 months. Surveys were disseminated by either 1) using a cloud-based survey system to email and collect responses anonymously or 2) mailing paper copies with return postage envelopes to families who preferred not to complete the survey electronically.

Of the 942 families who were sent a survey (by either email or mail), 342 surveys were returned, yielding a 36.31% response rate.

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

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

For the next reporting period, the State is planning on distributing surveys using the ACHIEVE system, Iowa's new data system. The State will also be able to track the demographic response rates throughout the year. The ability to analyze these data real-time will also allow for additional prompts to specific groups with lower response rates to complete the survey.

Survey Response Rate

FFY	2020	2021
Survey Response Rate	5.78%	36.31%

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

Strategies will be implemented to increase the response rate include the integration of the family survey into the ACHIEVE system. The State anticipates the timeliness of survey distribution, as well as readily updated family contact information, will increase families' willingness to respond to the survey. Additionally, Iowa is planning to track the demographic response rates throughout the year so the ACHIEVE system will be able to identify if specific groups have lower response rates and allow for additional prompts to complete the survey.

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.

Using statistical parameters of a confidence level of 90% +/- 5% margin of error to ensure representativeness, Iowa would need a survey return rate of 248 responses. Given 342 families responded, Iowa can say with confidence the survey results were representative of the population or from a broad cross section of families who received Early ACCESS, IDEA Part C services. In addition to the previously described strategies, Iowa intends to improve nonresponse bias by: keeping the survey as short and concise as possible; reviewing response rates regarding timing and distribution methods; and integrating system prompts or reminders to complete the survey.

In addition, Iowa is gathering stakeholder input on the use of data or a family outcomes infographic, as highlighted by other states during ECTA's family outcomes community of practice webinars, to inform families and validate their input and participation.

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.

Upon analyses of the subgroups, the State found the sample was not representative in terms of the percent of respondents in each race/ethnicity category. Specifically, the percent of hispanic or latino survey respondents were 6% less than the population and the percent of whites respondents were 10% higher than the population. The survey respondents were representative for gender, with less than a 3% difference of male to female respondents compared to the population. The survey respondents were also not representative for age of infants or toddler in the percent of respondents for each age group (e.g. birth to one, one to two, and two to three) did not meet the +/- 5% discrepancy compared to the population. This is not surprising given families with infants and toddler who have been in the program for less than six months did not receive a survey, which could be anticipated to influence the number of potential respondents for the birth to one age group.

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 State set statistical parameters of a confidence level of 90% +/- 5% margin of error to evaluate representativeness of the number of survey respondents to the total population. The overall response rate did meet this criteria for representativeness. To evaluate the representativeness of demographic subgroups, the State used a criteria of +/- 5% discrepancy for responses compared to the total population. The State chose this method to analyze demographics because 1) if employing a confidence level of 90% +/- 5% margin of error, only one race ethnicity category would have met this threshold for survey responses, and 2) three of seven race/ethnicity categories have a small population size (between 5-60 children).

Upon analyses of the subgroups, the State found the sample was not representative in the percent of Hispanic or Latino respondents overall population were 6% less than the population and whites had 10% higher response rates. All other subgroups had less than a 5% discrepancy.

Provide additional information about this indicator (optional).

4 - Prior FFY Required Actions

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

Response to actions required in FFY 2020 SPP/APR

4 - OSEP Response

OSEP's response to the State's initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover regarding the submission.

4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the *EDFacts* Metadata and Process System (*EMAPS*)) 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
2017	1.08%

FFY	2016	2017	2018	2019	2020
Target >=	1.40%	1.40%	1.45%	1.45%	1.08%
Data	1.13%	1.08%	1.18%	1.17%	0.73%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	1.08%	1.13%	1.18%	1.23%	1.28%

Targets: Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa's nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

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3. Members work in small and large groups to analyze data and draw conclusions.
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5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

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- Regional Grantees
- Signatory Agencies
- Specialized Lead Consultants

4. Early ACCESS SSIP (C11) Team; held every 2 months

- EA CSPD
- Lead Agency EA Leadership
- Regional Grantee Administration

5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	316
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, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	35,621

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
316	35,621	0.73%	1.08%	0.89%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

(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 (EMAPS)) 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
2017	2.46%

FFY	2016	2017	2018	2019	2020
Target >=	2.60%	2.70%	2.70%	2.70%	2.46%
Data	2.50%	2.46%	2.59%	2.80%	2.15%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	2.46%	2.62%	2.77%	2.93%	3.08%

Targets: Description of Stakeholder Input

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4. Early ACCESS SSIP (C11) Team; held every 2 months

- EA CSPD
- Lead Agency EA Leadership
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5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

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The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	2,722
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, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 3	110,646

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,722	110,646	2.15%	2.46%	2.46%	Met target	No Slippage

Provide additional information about this indicator (optional).

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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	87.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.49%	99.56%	99.13%	99.18%	99.52%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,295	2,928	99.52%	100%	99.11%	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.

607

Provide reasons for delay, if applicable.

Regional grantees provided reasons for delay related to family cancellations, staff schedules, agency closure for holidays, and staff illness.

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).

The data was selected from the full reporting period.

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

Data for this indicator were taken from Iowa's data systems, Legacy and ACHIEVE, for the current full reporting period and reflect all infants and toddlers evaluated and assessed for whom an initial IFSP was required to be conducted. No sampling was used. The monitoring cycle occurs annually with all Regional Grantees. The lead agency conducted the reviews using an Excel data collection form. Data are based on the actual number of days, not the average, between the date of referral and date of the initial IFSP meeting.

Iowa has reported separately the number of documented delays attributable to exceptional family circumstances in the appropriate field above.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

The State uses data from Iowa's data systems, Legacy and ACHIEVE, designed to track Early ACCESS IDEA Part C referrals, evaluations, and the extent to which 45 day timelines are being met for conducting an initial evaluation and assessment and having an initial IFSP meeting. Five Regional Grantees (AEAs) did not meet the 100% target in FFY 2020 and were notified of findings of noncompliance. The Regional Grantees were required to analyze root causes and correct each case of noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS system, as soon as possible and no later than one year from the date of notification of noncompliance. The corrective actions were completed, followed by verification by the lead agency.

The Regional Grantees made corrections with the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency quality assurance/monitoring consultant was responsible for verifying timely correction. In each region with findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. All five Regional Grantees demonstrated implementation of the requirement with 100% compliance through additional data review by the lead agency.

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

During FFY 2020, 14 instances of noncompliance were identified within five Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified the individual cases were corrected by (a) verifying evaluations were eventually conducted and the initial IFSP meetings were held even though the timeline was not met unless the child was no longer within the jurisdiction of the Early ACCESS program, and (b) verifying each Regional Grantee performing below 100 percent compliance during the prior reporting period is correctly implementing requirements.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	32	32	0

FFY 2018

Findings of Noncompliance Verified as Corrected

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

During FFY18, six Regional Grantees (AEAs) did not meet the 100% target in FFY18 and were notified of findings of noncompliance. All six Regions made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency quality assurance/monitoring consultant was responsible for verifying timely correction. In each of the six Regions with findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. All six Regional Grantees demonstrated implementation of the requirement with 100% compliance through additional data review by the lead agency.

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

During FFY18, 32 instances of noncompliance were identified within six Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified through record reviews and documentation the individual cases were corrected by (a) verifying evaluations were eventually conducted and initial IFSP meetings were held even though the timeline was not met unless the child was no longer within the jurisdiction of the EIS program, and (b) verifying each Regional Grantee performing below 100 percent compliance during the prior reporting period is correctly implementing requirements.

7 - Prior FFY 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. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 32 uncorrected findings of

noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2020 and each EIS program or provider with remaining noncompliance identified in FFY 2018 (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.

Response to actions required in FFY 2020 SPP/APR

Response to actions required in FFY 2019 SPP/APR

The State verified the 32 uncorrected findings of noncompliance identified in FFY 2018 were corrected by notifying each Regional Grantee of the noncompliance and verifying through record reviews and documentation for each individual case of noncompliance, initial evaluations and IFSP meetings were eventually held unless the child was no longer within the jurisdiction of the Early ACCESS program.

Additionally, the State verified each Regional Grantee is correctly implementing the regulatory requirements by conducting a follow-up review of data from the Legacy and ACHIEVE systems for each of the five Regional Grantees which did not meet 100% compliance for timely evaluations and initial IFSP meetings. Each Regional Grantee demonstrated implementation of the requirement with 100% compliance as verified by the Lead Agency.

7 - OSEP Response

7 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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 timely 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 2021 SPP/APR, the data for FFY 2020), 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	87.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	98.01%	96.78%	98.40%	98.29%	98.61%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
672	748	98.61%	100%	98.66%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of children exiting Part C who have an IFSP with transition steps and services" field to calculate the numerator for this indicator.

66

Provide reasons for delay, if applicable.

Delays were due to Regional Grantee staff illness, leave of absence, and difficulty with schedules.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Data were obtained from files of children exiting Early ACCESS, IDEA Part C, at the age of three. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, IDEA Part C, at age three was created using a confidence level of 95% with a +/- 10% margin of error for each Regional Grantee. State staff conducted IFSP file reviews and then desk audits were completed by the lead agency quality assurance/monitoring consultant.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
11	11	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

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

Three Regional Grantees (AEAs) did not meet the 100% target in FFY20 and were notified of findings of noncompliance. All three regions made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency quality assurance/monitoring consultant was responsible for verifying timely correction. In each of the four regions with findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. All three Regional Grantees demonstrated implementation of the requirement with 100% compliance through additional data review by the lead agency.

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

During FFY20, 11 instances of noncompliance were identified within three Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified through record reviews and documentation the individual cases were corrected by (a) verifying transition steps and services occurred even though the timeline was not met unless the child was no longer within the jurisdiction of the Early ACCESS program, and (b) verifying each Regional Grantee performing below 100 percent compliance during the prior reporting period is correctly implementing requirements.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

8A - OSEP Response

8A - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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 timely 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 2021 SPP/APR, the data for FFY 2020), 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	96.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
454	454	100.00%	100%	100.00%	Met target	No Slippage

Number of parents who opted out

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

0

Provide reasons for delay, if applicable.

Not applicable.

Describe the method used to collect these data.

Data were obtained from files of children exiting Early ACCESS, IDEA Part C, and potentially eligible for Special Education, IDEA Part B. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, IDEA Part C, was created using a confidence level of 95% with a +/- 10% margin of error for each Regional Grantee. State staff conducted IFSP file reviews and then desk audits were completed by the lead agency monitoring consultant. Regional Grantees receive notification of noncompliant data and any correction of noncompliant data is recorded.

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

NO

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All nine Regional Grantees in the state were selected for monitoring as part of the Early ACCESS, IDEA Part C, statewide file review process. Data were obtained from files of children exiting Early ACCESS, IDEA Part C, and potentially eligible for Special Education, IDEA Part B. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, IDEA Part C, was created using a confidence level of 95% with a +/- 10% margin of error for each Regional Grantee. State staff conducted IFSP file reviews and then desk audits were completed by the lead agency monitoring consultant.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8B - Prior FFY Required Actions

None

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.
- B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for timely 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 2021 SPP/APR, the data for FFY 2020), 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	87.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	98.19%	98.14%	98.58%	98.43%	99.20%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
413	454	99.20%	100%	99.12%	Did not meet target	No Slippage

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

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

0

Number of documented delays attributable to exceptional family circumstances

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

37

Provide reasons for delay, if applicable.

Regional grantees provided reasons for delay related to staff schedules, agency closure for holidays, and staff illness.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Data were obtained from files of children exiting Early ACCESS, IDEA Part C, and potentially eligible for Special Education, IDEA Part B. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, IDEA Part C, was created using a confidence level of 95% with a +/- 10% margin of error for each Regional Grantee. State staff conducted IFSP file reviews and then desk audits were completed by the lead agency quality assurance/monitoring consultant consultant. Regional Grantees receive notification of noncompliant data and correction for noncompliance is recorded.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	4	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

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

Two Regional Grantees (AEAs) did not meet the 100% target in FFY20 and were notified of findings of noncompliance. Both Regions made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency quality assurance/monitoring consultant was responsible for verifying timely correction. In each of the Regions with findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. All Regional Grantees demonstrated implementation of the requirement with 100% compliance through additional data review by the lead agency.

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

During FFY20, 4 instances of noncompliance were identified within two Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified through record reviews and documentation the individual cases were corrected by (a) verifying a transition conference did occur, even though the timeline was not met, unless the child was no longer within the jurisdiction of the Early ACCESS program, and (b) verifying each Regional Grantee performing below 100 percent compliance during the prior reporting period is correctly implementing requirements.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 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.

Response to actions required in FFY 2020 SPP/APR

8C - OSEP Response

8C - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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 (EMAPS)).

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa's nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

A five-step process was used by the EA State Team with each stakeholder group to review and discuss data and provide input for the FFY 2021 APR:

1. The importance of stakeholder input regarding the EA system is reviewed. This includes ensuring stakeholder feedback is reported in the APR and used for improvement activities.
2. Stakeholders are provided baseline, target, and trend data for each compliance and performance indicator.
3. Members work in small and large groups to analyze data and draw conclusions.
4. A question-and-answer period occurs to clarify data questions and concepts. The EA State Team facilitates discussion and answers questions.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually
 - Early ACCESS Service Providers
 - Early ACCESS Signatory Agencies (Departments of Health, Human Services, and Iowa Child Health Specialty Clinics)
 - Early Head Start / Head Start
 - Iowa IDEA Part C Lead Agency (Department of Education)
 - Medical / Health Care Providers

- Mental Health Providers
- Parent Training and Information Center
- Parents of Children with Disabilities
- Personnel Preparation / Institutes of Higher Education
- Private Health Insurance / Insurance Commission
- Special Education / IDEA Part B 619
- State Legislators

2. Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; weekly and monthly meetings.

3. Early ACCESS Grantee Leadership Team; five meetings held annually

- Regional Grantee Administration
- Regional Grantees
- Signatory Agencies
- Specialized Lead Consultants

4. Early ACCESS SSIP (C11) Team; held every 2 months

- EA CSPD
- Lead Agency EA Leadership
- Regional Grantee Administration

5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

Historical Data

Baseline Year	Baseline Data

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State reported in its 2021-22 Section 618 IDEA Dispute Resolution data submission that it has adopted Part C procedures. However, in its SPP/APR submission, the State reported this indicator is applicable. OSEP reminds the State that this indicator is not applicable to a State that has adopted Part C due process procedures under Section 639 of the IDEA.

9 - Required Actions

OSEP notes that this indicator is not applicable.

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 (EMAPS)).

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa's nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

A five-step process was used by the EA State Team with each stakeholder group to review and discuss data and provide input for the FFY 2021 APR:

1. The importance of stakeholder input regarding the EA system is reviewed. This includes ensuring stakeholder feedback is reported in the APR and used for improvement activities.
2. Stakeholders are provided baseline, target, and trend data for each compliance and performance indicator.
3. Members work in small and large groups to analyze data and draw conclusions.
4. A question-and-answer period occurs to clarify data questions and concepts. The EA State Team facilitates discussion and answers questions.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually
 - Early ACCESS Service Providers
 - Early ACCESS Signatory Agencies (Departments of Health, Human Services, and Iowa Child Health Specialty Clinics)
 - Early Head Start / Head Start
 - Iowa IDEA Part C Lead Agency (Department of Education)
 - Medical / Health Care Providers
 - Mental Health Providers
 - Parent Training and Information Center
 - Parents of Children with Disabilities
 - Personnel Preparation / Institutes of Higher Education
 - Private Health Insurance / Insurance Commission
 - Special Education / IDEA Part B 619
 - State Legislators

2. Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; weekly and monthly meetings.

3. Early ACCESS Grantee Leadership Team; five meetings held annually

- Regional Grantee Administration
- Regional Grantees
- Signatory Agencies
- Specialized Lead Consultants

4. Early ACCESS SSIP (C11) Team; held every 2 months

- EA CSPD
- Lead Agency EA Leadership
- Regional Grantee Administration

5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2021. 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 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 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 2021 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 2021 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., February 1, 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) 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)?

Iowa's State-identified Measurable Result (SiMR) is an increase in the percentage of families reporting Early ACCESS has helped them help their child develop and learn. The SiMR aligns with the IDEA Part C SPP/APR Indicator 4C - Family Outcomes.

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.iafamilysupportnetwork.org/wp-content/uploads/2022/01/SSIP-Theory-of-Action-Early-ACCESS-FFY-2020.pdf>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2014	83.25%

Targets

FFY	2021	2022	2023	2024	2025
Target>=	83.25%	84.25%	85.25%	86.25%	87.25%

FFY 2021 SPP/APR Data

		FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
277	327	87.72%	83.25%	84.71%	Met target	No Slippage

Provide the data source for the FFY 2021 data.

The SiMR data source is the Family Outcomes Survey-Revised: Part C (2010), which is also used for Iowa's IDEA Part C SPP/APR Indicator 4C - Family Outcomes.

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

The Family Outcomes Survey-Revised: Part C (2010) is sent to all families whose children were in Early ACCESS for at least 6 months as of March 2021. Surveys were disseminated by either: 1) using a cloud-based survey system to email and collect responses anonymously or 2) mailing paper copies with return postage envelopes to families who preferred not to complete the survey electronically.

Of the 942 families who were sent a survey (by either email or mail), 342 surveys were returned, yielding a 36.31% response rate. The State set statistical parameters of a confidence level of 90% +/- 5% margin of error to evaluate representativeness of the number of survey respondents to the total population. The overall response rate did meet this criteria for representativeness.

To evaluate the representativeness of demographic subgroups, the State used a criteria of +/- 5% discrepancy for responses compared to the total

population. The State chose this method to analyze demographics because 1) if employing a confidence level of 90% +/- 5% margin of error, only one race/ethnicity category would have met this threshold for survey responses, and 2) three of seven race/ethnicity categories have a small population size (between 5-60 children).

Upon analyses of the subgroups, the state found that the sample was not representative in that the percent of Hispanic or Latino respondents overall population were 6% less than the population and whites had 10% higher response rates. All other subgroups had less than a 5% discrepancy.

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

YES

Describe any additional data collected by the State to assess progress toward the SiMR.

Provider:

The Coaching Fidelity Checklist and Internal Coach (IC) Activity Logs were used to measure coaches' progress on core knowledge and application competencies when coaching Early ACCESS providers in the use of Family Guided Routines Based Intervention (FGRBI). The average coaching fidelity score was 91% for FFY21, which was three percentage points higher than the previous year. In June 2022, there were three Trainee Coaches, five Provider Coaches, and eleven Master Coaches statewide, representing an increase of one Provider coach and four Master Coaches from the previous year.

The Early ACCESS providers' use of FGRBI with fidelity is measured by the implementation of the FGRBI key indicators. In the FFY 2021 nine month coaching cycle, Early ACCESS providers demonstrated improvement and a performance value of 63% of the FGRBI key indicators observed in their first video to 61% in their third video. The first video score was to be expected; however, the drop in key indicator percentage in the third video was not. Several agencies did not have three new providers to join a cohort during the data period, so the lower third score could be the result of the lower sample size (n=48 for video 1 and n=24 for video 3). Also, the providers who did not submit a third video may have been providers who were already at fidelity, so their videos would have inflated the video 1 percentage and the absence of their third video would decrease the video 3 percentage.

Family/Child:

The Early Intervention Parenting Self-Efficacy Scale (EIPSES) was used to quantify parent responses of their ability to facilitate positive child outcomes within the context of early intervention programs and via interactions with early intervention providers (scale from 1 to 7). The data reported in FFY 2021 continued to indicate high caregiver competence (Mean = 5.77, Median = 5.75) and confidence (Mean = 5.58, Median = 5.50) related to child outcomes while also reflecting a higher use of FGRBI key indicators by Early ACCESS providers. Data from FFY21 had a response rate of 46% (n = 35), which is lower than the previous year (FFY20 = 71%).

System:

Early ACCESS regional and state system progress was measured through written reports submitted by Early ACCESS Regional Grantees. Regional implementation team reports were updated four times during FFY 2021, discussed at Early ACCESS Grantee Leadership team meetings, and reviewed by the Early ACCESS State Team. In previous years, the Regions had identified organizational barriers which included involving occupational and physical therapists, finding resources to support Internal Coaches, and allocating time to engage in effective teaming practices. In FFY 2021, the Early ACCESS Regional Grantees reported barriers related to sustainability efforts and staff learning Iowa's IDEA data system, ACHIEVE.

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

Please provide a link to the State's current evaluation plan.

Link to Iowa's SSIP Early ACCESS Evaluation Plan: <https://www.iafamilysupportnetwork.org/wp-content/uploads/2022/01/SSIP-Early-ACCESS-Evaluation-Plan-FFY-2020.pdf>

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

NO

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

Improvement Strategy 1: Instructional Practices

The instructional practices improvement strategies included the implementation of professional development to support Early ACCESS providers' use of FGRBI. These strategies included online modules to build knowledge and peer coaching by a trained peer coach to strengthen skills.

Improvement Strategy 2: Implementation Practices

The implementation practices improvement strategies focused on the use of active implementation frameworks to scale-up the use of evidence-based practices. Additionally, the State's continued focus in FFY 2021 was on strengthening partnerships and using effective communication to establish and build upon sustainability efforts.

Improvement Strategy 3: High Quality system

The high quality system improvement strategies focused on using data to inform continuous improvement practices. The Early ACCESS State Team and Data Work Team continued to meet to utilize and apply data-based decision making for sustainability of Iowa's high quality Early ACCESS system.

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.

Improvement Strategy 1: Instructional Practices
In-Service Training (Professional Development)

In previous years, Early ACCESS providers had been trained in person. In FFY 2021, professional learning for Early ACCESS providers continued using online FGRBI modules, supplemented with four 2-hour zoom meetings for all cohort participants. This professional development model was continued from FFY 2019 to support maintenance of learning within each cohort. A shift to online modules has supported sustainability through greater flexibility in delivery of FGRBI content, in particular when virtual options were preferred as a health mitigation strategy. Forty providers completed the pre- and post-module assessment. The average pre-module score was 52% and the average post-module score was 85%, illustrating an increase in knowledge of FGRBI upon module completion.

In FFY 2021, coaches used a Coaching Manual and a Coaching Fidelity Checklist to ensure coaching sessions were implemented with fidelity. The average fidelity score was 91%, which was three percentage points higher than the previous year. The goal of the coaching sessions was to support Early ACCESS providers in using FGRBI with families. The FFY 2021 data represented 48 first videos, 30 second videos, and 24 third videos. The average fidelity scores from first to third video were 63% to 61%. The first video score is to be expected; however, the drop in key indicator percentage in the third video is not. Several agencies did not have three new providers to join a cohort during the data period, so the lower third score could be the result of the lower sample size (n=48 for video 1 and n=24 for video 3). Also, the providers who did not submit a third video may have been providers who were already at fidelity, so their videos would have inflated the video 1 percentage and the absence of their third video would decrease the video 3 percentage. This is the first year in ten years we have seen a drop from video 1 to video 3 key indicator percentages, so we will monitor closely in the coming year to identify systematic reasons for the drop.

Ongoing professional learning and coaching in order to maintain skills with fidelity are essential for scale-up and sustainability. Routine updates and maintenance of online modules and use of highly trained peer coaches will be utilized as Early ACCESS system supports. These will continue to directly impact the improvement of Iowa's Part C SiMR (an increase in the percentage of families reporting that Early ACCESS has helped them help their child develop and learn).

Improvement Strategy 2: Implementation Practices
Strengthening Partnerships (Governance, Quality Standards)

The Early ACCESS State Team has continued to foster partnerships with Regional Grantees to support infrastructure for service delivery. Reports from the regional implementation teams indicated reflective routines in discussion and reporting have been helpful, both at agency and state system levels. In addition, the established communication efforts have been effective in addressing successes and barriers, allowing more focused dialogue on system level sustainability topics. Moreover, intentional discussions with the Regional Grantee administrators have increased leadership engagement and the development of action plans for sustainability.

The Early ACCESS State Team has continued to strengthen relationships with Iowa's institutes of higher education (IHE) in order to sustain knowledge of evidence-based practices among future practitioners. In FFY 2021 activities, there was a shift to focus on facilitating collaboration among higher education faculty and in-service professional development providers at the Area Education Agencies. In the first of a series of four webinars, pre-service and in-service personnel came together via Zoom to spend time in facilitated conversations to overcome barriers related to recruitment and retention. Conversations included brainstorming solutions to challenges related to early intervention field experience and activities to increase awareness of early intervention as a career option among high school students and higher education students across disciplines.

Progress towards outcomes has been made through:

- Partnerships among institutes of higher education from multiple disciplines and in-service professional development providers from the AEAs;
- Implementation team meetings (regional and state);
- Fidelity and sustainability planning;
- Stakeholder meetings to address implementation; and,
- Communication with agency administrators to improve readiness and leadership support.

Improvement Strategy 3: High Quality system
Early ACCESS Data Work Team (Data System; Accountability & Continuous Improvement)

The Early ACCESS Data Work Team, composed of Lead Agency staff, meets weekly to address Early ACCESS data quality, collection, analysis, and dissemination of data to make informed decisions. The purpose has been to effectively use data to positively impact outcomes for families and children served in Iowa. As a result of these weekly meetings, the Early ACCESS State Team have used data to determine focus areas for professional development and technical assistance.

Progress towards outcomes has been made through:

- Public Relations and Marketing Task Team;
- Continued development of in-service training system;
- IHE relationship-building to impact fidelity and sustainability of FGRBI and coaching, and;
- Development and implementation of Iowa's data system, ACHIEVE.

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

YES

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

Improvement Strategy 3: High Quality System

Iowa Part C Early ACCESS staff began using the new system, ACHIEVE, in April 2022. A primary goal for the system was to develop, deliver, and ensure individualized plans and services for learners, birth to 21. The system was designed to also improve data reporting capabilities. Iowa's Early ACCESS State Team was involved throughout system and content development. In addition, Early ACCESS Regional Grantee leadership, service coordinators, and providers had continual opportunities to test and provide input during development. Early ACCESS state staff continue to address system "bugs" and support users with monthly troubleshooting webinars, tip sheets, and a comprehensive user guide.

The ACHIEVE system will help sustainability of FGRBI through use of embedded and consistent language and evidence-based practices reflected in FGRBI key indicators. In addition, there are system prompts to support providers in building the capacity of the families to support their children's development and learning, which addresses Iowa's SiMR.

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

1) Instructional Practices

The Early ACCESS system will continue to focus on training internal coaches and providing support delivered by Florida State University (FSU) external coaches. The Early ACCESS State Team anticipates internal coaches will continue to strengthen their facilitation skills to build agency capacity of FGRBI with Early ACCESS providers across disciplines. Likewise, the number of internal coaches who progress from Trainee to Provider and Provider to Master coaching tiers will continue to increase.

2) Implementation Practices

The Early ACCESS system will continue supporting partnerships between institutes of higher education across disciplines, regional implementation teams, and the use of implementation science. The Early ACCESS State Team will continue to have intentional discussions with administrators about implementation fidelity, sustainability, and scale-up efforts. The statewide goal is to maintain the implementation of a collaboratively developed system plan supported by Iowa's Regional Grantee administrators and leadership, the Iowa Council for Early ACCESS, and all of the Early ACCESS Signatory Agencies.

3) High Quality System

The Early ACCESS system will continue involving stakeholders in data review, decision-making, and the development and implementation of state activities represented by the Early Childhood Technical Assistance Center (ECTA) System Framework.

Parallel to the new IDEA system, ACHIEVE, the State will continue to support staff in using the system and building on their implementation of FGRBI with families through webinars and tip sheets.

Each of the above improvement strategies support a high quality early intervention system according to the ECTA System Framework.

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

- 1) Family Guided Routines Based Intervention (FGRBI); and,
- 2) Distance Mentoring Model (DMM) of professional development (coaching)

Provide a summary of each evidence-based practice.

Early ACCESS providers support and enhance the caregiver's consistency and effectiveness to implement learning opportunities within natural environments using familiar family routines. In order to accomplish this, Iowa's Early ACCESS state strategies focus on improving the competence and confidence of caregivers through embedded interventions in everyday routines and activities. Families are implementing interventions and see progress in their children's development and learning, which results in an increase in the teaching opportunity cycle and as well as reinforces their confidence and competence. Children have more practice as their parents and/or caregivers provide more opportunities throughout their routines and daily activities. This leads to an increase in the percentage of families reporting that Early ACCESS has helped them help their child develop and learn, which is the IDEA Part C SPP/APR Indicator 4C Family Outcomes and Iowa's SiMR.

To build toward full implementation of the FGRBI, the Iowa Department of Education partnered with Florida State University's Communication and Early Childhood Research and Practice (CEC-RAP) Center to use the Distance Mentoring Model (DMM) of professional development to scale up and sustain their providers' use of FGRBI and Caregiver Coaching, a manualized intervention approach (Woods, 2017; <http://fgrbi.com/>). The professional development (PD) sequence used in DMM is aligned with best practices in professional development research for early childhood providers. DMM incorporates explanations of effective instruction paired with active engagement and practice in context over an extended time frame (Bransford et al., 2000; Dunst, Trivette, & Deal, 2011; Snyder, Hemmeter, & McLaughlin, 2011; Trivette et al., 2009) using a combination of distance learning technologies.

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.

Professional development (PD) for Early ACCESS providers on FGRBI was delivered by Iowa's nine Early ACCESS Regional Grantees, while Florida State University (FSU) focused on professional development for Internal Coaches.

1) Early ACCESS providers continued professional learning using the online modules about FGRBI, how to coach families and caregivers, and efforts to maintain implementation fidelity of the FGRBI key indicators. Cohort scores showed growth; pre-score average = 52%, and post-score average = 85%.

2) In addition, monthly coaching sessions and four 2-hour webinars were conducted by Internal Coaches to reinforce Early ACCESS provider learning. The new Early ACCESS providers were also part of monthly provider webinars and internal coaches attended monthly internal coach webinars. The FSU team supported these internal coaching activities.

3) The use of Community of Practice (CoP) Professional Development webinars also continued. The CoP webinar topics included: assessment within an FGRBI framework, writing high quality child and family outcomes, monitoring progress, and family participation in the IFSP process.

4) All Early ACCESS providers and service coordinators also completed professional learning for ACHIEVE, which included integrated information to support the implementation of FGRBI. The State provided recorded webinars and supplemental materials for trained "professional learning leads" from each AEA to use to facilitate the professional learning with their staff.

Each of these strategies supports Early ACCESS providers in using FGRBI with families with fidelity and an intended outcome to increase a family's confidence and competence (outcome) to help their child develop and learn (SiMR).

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

Internal Coaching Session Fidelity

As Internal Coaches become more independent in their coaching of peer Early ACCESS providers, it has been critical to ensure they are conducting coaching sessions according to the feedback session protocol. The fidelity measure has been used to ensure that all Internal Coaches are utilizing similar core coaching components which include joint planning, direct teaching of content, reflection, problem solving, active participation of team members, and action planning.

FGRBI Key Indicator Checklist

To ensure Early ACCESS providers are implementing FGRBI with families with fidelity, recorded home visits are reviewed by the Early ACCESS

provider, the Internal Coaches, and an external coach at FSU using the 12-item FGRBI Key Indicator Checklist. The items on the checklist are weighted to calculate and generate data representing implementation fidelity used in the coaching cycle.

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.

Not applicable.

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

The Early ACCESS system is committed to the implementation of the sustainability strategies for FGRBI. In the spring of 2022, the professional learning for the new ACHIEVE system integrated the FGRBI framework into the child and family evaluation, assessments, and development of the IFSP. This provided an opportunity to expand the implementation of FGRBI into all aspects of the IFSP process. Professional learning efforts will continue in this direction to support evidence-based practices and appropriate documentation in ACHIEVE. Additionally, a statewide sustainability plan for FGRBI is under development with the input and agreement of all Regional Grantee Administrators, which will commence in October 2023. With additional professional learning, continued sustainability efforts, and integration of FGRBI into the ACHIEVE system; the State anticipates improvement of both family and child outcomes.

Does the State intend to continue implementing the SSIP without modifications? (yes/no)

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

The evaluation data has consistently shown improved results which supports the State's decision to continue the current activities, strategies, and improvement efforts. The results of each component of the evaluation have provided evidence of increased capacity of Early ACCESS to implement, scale, and sustain evidence-based practices of coaching caregivers in FGRBI. The State remains committed to implementing a statewide system of early intervention in which families with infants and toddlers served in Early ACCESS receive individualized services in natural environments and demonstrate improved family and child outcomes.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee Administrators, Early ACCESS (EA) Grantee Leadership Team, Early ACCESS SSIP Team, and Early ACCESS ad hoc task teams provide stakeholder input on SPP/APR indicators, SSIP development and implementation, and IDEA reporting requirements. The Early ACCESS facilitator ensures that the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Regional Grantee administrators include the special education directors from each of Iowa's nine area education agencies (AEA). The EA Grantee Leadership Team represents approximately 30 members from each of the following: Lead Agency, signatory agencies; Regional Grantees; and Iowa Educational Services for the Blind and Visually Impaired.

A five-step process was used by the EA State Team with each stakeholder group to review and discuss data and provide input for the FFY 2021 APR:

1. The importance of stakeholder input regarding the EA system is reviewed. This includes ensuring stakeholder feedback is reported in the APR and used for improvement activities.
2. Stakeholders are provided baseline, target, and trend data for each compliance and performance indicator.
3. Members work in small and large groups to analyze data and draw conclusions.
4. A question-and-answer period occurs to clarify data questions and concepts. The EA State Team facilitates discussion and answers questions.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes, and improvement activities are shared and agreed upon (indicating consensus).

Discussion notes, comments, and analysis conclusions are documented and provided to EA and Lead Agency staff to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The EA State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. These groups and other stakeholders have been involved in activities specific to the development of the FFY 2021 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually
 - Early ACCESS Service Providers
 - Early ACCESS Signatory Agencies (Departments of Health, Human Services, and Iowa Child Health Specialty Clinics)
 - Early Head Start / Head Start
 - Iowa IDEA Part C Lead Agency (Department of Education)
 - Medical / Health Care Providers
 - Mental Health Providers
 - Parent Training and Information Center
 - Parents of Children with Disabilities
 - Personnel Preparation / Institutes of Higher Education
 - Private Health Insurance / Insurance Commission
 - Special Education / IDEA Part B 619
 - State Legislators
2. Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; weekly and monthly meetings.
3. Early ACCESS Grantee Leadership Team; five meetings held annually
 - Regional Grantee Administration
 - Regional Grantees
 - Signatory Agencies
 - Specialized Lead Consultants

- 4. Early ACCESS SSIP (C11) Team; held every 2 months
 - EA CSPD
 - Lead Agency EA Leadership
 - Regional Grantee Administration

- 5. Early ACCESS Ad Hoc Task Teams; as needed

In addition to the review of APR indicator data, stakeholders and EA regional and state-level implementation teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified.

More recently, members of the EA State Team have convened ad hoc meetings with Regional Grantee Administrators to specifically review data and reporting details. These will contribute to a revised consolidated report for general supervision activities to be submitted and reviewed by the Lead Agency and EA State Team annually, at minimum.

The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

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

State efforts for stakeholder engagement focused on activities with established groups including the Early ACCESS Grantee Leadership Team, Iowa Council for Early ACCESS (ICEA), Early ACCESS State Team, and Regional Grantee Administrators (AEA Directors of Special Education). Activities included data review, reflection and revision of implementation of evidence-based practices, and analysis of infrastructure improvements. In addition, regional implementation teams met routinely to review implementation practices and data respective to their agencies.

Several of the stakeholder groups include families with children with disabilities or developmental delays. Regions have continued to expand membership of regional implementation teams to include families. Stakeholder input was also shared with the FSU team through facilitated discussions with various groups.

Some of the specific stakeholder activities during FFY 2021 included:

- Developing and implementing a new data system, ACHIEVE, which included Early ACCESS providers, Signatory Agency representatives, administrators, and families;
- Discussing the implementation plan for 2022-2023 with Regional Grantee Administrators (AEA Directors of Special Education); and,
- Designing and implementing professional learning for use of ACHIEVE, which included Early ACCESS providers, Signatory Agency representatives, and administrators.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

The Regional Grantee Administrators have been concerned about the time and resource allocation needed to continue the established professional development model past 2023, when the current contracted supports provided by FSU cease. Conversations have continued and a sustainability plan is under development with the input and agreement of all Regional Grantee Administrators, which will commence in October 2023.

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.

Not applicable.

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

Not applicable.

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

Not applicable.

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

None

11 - OSEP Response

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.

Name:

Kimberly Villotti

Title:

Bureau Chief

Email:

kimberly.villotti@iowa.gov

Phone:

5153395519

Submitted on:

04/24/23 9:33:39 AM

Determination Enclosures

RDA Matrix

Iowa

2023 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination¹

Percentage (%)	Determination
75.00%	Needs Assistance

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	8	4	50.00%
Compliance	14	14	100.00%

2023 Part C Results Matrix

I. Data Quality

(a) Data Completeness: The percent of children included in your State's 2021 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e., outcome data)	1,871
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	2,994
Percentage of Children Exiting who are Included in Outcome Data (%)	62.49
Data Completeness Score²	1

(b) Data Anomalies: Anomalies in your State's FFY 2021 Outcomes Data

Data Anomalies Score³	2
-----------------------------------------	---

II. Child Performance

(a) Data Comparison: Comparing your State's 2021 Outcomes Data to other States' 2021 Outcomes Data

Data Comparison Score⁴	0
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(b) Performance Change Over Time: Comparing your State's FFY 2021 data to your State's FFY 2020 data

Performance Change Score⁵	1
---------------------------------------------	---

Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2021	46.83%	51.68%	53.03%	38.96%	54.84%	56.44%
FFY 2020	44.23%	53.32%	50.93%	38.10%	54.56%	55.95%

¹ For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part C."

² Please see Appendix A for a detailed description of this calculation.

³ Please see Appendix B for a detailed description of this calculation.

⁴ Please see Appendix C for a detailed description of this calculation.

⁵ Please see Appendix D for a detailed description of this calculation.

2023 Part C Compliance Matrix

Part C Compliance Indicator ⁶	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 1: Timely service provision	99.85%	YES	2
Indicator 7: 45-day timeline	99.11%	YES	2
Indicator 8A: Timely transition plan	98.66%	YES	2
Indicator 8B: Transition notification	100.00%	N/A	2
Indicator 8C: Timely transition conference	99.12%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

⁶ The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf

Appendix A

I. (a) Data Completeness:

The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State's Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State's FFY 2021 IDEA Section 618 Exit Data.

Data Completeness Score	Percent of Part C Children included in Outcomes Data (C3) and 618 Data
0	Lower than 34%
1	34% through 64%
2	65% and above

Appendix B

I. (b) Data Quality:

Anomalies in Your State's FFY 2021 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e⁷. In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State's data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

Outcome A	Positive Social Relationships
Outcome B	Knowledge and Skills
Outcome C	Actions to Meet Needs

Category a	Percent of infants and toddlers who did not improve functioning
Category b	Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers
Category c	Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it
Category d	Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers
Category e	Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers

⁷ Numbers shown as rounded for display purposes.

⁸ Values based on data for States with summary statement denominator greater than 199 exiters.

Expected Range of Responses for Each Outcome and Category, FFY 2021

Outcome\Category	Mean	StDev	-1SD	+1SD
Outcome A\Category a	1.43	1.62	-0.19	3.05
Outcome B\Category a	1.26	2.27	-1.01	3.53
Outcome C\Category a	1.14	1.59	-0.45	2.73

Outcome\Category	Mean	StDev	-2SD	+2SD
Outcome A\ Category b	23.62	8.94	5.75	41.49
Outcome A\ Category c	20.32	12.69	-5.05	45.69
Outcome A\ Category d	27.33	9.46	8.42	46.24
Outcome A\ Category e	27.3	15.11	-2.92	57.52
Outcome B\ Category b	25.16	9.76	5.65	44.68
Outcome B\ Category c	28.73	12.11	4.5	52.95
Outcome B\ Category d	31.76	8.06	15.64	47.87
Outcome B\ Category e	13.09	8.56	-4.02	30.21
Outcome C\ Category b	20.27	8.49	3.29	37.26
Outcome C\ Category c	23.01	13.08	-3.16	49.17
Outcome C\ Category d	34.09	8.09	17.9	50.28
Outcome C\ Category e	21.49	15.06	-8.62	51.6

Data Anomalies Score	Total Points Received in All Progress Areas
0	0 through 9 points
1	10 through 12 points
2	13 through 15 points

Anomalies in Your State's Outcomes Data FFY 2021

Number of Infants and Toddlers with IFSP's Assessed in your State	1,871
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	55	616	233	358	609
Performance (%)	2.94%	32.92%	12.45%	19.13%	32.55%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	12	748	382	476	253
Performance (%)	0.64%	39.98%	20.42%	25.44%	13.52%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	10	583	222	498	558
Performance (%)	0.53%	31.16%	11.87%	26.62%	29.82%
Scores	1	1	1	1	1

	Total Score
Outcome A	5
Outcome B	5
Outcome C	5
Outcomes A-C	15

Data Anomalies Score	2
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Appendix C

II. (a) Data Comparison:

Comparing Your State's 2021 Outcomes Data to Other States' 2021 Outcome Data

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement⁹. Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

Summary Statement 1: Of those infants and toddlers who entered or exited 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.

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.

Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	43.42%	36.60%	54.62%	29.02%	55.14%	36.15%
90	82.74%	69.30%	79.34%	55.52%	85.72%	76.15%

Data Comparison Score	Total Points Received Across SS1 and SS2
0	0 through 4 points
1	5 through 8 points
2	9 through 12 points

Your State's Summary Statement Performance FFY 2021

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	46.83%	51.68%	53.03%	38.96%	54.84%	56.44%
Points	1	1	0	1	0	1

Total Points Across SS1 and SS2(*)	4
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Your State's Data Comparison Score	0
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⁹ Values based on data for States with summary statement denominator greater than 199 exiters.

Appendix D

II. (b) Performance Change Over Time:

Comparing your State's FFY 2021 data to your State's FFY 2020 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of $p \leq .05$. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of '0', '1', or '2' for each State is based on the total points awarded. Where OSEP has approved a State's reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of 'N/A' for this element.

Test of Proportional Difference Calculation Overview

The summary statement percentages from the previous year's reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of $p \leq .05$. The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

e.g., $C3A \text{ FFY}2021\% - C3A \text{ FFY}2020\% = \text{Difference in proportions}$

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on¹⁰

$\text{Sqrt}[(\text{FFY}2021\% * (1-\text{FFY}2021\%)) / \text{FFY}2021N] + ((\text{FFY}2022\% * (1-\text{FFY}2022\%)) / \text{FFY}2022N)] = \text{Standard Error of Difference in Proportions}$

Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.

$\text{Difference in proportions} / \text{standard error of the difference in proportions} = z \text{ score}$

Step 4: The statistical significance of the z score is located within a table and the p value is determined.

Step 5: The difference in proportions is coded as statistically significant if the p value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

Indicator 3 Overall Performance Change Score	Cut Points for Change Over Time in Summary Statements Total Score
0	Lowest score through 3
1	4 through 7
2	8 through highest

¹⁰Numbers shown as rounded for display purposes.

Summary Statement/ Child Outcome	FFY 2020 N	FFY 2020 Summary Statement (%)	FFY 2021 N	FFY 2021 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	1,438	44.23%	1,262	46.83%	2.60	0.0192	1.3550	0.1754	NO	1
SS1/Outcome B: Knowledge and Skills	1,887	50.93%	1,618	53.03%	2.10	0.0169	1.2415	0.2144	NO	1
SS1/Outcome C: Actions to meet needs	1,534	54.56%	1,313	54.84%	0.27	0.0187	0.1459	0.884	NO	1
SS2/Outcome A: Positive Social Relationships	2,168	53.32%	1,871	51.68%	-1.64	0.0158	-1.0392	0.2987	NO	1
SS2/Outcome B: Knowledge and Skills	2,168	38.10%	1,871	38.96%	0.86	0.0154	0.5622	0.574	NO	1
SS2/Outcome C: Actions to meet needs	2,168	55.95%	1,871	56.44%	0.49	0.0157	0.3131	0.7542	NO	1

Total Points Across SS1 and SS2	6
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Your State's Performance Change Score	1
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Data Rubric
Iowa

FFY 2021 APR¹¹

Part C Timely and Accurate Data -- SPP/APR Data		
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	N/A	0
10	1	1
11	1	1
	Subtotal	12
APR Score Calculation	Timely Submission Points - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	17

¹¹ In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

	618 Data ¹²			
Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/Settings Due Date: 4/6/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
			Subtotal	9
618 Score Calculation			Grand Total (Subtotal X 2) =	18.00

Indicator Calculation	
A. APR Grand Total	17
B. 618 Grand Total	18.00
C. APR Grand Total (A) + 618 Grand Total (B) =	35.00
Total N/A Points in APR Data Table Subtracted from Denominator	1
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	35.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.

¹² In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 2 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part C 618 Data

1) Timely – A State will receive one point if it submits counts/ responses for an entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	1 st Wednesday in April
Part C Exiting	Part C Exiting Collection in EMAPS	1 st Wednesday in November
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	1 st Wednesday in November

2) Complete Data – A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).

Dispute Resolution



IA-C-DR-2021-22.pdf

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

<https://sites.ed.gov/idea/how-the-department-made-determinations/>