# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on FFY 2020

Iowa



PART C DUE February 1, 2022

U.S. DEPARTMENT OF EDUCATION WASHINGTON, DC 20202

#### Introduction

#### Instructions

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

# Intro - Indicator Data

#### **Executive Summary**

- 1) Indicator(s); Met target and no slippage: 8B
- 2) Indicator(s); Did not meet target and no slippage: 1, 3B1, 3B2, 3C1, 4A, 4B, 4C, 7, 8A, 8C
- 3) Indicator(s); Did not meet target and slippage: 2, 3A1, 3A2, 3C2, 5, 6

#### 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

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lowa'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 the University of Iowa Child Health Specialty Clinics. The Department of Education is the Lead Agency; each Signatory Agency has personnel on the Early ACCESS State Team responsible for the implementation and monitoring of the Early ACCESS system.

In 1974, lowa established a law requiring a free appropriate public education (FAPE) to meet the needs of children under twenty-one years of age 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, special education support services as well as general supervision and compliance monitoring.

# 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, is used to identify performance and compliance issues. The following information describes each of the data system's contributions to the statewide monitoring activities.

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 for noncompliance and to facilitate communication and notifications between the Lead Agency and Regional Grantees. The application records required actions, dates, and documentation.

lowa's System to Achieve Results (ISTAR) was used as the state-level monitoring and improvement data system from 2006–2019 and is used to collect family outcomes data (Indicator 4). The Lead Agency uses the Family Outcomes Survey-Revised: Part C (2010) and is responsible for distributing and collecting e-surveys sent to all families whose children were in EA for at least 6 months. Surveys were disseminated by: 1) passcodes and a link to an online survey emailed to families who provided emails, and 2) passcodes sent via text to families using phones. ISTAR is programmed to collect Regional survey data, identify performance, and generate data reports in comparison to targets for Indicator 4A, 4B, and 4C.

The Web-Based IFSP is Iowa's IDEA data system supporting the statewide web-based IFSP and providing data for Section 618 data tables (Part C Indicators 2, 5, 6, 9, 10) and Part C Indicators 1, 3, and 7.

The EA State Team annually conducts monitoring activities of Regional Grantees from data collected on compliance indicators through the web-based IFSP. The Lead Agency maintains statewide procedures for monitoring compliance and assuring the collection of valid and reliable data; it also facilitates the review and analysis of data to ensure accuracy and consistency. The findings determine the necessary actions and responses for noncompliance or performance issues requiring corrective action or improvement activities. Additionally, the information gathered from monitoring activities is utilized to address procedural or data entry issues to ensure accurate and reliable data.

Steps 2 and 3, Determine the Extent/Level of the Issue and Determine the Cause of the Issue, look deeper into the data to determine the level, extent, and cause of issues.

The EA system uses ISTAR to distribute, collect, and analyze the data from the Family Outcomes Survey-Revised: Part C (2010). ISTAR is programmed to calculate results on Indicator 4 Family Outcomes and compare the performance to the state targets. Regional Grantees are provided reports of the percentage and number of parents that agreed with each outcome and individual survey responses to identify performance issues.

The Lead Agency's Procedures Governance Council (PGC) for data systems is responsible for addressing and improving data entry procedures, revising data collection and database fields, and identifying training for Regional Grantees.

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

The EA quality assurance consultant verifies results prior to releasing notification to the Regional Grantees. When a 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. CAP instructions require Regional Grantees to conduct a deeper root cause analysis. Additionally, the EA State Team has regularly scheduled meetings to discuss topics with Regional Administration and the EA Regional Leadership Team.

In Step 5, Ensure and Verify Resolution of the Issues, new data from Iowa's web-based IFSP data system are used 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 verification of correction (Prong 2) within the 365-day timeline.

Resolution of issues includes verification of correction for all individual child findings of noncompliance. A follow-up review of data from five IFSPs with dates subsequent to the corrective activities is conducted in each Region, which has findings of noncompliance. If Regional Grantees do not achieve 100% compliance on the first verification attempt, they are required to complete another round of corrective or improvement actions. After those actions are complete, five more IFSPs with dates after the corrections have been made are reviewed. Regions must reach 100% compliance through the verification process within 365 days in order to report timely and accurate corrections. Corrective actions include assuring EA services and activities were provided even though the required timeline (Indicators 1, 7, 8C) was not met, unless the child was no longer within the jurisdiction of the EA system.

The verification of correction and technical assistance completed in Step 5 are framework outputs.

Step 6, Follow Up on Resolution of the Issue, is necessary when performance has not improved or noncompliance is not corrected in a timely manner. In these instances, 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 the use of training and technical assistance;
- Directing the use of funds;
- Imposing special conditions on contracts;
- Denying or recouping payments; and
- Terminating contracts.

lowa has a record of completing accurate and timely corrections of noncompliance and has not had to employ sanctions. However, 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, evidenced based technical assistance and support to early intervention service (EIS) programs.

Training and technical assistance (framework outputs) are provided for SPP/APR indicators, implementation of corrective action plans or improvement activities, and evidence-based implementation and intervention practices. The Early ACCESS State Team, which is representative of all four signatory agencies, provides training and technical assistance for Regional Grantees and directly supports completion of any corrective action and continuous improvement activities. When technical assistance addressing compliance is individualized to meet the needs of a Regional Grantee, the Early ACCESS quality assurance consultant is responsible for ensuring the needs are met. It is common that monitoring and performance topics and issues are addressed in statewide meetings involving all Early ACCESS State Team members providing technical assistance.

Statewide Leadership Group Meetings. The Early ACCESS 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 consultants to provide technical assistance and to obtain input and recommendations regarding regional needs.

These meetings provide opportunities for:

- Statewide discussions;
- Dissemination of information;
- Collection of information;
- Activities to support needs of Early ACCESS (Part C) leadership;
- Activities to support needs of Regional Grantees and Early ACCESS service providers; and
- Reciprocal learning

The Lead Agency early childhood administrative consultant is the Early ACCESS liaison to the Regional Grantee Administrators (also referred to as AEA Directors of Special Education). The Regional Grantee Administrators, lowa's State Director of Special Education, and the Early Childhood Administrative Consultant meet monthly to provide information and collaboration on the implementation of statewide activities addressing Early ACCESS and special education.

Meetings with Early ACCESS Grantee Leadership Team members (also known as the Early ACCESS Leadership Group) occur five times per year. Approximately 30 members attend meetings which includes Regional Grantee liaisons, signatory agency liaisons, Early ACCESS coordinators, a consultant from Iowa Educational Services for the Blind and Visually Impaired, consultants from Iowa's Deafblind Service Project and Iowa School for the Deaf, and an Area Education Agency Director of Special Education. The Early ACCESS Grantee Leadership Team meetings allow for training and technical assistance to occur either during the meeting days or to plan/coordinate technical assistance efforts needed throughout the state. Meeting minutes, supporting documents, and video recordings of procedural and technical assistance are created and accessible online for all members as needed.

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 participant 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 that 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.

State Team Meetings. The Early ACCESS State Team includes two Part C consultants, two data consultants, one autism consultant, and an administrative consultant from the Lead Agency (Iowa Department of Education) plus 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 State Team meets twice a month to address Early ACCESS system needs related to procedures, policies, personnel development, web-based IFSP system, data, monitoring and compliance, collaboration and Early ACCESS system improvement. Lead Agency consultants for Medicaid and IDEA Part B 619 attend as needed. Communication occurs through multiple formats: Early ACCESS Grantee Leadership Team meetings, written policies and guiding documents, electronic meetings, online question and answer system for procedures, Google documents, emails and phone calls. This nine-member team is responsible for providing technical assistance for the Regional Grantees or arranging for technical assistance from outside sources.

Designated staff from the State Team meet as needed with the web-based IFSP support specialist. The focus of the meetings is to improve the system for accurate and reliable data and improve ease of usability. The State Team provides technical assistance statewide for the web-based IFSP and continues to address needed improvements.

Family Centered Services. Iowa's Early ACCESS system continues to implement Guiding Principles and Practices for Delivery of Family Centered Services which were developed by the Lead Agency and the Iowa SCRIPT team (Supporting Changes and Reform in Inter-professional Pre-service Training). These principles and practices serve as the foundation for designing and delivering family centered services by all Early ACCESS providers and partners.

The eight principles that guide practice 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.

Strategies used by the Early ACCESS State Team to implement these principles and provide support to Regional Grantee service providers include:

- Service coordinator training using the multi-component Service Coordination Competency Training.
- Training provided by national content experts on: 1) Coaching families and colleagues in early intervention; 2) Using Family Guided Routines Based Interventions (FGRBI); 3) Using technology to provide and support professional development in early intervention through the lowa Distance Mentoring Model of Personnel Development (IA DMM); and, 4) Using technology to provide professional development and Early ACCESS services.
- Providing current research and literature resources to the Regional Grantees and signatory agencies.
- Working with the Family Educator Partnership (FEP), an Iowa Department of Education program to support successful outcomes in the areas of living, learning, and working for individuals with disabilities, ages birth-21.

#### **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.

lowa's Comprehensive System of Personnel Development (CSPD) has several components in place to ensure that early interventionists are effectively providing services that improve results for eligible infants and toddlers with disabilities and their families: Service Coordination (SC) Training; lowa Distance Mentoring Model of Personnel Development (IA DMM); and the Early Childhood Comprehensive System of Personnel Development (EC CSPD).

Service Coordination Training. 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)]. Early ACCESS Service Coordination Competency Training is annually reviewed and revised to provide the basic knowledge and skills for service coordinators. Revisions are based upon suggestions from Regional Grantee liaisons, Early ACCESS coordinators, and service coordinators.

Early ACCESS service coordinator training consists of six components that must be met to become a competent service coordinator in Iowa: (1) shadowing experienced service coordinators; (2) successful completion of the five online training modules; (3) completing and turning in five activities from the online modules; (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 entire training process takes approximately eight months, though it may take up to one year depending on when the Early ACCESS service coordinator begins employment.

Iowa Distance Mentoring Model of Personnel Development (IA DMM)

The Distance Mentoring Model (DMM) is a professional development approach designed to facilitate coordinated and consistent high-quality early intervention (EI) services and support. 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 recommended practices with children and families. DMM is a project within The Communication and Early Childhood Research and Practice Center (CEC-RAP). CEC-RAP is a collaborative center within the College of Communication and Information, School of Communication Science and Disorders at Florida State University.

The lowa Distance Mentoring Model for Early ACCESS (IA DMM) is a collaborative project between the lowa Department of Education and Florida State University. 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 aim is to align Early ACCESS services and supports in lowa more closely to current recommended practices for family centered services in natural environments. The focus is on improved outcomes for infants and toddlers enrolled in lowa's Early ACCESS system and their families to promote learning and development in preparation for each child's success in school and community settings. The scope of this work 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.

In order to increase the capacity of Early ACCESS to implement, scale, and sustain the evidence-based practices of coaching caregivers in Family Guided Routines Based Interventions (FGRBI); Active Implementation Frameworks from implementation science are applied. These include: (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 piece of IA DMM. The project began with the following evaluation questions:

1. Has the IA DMM project designed and thoroughly implemented a state-wide coaching and mentoring model for Early ACCESS early intervention system in Iowa?

- 2. Has the IA DMM project increased the knowledge and skills of service providers in Early ACCESS to use evidence-based, family-centered, routines-based interventions?
- 3. Has the IA DMM project increased the knowledge, skills, and dispositions of service providers in Early ACCESS to work comfortably and capably with young children who are culturally, linguistically, and ability diverse and their families?
- 4. What impact, if any, has the IA Distance Mentoring Model (IA DMM) project had on Institutes of Higher Education (IHEs) who are preparing future practitioners for Early ACCESS?

The evaluation plan measures 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). The IA DMM for Early ACCESS began in 2013 and the work is contracted through September 30, 2023. To date, the focus has been building the internal capacity of providers in lowa to provide coaching and FGRBI expertise to their peers. While these efforts continue, lowa has also begun planning efforts with AEA leadership to reshape the state infrastructure for professional learning and coaching of service providers to establish system support for statewide scaling and sustainability.

Early Childhood Comprehensive System of Personnel Development (EC CSPD)

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

With ECPC's support, lowa has been able to:

- Develop a framework model for a high quality, effective, and efficient Comprehensive System of Personnel Development;
- Establish a 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;
- Intentional efforts to partner with pre-service and in-service professional development providers across disciplines (Community colleges, Institutes of higher education, & 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, and the Early ACCESS Grantee Leadership Team provide stakeholder input on SPP/APR indicator targets, SSIP development and implementation, and 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 Early ACCESS Grantee Leadership Team is made up of approximately 30 members that attend meetings which include liaisons from: Regional Grantees; signatory agencies; Iowa Educational Services for the Blind and Visually Impaired; Iowa's Deafblind Service Project; and Iowa School for the Deaf.

A five-step process is used with each stakeholder group to review data and provide input for the SPP/APR:

- 1. Members are provided baseline, target, and trend data for each compliance and performance/results indicator.
- 2. The importance of stakeholder input regarding the Early ACCESS system is reviewed. This includes ensuring that stakeholder feedback is reported in the APR and used for improvement activities.
- 3. A question-and-answer period occurs to clarify any data questions and concepts.
- 4. Members work in small groups and large groups to analyze the data and draw conclusions. Signatory agency consultants are available to facilitate and answer questions.
- 5. Conclusions and comments regarding setting new targets, progress or slippage of meeting targets, root causes, and improvement activities are shared

Analysis conclusions, discussion notes, and comments are documented and provided to Early ACCESS and Lead Agency staff to include in the APR for each indicator where appropriate. Questions which require additional data to provide answers are collected. The Early ACCESS State Team is responsible for following through with obtaining additional data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

Groups, Meetings, and Members of Key Stakeholders Input for Iowa Part C Early ACCESS:

State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually

- Parents of Children with Disabilities
- Service Providers
- Signatory Agencies
- Representative of Insurance Commission
- Mental Health Providers
- Representative of Head Start
- Local/Regional/State Representatives of Mental Health, Private Medical and Physicians
- Higher Education
- State legislators

Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; monthly meetings

Early ACCESS Grantee Leadership; five meetings held annually

- Regional Grantees
- Signatory Agencies
- Regional Grantee Administrator

#### - Specialized Lead Consultants

In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

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

YES

### **Number of Parent Members:**

28

#### **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 parent member involvement, parent members of ICEA have been involved in every aspect of stakeholder engagement. As with all council members, parents analyzed the historical data of each indicator, provided their input on which set of targets would be ambitious yet achievable in six years, and engaged in the discussions regarding improvement strategies to reach the proposed targets. Discussions of data were intentionally structured to provide a means for active, two-way communication among stakeholders.

Input and feedback were also specifically gathered from parents who participated in discussions of improvement strategies during four public webinars hosted by the Lead Agency and Early ACCESS State Team. Discussions of data were intentionally structured to provide a means for active, two-way communication among stakeholders. Each of these webinars reviewed the proposed targets of indicators related to the topic, as voted on by the previously mentioned stakeholder groups, and featured a panel discussion by members of state agencies, AEA staff, community organizations, and parents. Webinar participants, which also included parents, were prompted and encouraged to ask questions and actively participate in the conversation during the webinars, as well as provide more detailed individual feedback and input on improvement strategies using an online survey.

A separate webinar opportunity was co-hosted by the Lead Agency and ASK Resource Center, lowa's statewide parent training, information, and advocacy center, or PTIC. The Lead Agency and ASK Resource Center shared information regarding the webinar throughout their respective networks. This webinar was specifically planned for parents and families of infants and toddlers currently or previously served in Early ACCESS; it provided the opportunity for smaller group discussions of three potential priority areas, as well as an online survey to share additional individual information and suggestions. The three priority areas represented multiple indicators and were: 1) identifying children eligible for Early ACCESS, 2) promoting positive family and child outcomes, and 3) supporting smooth transitions. The newly developed state performance plan addresses prioritized improvement activities based on their input.

Evaluation of progress will be 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 the Lead Agency hosted public webinars; opportunities to provide feedback during inperson meetings and via online surveys; and facilitated small group discussions with ASK Resource Center. Registration for each of the webinars was shared broadly across the state through various early education, health, and human service agencies and networks to increase the diversity of parents participating by geographic region. Demographic data was collected through webinar registration and in survey responses; it will be analyzed to identify and target possible parent and stakeholder groups for additional canvassing strategies in the future.

#### **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 pubic input for Iowa's SPP 2020-2025/FFY2020 APR for Early ACCESS Integrated System of Early Intervention Services (referred to as Early ACCESS):

- · April May 2021: Lead Agency and internal work team begin planning stakeholder engagement process and activities.
- May August 2021: Lead Agency data consultants and internal work team prepare historical data and additional data for indicators, develop individual indicator target setting worksheets, develop surveys for stakeholder input.
- August November 2021: Lead Agency consultants meet with Regional Grantee Administrators (AEA special education directors) to review potential targets and discuss improvement strategies.
- September November 2021: Lead Agency consultants meet with Iowa Council for Early ACCESS (ICEA) including signatory agencies leadership to review potential targets and discuss improvement strategies.
- November December 2021: Lead Agency consultants review potential targets and discuss improvement strategies with Early ACCESS Grantee Leadership Team members, Early Childhood State Coordination Team members (in particular Indicator C3/Early Childhood Outcomes and Indicator C8/Transitions). DE Early Childhood Team members, DE Special Education Team members.
- November December 2021: Proposed final indicator targets are shared with webinar participants during public webinars hosted by the Lead Agency and PTIC
- February 2022: Targets are submitted as part of the FFY 2020 SPP/APR.

#### **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 will also include stakeholder discussion of current strategies, their impact, and considerations for improvement. The data and acquired information from stakeholders will assist the Lead Agency, with their signatory partners, with any 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.

lowa's SPP 2020-2025/FFY2020 APR for Early ACCESS Integrated System of Early Intervention Services (referred to as Early ACCESS):

- January 2022: Final targets, as approved by the Director of the Lead Agency and administration team, are shared on the Lead Agency's website.
- February 2022: Targets are submitted as part of the FFY 2020 SPP/APR.
- June 2022: The final submitted FFY 2020 SPP/APR is posted 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 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 2019 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2019 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.

The 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:

- -lowa Council for Early ACCESS;
- -Regional Grantee Administrators;
- -Early ACCESS Grantee Leadership Team; and,
- -Regional and state-level implementation teams.

# Intro - Prior FFY Required Actions

The State's IDEA Part C determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

# Response to actions required in FFY 2019 SPP/APR

lowa has regular calls with the OSEP State Lead for Part C to continue moving forward with continuous improvement efforts. Information from technical assistance centers sent by the OSEP State Lead are explored and used with the Early ACCESS Regional Grantees (Area Education Agencies). 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 training materials has provided assurance that all IFSP teams in the state have access to training on how to implement consistent procedures for gathering, analyzing, and reporting these data. In addition, the lead agency has contacted representatives from ECTA and DaSy Center to assist the state interagency coordinating council in data analysis of ECO as well as setting new targets for the 2020-2025 SPP/APR.

As a result of technical assistance, lowa 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) has formed to address ECO processes and data use. One identified need is for consistent statewide procedures and practices in collecting child outcome data from early intervention through preschool. As part of lowa's Comprehensive System of Personnel Development, the state is requiring the completion of ECTA/DaSy Childhood Outcomes Summary Process online module for service coordinators and providers serving children, birth to three. Throughout the 2020-21 program year, lowa has also utilized national experts to lead statewide community of practice webinars targeting Early ACCESS service providers on practices related to Early Childhood Outcomes. In addition to professional learning, lowa's new IFSP/IEP data system, or ACHIEVE, will use improved integration of the Early Childhood Outcomes throughout the evaluation, eligibility determination, and IFSP process. For example, providers will be able to 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.

#### 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 on its form that it prepared and elected to submit its own annual report (in lieu of the SPP/APR submitted by the State lead agency). OSEP accepts the SICC 2022 annual report.

The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 22, 2021 determination letter informed the State that it must report with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

# Intro - Required Actions

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

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

# **Indicator 1: Timely Provision of Services**

#### **Instructions and Measurement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%

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

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

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

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

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

# 1 - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data
2005	100.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.56%	98.80%	99.56%	98.26%	NVR

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

#### FFY 2020 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
573	651	NVR	100%	99.54%	Did not meet target	N/A

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.

75

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 consent for services was obtained. Data are based on the actual number of days, not the average, between parental consent and the date specified 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 lowa's web-based IFSP data system 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 parental consent and the date specified 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 consent for services was obtained (state criteria).

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

The state does not believe that COVID-19 impacted data completion, validity, or reliability for this indicator.

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

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

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

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

Two Regional Grantees (AEAs) did not meet the 100% target in FFY 2019 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 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. Both Regional Grantees demonstrated implementation of the requirement with 100% compliance through additional, subsequent data review by the lead agency.

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

During FFY19, three instances of noncompliance were identified within two Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified that individual cases were corrected by (a) verifying services were provided unless the child was no longer within the jurisdiction of the Early ACCESS program, and (b) completing a subsequent data review verifying compliance of the regulatory requirement within each Regional Grantee performing below 100 percent compliance during the reporting period.

# Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

# 1 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining 12 uncorrected findings of noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

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

The State verified the 12 uncorrected findings of noncompliance identified in FFY 2018 were corrected by notifying each Regional Grantee of the noncompliance and verifying through emails and/or record reviews that for each individual case of noncompliance, services were provided unless the child was no longer within the jurisdiction of the Early ACCESS system.

Additionally, the State verified that each Regional Grantee is correctly implementing the regulatory requirements by conducting a follow-up review of data from the web-based IFSP data system for each of the six Regional Grantees that did not meet 100% compliance for providing timely services. Each Regional Grantee demonstrated implementation of the requirement with 100% compliance for timely services.

# 1 - OSEP Response

# 1 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

#### Indicator 2: Services in Natural Environments

# **Instructions and Measurement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

#### **Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts 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	2015	2016	2017	2018	2019
Target>=	96.60%	96.60%	96.60%	96.60%	96.60%
Data	98.69%	99.07%	98.39%	97.76%	98.29%

# **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target >=	96.60%	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, and the Early ACCESS Grantee Leadership Team provide stakeholder input on SPP/APR indicator targets, SSIP development and implementation, and 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 Early ACCESS Grantee Leadership Team is made up of approximately 30 members that attend meetings which include liaisons from: Regional Grantees; signatory agencies; Iowa Educational Services for the Blind and Visually Impaired; Iowa's Deafblind Service Project; and Iowa School for the Deaf.

A five-step process is used with each stakeholder group to review data and provide input for the SPP/APR:

- 1. Members are provided baseline, target, and trend data for each compliance and performance/results indicator.
- 2. The importance of stakeholder input regarding the Early ACCESS system is reviewed. This includes ensuring that stakeholder feedback is reported in the APR and used for improvement activities.
- 3. A question-and-answer period occurs to clarify any data questions and concepts.
- 4. Members work in small groups and large groups to analyze the data and draw conclusions. Signatory agency consultants are available to facilitate and answer questions.
- 5. Conclusions and comments regarding setting new targets, progress or slippage of meeting targets, root causes, and improvement activities are shared.

Analysis conclusions, discussion notes, and comments are documented and provided to Early ACCESS and Lead Agency staff to include in the APR for each indicator where appropriate. Questions which require additional data to provide answers are collected. The Early ACCESS State Team is responsible for following through with obtaining additional data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

Groups, Meetings, and Members of Key Stakeholders Input for Iowa Part C Early ACCESS: State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually

- Parents of Children with Disabilities
- Service Providers
- Signatory Agencies

- Representative of Insurance Commission
- Mental Health Providers
- Representative of Head Start
- Local/Regional/State Representatives of Mental Health, Private Medical and Physicians
- Higher Education
- State legislators

Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; monthly meetings

Early ACCESS Grantee Leadership; five meetings held annually

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

In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

#### **Prepopulated Data**

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,282
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Total number of infants and toddlers with IFSPs	2,428

#### FFY 2020 SPP/APR Data

Number of infants and toddlers with IFSPs who primaril receive early intervention services in the hom or community-base settings	y Total number of	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2,282	2,428	98.29%	96.60%	93.99%	Did not meet target	Slippage

# Provide reasons for slippage, if applicable.

The State performed additional analyses regarding the change in specific Infant Toddler (IT) service codes related to services in natural environments. From this analysis, the State determined there was an increase in the use of one code for "other settings" to document services conducted using a virtual platform due to COVID-19 policies and procedures, although the child/family remained in a natural environment. Therefore, the State concludes that the slippage in services provided in natural environments was due to data entry error, which may have impacted the data validity and reliability. Additional guidance regarding the use of IT codes is necessary. As a result, the State is providing technical assistance on the assignment of IT service codes, while also anticipating clarity through the implementation of lowa's new IFSP/IEP data system, ACHIEVE.

Data completion for this indicator was not impacted by COVID-19.

Provide additional information about this indicator (optional).

# 2 - Prior FFY Required Actions

None

# 2 - OSEP Response

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

# 2 - Required Actions

# **Indicator 3: Early Childhood Outcomes**

# **Instructions and Measurement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

#### **Data Source**

State selected data source.

#### Measurement

Outcomes:

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

#### Progress categories for A, B and C:

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

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

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

# **Measurement for Summary Statement 1:**

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

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

#### **Measurement for Summary Statement 2:**

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

#### Instructions

Sampling of **infants and toddlers with IFSPs** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See <u>General Instructions</u> 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)

NC

#### **Targets: Description of Stakeholder Input**

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The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

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In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

# **Historical Data**

Outcome	Baseline	FFY	2015	2016	2017	2018	2019
A1	2018	Target>=	45.13%	45.63%	46.13%	46.63%	46.63%
A1	46.29%	Data	49.74%	45.53%	46.36%	46.29%	45.83%
A2	2018	Target>=	70.40%	70.90%	71.40%	71.90%	71.90%
A2	59.67%	Data	69.81%	65.24%	60.46%	59.67%	54.78%
B1	2018	Target>=	50.83%	51.33%	51.83%	52.33%	52.33%
B1	51.21%	Data	53.03%	50.48%	53.86%	51.21%	51.63%

B2	2018	Target>=	50.59%	51.09%	51.59%	52.09%	52.09%
B2	42.94%	Data	54.19%	48.39%	44.20%	42.94%	36.92%
C1	2018	Target>=	56.58%	57.08%	57.58%	58.08%	58.08%
C1	57.40%	Data	59.42%	58.54%	55.02%	57.40%	53.83%
C2	2018	Target>=	71.74%	72.24%	72.74%	73.24%	73.24%
C2	63.08%	Data	71.78%	68.24%	63.32%	63.08%	58.42%

# **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target A1>=	46.29%	46.29%	48.63%	50.97%	53.31%	55.65%
Target A2>=	59.67%	59.67%	59.77%	59.87%	59.97%	60.07%
Target B1>=	51.21%	51.21%	54.06%	56.91%	59.76%	62.21%
Target B2>=	42.94%	42.94%	43.33%	43.71%	44.09%	44.47%
Target C1>=	57.40%	57.40%	59.73%	62.05%	64.38%	66.70%
Target C2>=	63.08%	63.08%	63.18%	63.28%	63.38%	63.48%

# FFY 2020 SPP/APR Data

# Number of infants and toddlers with IFSPs assessed

2,168

# 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	15	0.69%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	787	36.30%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	210	9.69%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	426	19.65%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	730	33.67%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	636	1,438	45.83%	46.29%	44.23%	Did not meet target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	1,156	2,168	54.78%	59.67%	53.32%	Did not meet target	Slippage

# Provide reasons for A1 slippage, if applicable

Additional analysis of the data for functioning within age expectations showed five of the nine Regional Grantees (AEA) met the target. Regional Grantees indicated a need for Early Childhood Outcome (ECO) Summary process training for new and existing staff as the main reason for slippage. Additionally, grantees indicated a need for continued 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 lowa'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 that 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) has formed to address ECO processes and data use in order to support a statewide child outcomes measurement system that is consistent from early intervention through entering the kindergarten classroom. The new IFSP/IEP data system, ACHIEVE, currently under development, will include improved integration of the three ECO areas into the IFSP and IEP processes. The ACHIEVE system will support 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 will take place prior to the new system's phased release date starting in April 2022. Stakeholders from the various agencies are included in the development of the IFSP/IEP data system and will be engaged in the processes for developing 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.

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

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 need for Early Childhood Outcome (ECO) Summary process training for new and existing staff as the main reason for slippage. Additionally, grantees indicated a need for continued 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 lowa'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 that 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) has formed to address ECO processes and data use in order to support a statewide child outcomes measurement system that is consistent from early intervention through entering the kindergarten classroom. The new IFSP/IEP data system, ACHIEVE, currently under development, will include improved integration of the three ECO areas into the IFSP and IEP processes. The ACHIEVE system will support 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 will take place prior to the new system's phased release date starting in April 2022. Stakeholders from the various agencies are included in the development of the IFSP/IEP data system and will be engaged in the processes for developing 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	0.55%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	914	42.16%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	416	19.19%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	545	25.14%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	281	12.96%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	961	1,887	51.63%	51.21%	50.93%	Did not meet target	No Slippage

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	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	826	2,168	36.92%	42.94%	38.10%	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	11	0.51%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	686	31.64%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	258	11.90%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	579	26.71%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	634	29.24%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	837	1,534	53.83%	57.40%	54.56%	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	1,213	2,168	58.42%	63.08%	55.95%	Did not meet target	Slippage

# Provide reasons for C2 slippage, if applicable

Additional analysis of the data for functioning within age expectations showed two of the nine Regional Grantees (AEA) met the target. Regional Grantees indicated a need for Early Childhood Outcome (ECO) Summary process training for new and existing staff as the main reason for slippage. Additionally, grantees indicated a need for continued 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 lowa'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 that 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) has formed to address ECO processes and data use in order to support a statewide child outcomes measurement system that is consistent from early intervention through entering the kindergarten classroom. The new IFSP/IEP data system, ACHIEVE, currently under development, will include improved integration of the three ECO areas into the IFSP and IEP processes. The ACHIEVE system will support 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 will take place prior to the new system's phased release date starting in April 2022. Stakeholders from the various agencies are included in the development of the IFSP/IEP data system and will be engaged in the processes for developing 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.

# 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	3,348

Question	Number
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.	1,180

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 form 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 initial evaluation data; 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, but were not limited to the: Developmental Assessment of Young Children-2; Carolina Curriculum for Infants and Toddlers with Special Needs Assessment; 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 statewide web-based IFSP data system, and reflect a year-round count (July to June) of children who have exited Early ACCESS, 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, Part C and reported in the current reporting year's IDEA Part C Exiting Collection minus the number of children who had received Part C services for less than six months.

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

Stakeholders reviewed data and discussed procedural clarifications and practices regarding eligibility. Based on rationale from these discussions, stakeholders determined the need to reset the baseline year for this indicator for the FFY20-25 SPP. The new baseline was established from FFY18 (2018-19) data; targets were set accordingly.

The State assumes that COVID-19 had an impact on the reliability and validity of data collection due to limitations in collecting data across multiple settings and through multiple sources to determine the Early Childhood Outcomes data. The State performed additional analysis regarding the change in specific Infant Toddler (IT) service codes related to services in natural environments and found an increase in virtual services compared to previous years, which may have restricted the settings and methods in which data were collected.

# 3 - Prior FFY Required Actions

None

# 3 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

#### 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 <u>General Instructions</u> 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	Baseli ne	FFY	2015	2016	2017	2018	2019
А	2014	Target> =	93.00%	93.00%	93.00%	93.00%	93.00%
А	79.84 %	Data	83.80%	81.45%	86.75%	72.05%	
В	2014	Target> =	93.00%	93.00%	93.00%	93.00%	93.00%
В	85.86 %	Data	87.21%	88.19%	90.06%	86.02%	
С	2014	Target>	93.00%	93.00%	93.00%	93.00%	93.00%
С	83.25 %	Data	86.35%	85.54%	87.95%	78.88%	

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target A>=	79.84%	79.84%	80.84%	81.84%	82.84%	83.84%
Target B>=	85.86%	85.86%	86.86%	87.86%	88.86%	89.86%
Target C>=	83.25%	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, and the Early ACCESS Grantee Leadership Team provide stakeholder input on SPP/APR indicator targets, SSIP development and implementation, and 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 Early ACCESS Grantee Leadership Team is made up of approximately 30 members that attend meetings which include liaisons from: Regional Grantees; signatory agencies; Iowa Educational Services for the Blind and Visually Impaired; Iowa's Deafblind Service Project; and Iowa School for the Deaf.

A five-step process is used with each stakeholder group to review data and provide input for the SPP/APR:

- 1. Members are provided baseline, target, and trend data for each compliance and performance/results indicator.
- 2. The importance of stakeholder input regarding the Early ACCESS system is reviewed. This includes ensuring that stakeholder feedback is reported in the APR and used for improvement activities.
- 3. A question-and-answer period occurs to clarify any data questions and concepts.
- 4. Members work in small groups and large groups to analyze the data and draw conclusions. Signatory agency consultants are available to facilitate and answer questions.
- 5. Conclusions and comments regarding setting new targets, progress or slippage of meeting targets, root causes, and improvement activities are shared

Analysis conclusions, discussion notes, and comments are documented and provided to Early ACCESS and Lead Agency staff to include in the APR for each indicator where appropriate. Questions which require additional data to provide answers are collected. The Early ACCESS State Team is responsible for following through with obtaining additional data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

Groups, Meetings, and Members of Key Stakeholders Input for Iowa Part C Early ACCESS: State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually

- Parents of Children with Disabilities
- Service Providers
- Signatory Agencies
- Representative of Insurance Commission
- Mental Health Providers
- Representative of Head Start
- Local/Regional/State Representatives of Mental Health, Private Medical and Physicians
- Higher Education
- State legislators

Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; monthly meetings

Early ACCESS Grantee Leadership; five meetings held annually

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

In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

# FFY 2020 SPP/APR Data

The number of families to whom surveys were distributed	
Number of respondent families participating in Part C	57
Survey Response Rate	5.78%

A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	44
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	57
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	49
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	57
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	50
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	57

Measure	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)		79.84%	77.19%	Did not meet target	N/A
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)		85.86%	85.96%	Met target	N/A
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)		83.25%	87.72%	Met target	N/A

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 April 2020 for all children who were in Early ACCESS for at least 6 months that included demographic and contact (email, cell number) information for each family from the web-based IFSP data system. Unique survey links for each family were sent and recorded using the ISTAR monitoring system through either email and/or text messaging.

Of the 986 families who were sent a survey, 57 surveys were completed, yielding a 5.78% 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.

The strategies the State will use to ensure that future data responses are representative of demographics are similar to the strategies to increase overall survey response rates. Specifically, having the option to complete paper mail-in surveys, as well as offering the use of interpreters, should increase the response rates of all demographic categories. Prior to COVID-19, the State found that these methods resulted in representativeness. Furthermore, the State anticipates that the integration of the survey into the new lowa ACHIEVE system will improve the frequency and timeliness of sending the survey to families who have recently had an Annual IFSP meeting, including updated contact information and indicating the preferred method of receiving the survey for each family.

#### **Survey Response Rate**

FFY	2019	2020
Survey Response Rate	0.00%	5.78%

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 that will be implemented to increase the response rate include the integration of the family survey into the new lowa ACHIEVE system that is set to release in April 2022. The State anticipates the timeliness of survey distribution, as well as readily updated family contact information and communication preferences, will increase families' willingness to respond to the survey. For the current reporting year, the State did not provide the option of distributing paper surveys or using interpreters, due to COVID-19. The State plans on providing both of these options for the FFY 2021 data collection year.

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 95% +/- 10% margin to ensure representatives, lowa would need a survey return rate of 92 responses. Because only 57 surveys were received, lowa cannot say with confidence that survey results were representative of the population or from a broad cross section of families that received Early ACCESS, Part C services. lowa intends to implement the previously described strategies to improve nonresponse bias.

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

The State compared the demographics of the population of infants and toddlers for whom families responded to the demographics of all infants and toddlers enrolled in Early ACCESS. The State found all race/ethnicity categories were within +/- 5% of the population, except for the Hispanic subgroup which had a discrepancy of 6.56% returned compared to the population. Again, lowa recognizes the overall response rate for the entire sample does not meet criteria for representativeness.

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 95% +/- 10% margin of error to evaluate representativeness of the number of survey respondents to the total population. The overall response rate did not meet this criteria, therefore the survey results are not representative of the Early ACCESS population. 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 95% +/- 10% margin of error, none of the race ethnicity categories would have met this threshold, and 2) three of seven race/ethnicity categories have a small population size (between 5-60 children).

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

Stakeholders discussed the need to reset the baseline year for this indicator, which was originally FFY 2005, to FFY 2014. The rationale for setting a new baseline was based on a review of the historical data in conjunction with the use of a new survey instrument as well as survey distribution and collection methods.

Additionally, the State believes that COVID-19 impacted the reliability and completeness of this data. In response to the public health emergency, the State consulted with stakeholders, reviewed data, and determined to limit involvement of Regional Grantees in the distribution efforts. Therefore, Early ACCESS providers did not have the responsibility of communicating with families regarding the survey.

# 4 - Prior FFY Required Actions

None

# 4 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

# 4 - Required Actions

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

# Indicator 5: Child Find (Birth to One)

#### **Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find **Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs.

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

#### **Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the 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	2015	2016	2017	2018	2019
Target >=	1.35%	1.40%	1.40%	1.45%	1.45%
Data	1.56%	1.13%	1.08%	1.18%	1.17%

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target >=	1.08%	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, and the Early ACCESS Grantee Leadership Team provide stakeholder input on SPP/APR indicator targets, SSIP development and implementation, and 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 Early ACCESS Grantee Leadership Team is made up of approximately 30 members that attend meetings which include liaisons from: Regional Grantees; signatory agencies; Iowa Educational Services for the Blind and Visually Impaired; Iowa's Deafblind Service Project; and Iowa School for the Deaf.

A five-step process is used with each stakeholder group to review data and provide input for the SPP/APR:

- 1. Members are provided baseline, target, and trend data for each compliance and performance/results indicator.
- 2. The importance of stakeholder input regarding the Early ACCESS system is reviewed. This includes ensuring that stakeholder feedback is reported in the APR and used for improvement activities.
- 3. A question-and-answer period occurs to clarify any data questions and concepts.
- 4. Members work in small groups and large groups to analyze the data and draw conclusions. Signatory agency consultants are available to facilitate and answer questions.
- 5. Conclusions and comments regarding setting new targets, progress or slippage of meeting targets, root causes, and improvement activities are shared.

Analysis conclusions, discussion notes, and comments are documented and provided to Early ACCESS and Lead Agency staff to include in the APR for each indicator where appropriate. Questions which require additional data to provide answers are collected. The Early ACCESS State Team is responsible for following through with obtaining additional data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

Groups, Meetings, and Members of Key Stakeholders Input for Iowa Part C Early ACCESS:

State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually

- Parents of Children with Disabilities
- Service Providers
- Signatory Agencies
- Representative of Insurance Commission
- Mental Health Providers
- Representative of Head Start

- Local/Regional/State Representatives of Mental Health, Private Medical and Physicians
- Higher Education
- State legislators

Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; monthly meetings

Early ACCESS Grantee Leadership; five meetings held annually

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

In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

#### **Prepopulated Data**

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers birth to 1 with IFSPs	269
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020	07/08/2021	Population of infants and toddlers birth to 1	36,974

#### FFY 2020 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
269	36,974	1.17%	1.08%	0.73%	Did not meet target	Slippage

# Provide reasons for slippage, if applicable

The State expects the reason for slippage in this indicator is due to the limitations surrounding COVID-19 in regards to referrals, evaluations for eligibility, and policies regarding in-person services. The State reviewed various sources of data and found that the number of referrals decreased in turn with the onset of the pandemic and continued into this data collection period. In addition, the health and safety policies that were implemented by Regional Grantees limited the number of in-person visits for Early ACCESS service coordinators and providers which may have prompted families to exit or decline Early ACCESS services when not interested in virtual service delivery options. The State does not believe that COVID-19 impacted data completion, validity, or reliability for this indicator.

# Provide additional information about this indicator (optional)

Stakeholders discussed the need to reset the baseline year for this indicator, which was originally FFY 2005, to FFY 2017. The rationale for setting a new baseline was based on a review of the data related to previous procedural clarifications regarding eligibility for Early ACCESS services. Specifically, Early ACCESS defined parameters for prematurity as a diagnosed condition and also explicitly stated that foster care placement was not a diagnosed condition in regards to eligibility.

# 5 - Prior FFY Required Actions

None

# 5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2017, and OSEP accepts that revision.

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

# 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

# **Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find **Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs.

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

#### **Data Source**

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts 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	2015	2016	2017	2018	2019
Target >=	2.60%	2.60%	2.70%	2.70%	2.70%
Data	2.91%	2.50%	2.46%	2.59%	2.80%

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target >=	2.46%	2.46%	2.62%	2.77%	2.93%	3.08%

# Targets: Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee administrators, and the Early ACCESS Grantee Leadership Team provide stakeholder input on SPP/APR indicator targets, SSIP development and implementation, and 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 Early ACCESS Grantee Leadership Team is made up of approximately 30 members that attend meetings which include liaisons from: Regional Grantees; signatory agencies; Iowa Educational Services for the Blind and Visually Impaired; Iowa's Deafblind Service Project; and Iowa School for the Deaf.

A five-step process is used with each stakeholder group to review data and provide input for the SPP/APR:

- 1. Members are provided baseline, target, and trend data for each compliance and performance/results indicator.
- 2. The importance of stakeholder input regarding the Early ACCESS system is reviewed. This includes ensuring that stakeholder feedback is reported in the APR and used for improvement activities.
- 3. A question-and-answer period occurs to clarify any data questions and concepts.
- 4. Members work in small groups and large groups to analyze the data and draw conclusions. Signatory agency consultants are available to facilitate and answer questions.
- 5. Conclusions and comments regarding setting new targets, progress or slippage of meeting targets, root causes, and improvement activities are shared.

Analysis conclusions, discussion notes, and comments are documented and provided to Early ACCESS and Lead Agency staff to include in the APR for each indicator where appropriate. Questions which require additional data to provide answers are collected. The Early ACCESS State Team is responsible for following through with obtaining additional data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

Groups, Meetings, and Members of Key Stakeholders Input for Iowa Part C Early ACCESS: State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually

- Parents of Children with Disabilities
- Service Providers
- Signatory Agencies
- Representative of Insurance Commission
- Mental Health Providers
- Representative of Head Start
- Local/Regional/State Representatives of Mental Health, Private Medical and Physicians
- Higher Education
- State legislators

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Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; monthly meetings

Early ACCESS Grantee Leadership; five meetings held annually

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

In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

#### **Prepopulated Data**

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers birth to 3 with IFSPs	2,428
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020	for 6 Race Groups (5 Race os and Two or More Races) 07/08/2021		113,145

#### FFY 2020 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2,428	113,145	2.80%	2.46%	2.15%	Did not meet target	Slippage

#### Provide reasons for slippage, if applicable

The State expects the reason for slippage in this indicator is due to the limitations surrounding COVID-19 in regards to referrals, evaluations for eligibility, and policies regarding in-person services. The State reviewed various sources of data and found that the number of referrals decreased in turn with the onset of the pandemic and continued into this data collection period. In addition, the health and safety policies that were implemented by Regional Grantees limited the number of in-person visits for Early ACCESS service coordinators and providers which may have prompted families to exit or decline Early ACCESS services when not interested in virtual service delivery options. The State does not believe that COVID-19 impacted data completion, validity, or reliability for this indicator.

# Provide additional information about this indicator (optional).

Stakeholders discussed the need to reset the baseline year for this indicator, which was originally FFY 2005, to FFY 2017. The rationale for setting a new baseline was based on a review of the data related to previous procedural clarifications regarding eligibility for Early ACCESS services. Specifically, Early ACCESS defined parameters for prematurity as a diagnosed condition and also explicitly stated that foster care placement was not a diagnosed condition in regards to eligibility.

#### 6 - Prior FFY Required Actions

None

# 6 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2017, and OSEP accepts that revision.

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

# 6 - Required Actions

# **Indicator 7: 45-Day Timeline**

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / Child Find

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

# 7 - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data
2005	87.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.72%	99.49%	99.56%	99.13%	99.18%

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

# FFY 2020 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2,353	2,892	99.18%	100%	99.52%	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.

525

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 lowa's statewide Information Management System (IMS) web-based IFSP data system 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 date of referral and the date of the initial IFSP meeting.

lowa 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).

The state does not believe that COVID-19 impacted data completion, validity, or reliability for this indicator.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
24	24	0	0

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

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

The State uses data from the state database designed to track evaluation and the extent to which 45 day timelines are being met for conducting an initial evaluation and assessment and holding an initial IFSP meeting. Five Regional Grantees (AEA) did not meet the 100% target in FFY 2019 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 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, subsequent data review by the lead agency.

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

During FFY19, 24 instances of noncompliance were identified within six Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified that individual cases were corrected. Specifically, this included (a) verifying evaluations were 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 Early ACCESS program, and (b) completing a subsequent data review for compliance of the regulatory requirement for each individual case below 100 percent compliance during the reporting period.

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

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
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.

The State uses data from the state database designed to track evaluation and the extent to which 45 day timelines are being met for conducting an initial evaluation and assessment and holding an initial IFSP meeting. Five Regional Grantees (AEA) did not meet the 100% target in FFY 2019 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 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 FFY18, 32 instances of noncompliance were identified within six Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified that individual cases were corrected. Specifically, this included (a) verifying evaluations were 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 Early ACCESS program, and (b) completing a subsequent data review for compliance of the regulatory requirement for each individual case below 100 percent compliance during the

reporting period.

# 7 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 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 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

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

The State verified that the 32 uncorrected findings of noncompliance identified in FFY 2018 were corrected by notifying each Regional Grantee of the noncompliance and verifying through emails and/or record reviews that 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 that each Regional Grantee is correctly implementing the regulatory requirements by conducting a follow-up review of subsequent data from the web-based data system for each of the five Regional Grantees that 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

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2018 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2018 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.

# 7 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. 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.

# **Indicator 8A: Early Childhood Transition**

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

#### **Data Source**

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

# 8A - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data
2005	87.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.16%	98.01%	96.78%	98.40%	98.29%

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

#### FFY 2020 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
732	793	98.29%	100%	98.61%	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.

50

Provide reasons for delay, if applicable.

Delays were due to Regional Grantee staff illness or 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, Part C at the age of three. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, 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 monitoring consultant.

# Provide additional information about this indicator (optional)

The State does not believe that COVID-19 impacted data completion, validity, or reliability for this indicator.

# Correction of Findings of Noncompliance Identified in FFY 2019

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

# FFY 2019 Findings of Noncompliance Verified as Corrected

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

Four Regional Grantees (AEAs) did not meet the 100% target in FFY19 and were notified of findings of noncompliance. All four regions made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency monitoring consultant was responsible for verifying timely corrections. 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 four Regional Grantees demonstrated implementation of the requirement with 100% compliance through an additional subsequent data review by the lead agency.

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

During FFY19, 14 instances of noncompliance were identified within four Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified through subsequent record reviews and emails that individual cases were corrected. Specifically, this included (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) completing a subsequent data review for compliance of the regulatory requirement for each individual case below 100 percent compliance during the reporting period.

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

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	13	13	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.

Four Regional Grantees (AEAs) did not meet the 100% target in FFY18 and were notified of findings of noncompliance. All four regions made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The Lead Agency 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 four Regional Grantees demonstrated implementation of the requirement with 100% compliance through an additional subsequent data review by the Lead Agency.

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

During FFY18, 13 instances of noncompliance were identified within four Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified through subsequent record reviews and emails that individual cases were corrected. Specifically, this included (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) completing a subsequent data review for compliance of the regulatory requirement for each individual case illustrating below 100 percent compliance during the reporting period.

# 8A - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining 13 uncorrected findings of noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

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

The State verified that the 13 uncorrected findings of noncompliance identified in FFY 2018 were corrected by notifying each Regional Grantee of the noncompliance and verifying through emails and/or record reviews that for each individual case of noncompliance, transition steps and services were eventually provided unless the child was no longer within the jurisdiction of the Early ACCESS program.

Additionally, the State verified that each Regional Grantee is correctly implementing the regulatory requirements by conducting a follow-up review of data from the web-based data system for each of the four Regional Grantees that did not meet 100% compliance for providing timely transition step and services. Each Regional Grantee demonstrated implementation of the requirement with 100% compliance as verified by the Lead Agency.

# 8A - OSEP Response

# 8A - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# **Indicator 8B: Early Childhood Transition**

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

#### **Data Source**

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

# 8B - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data	
2005	96.00%	

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

#### FFY 2020 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
499	499	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.

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

Data were obtained from files of children exiting Early ACCESS, Part C and potentially eligible for Special Education, Part B. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, 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, Part C statewide file review process. Data were obtained from files of children exiting Early ACCESS, Part C and potentially eligible for Special Education, Part B. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, 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).

The state does not believe that COVID-19 impacted data completion, validity, or reliability for this indicator.

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

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

# Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

#### 8B - Prior FFY Required Actions

None

# 8B - OSEP Response

# 8B - Required Actions

# **Indicator 8C: Early Childhood Transition**

#### **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

#### **Data Source**

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8C - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data	
2005	87.00%	

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	98.70%	98.19%	98.14%	98.58%	98.43%

#### **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

#### FFY 2020 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
477	499	98.43%	100%	99.20%	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.

Λ

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.

18

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, Part C and potentially eligible for Special Education, Part B. The monitoring cycle occurs annually with all Regional Grantees. A random sample of children exiting Early ACCESS, 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 correction for noncompliance is recorded.

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

The state does not believe that COVID-19 impacted data completion, validity, or reliability for this indicator.

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

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

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

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

Three Regional Grantees (AEAs) did not meet the 100% target in FFY19 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 monitoring consultant was responsible for verifying timely correction. In each of the three 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 an additional subsequent data review by the Lead Agency.

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

During FFY19, 8 instances of noncompliance were identified within three Regional Grantees. The Lead Agency notified each Regional Grantee of the noncompliance and verified through subsequent record reviews and emails that individual cases were corrected. Specifically, this included (a) verifying a transition conference was held even though the timeline was not met unless the child was no longer within the jurisdiction of the Early ACCESS program; and (b) completing a subsequent data review for compliance of the regulatory requirement for each individual case below 100 percent compliance during the reporting period.

# Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	7	7	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.

Four Regional Grantees (AEAs) did not meet the 100% target in FFY18 and were notified of findings of noncompliance. All four regions made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The Lead Agency 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 four Regional Grantees demonstrated implementation of the requirement with 100% compliance through an additional subsequent data review by the Lead Agency.

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

During FFY18, 7 instances of noncompliance were identified within four Regional Grantees. The lead agency notified each Regional Grantee of the noncompliance and verified through subsequent record reviews and emails that individual cases were corrected. Specifically, this included (a) verifying a transition conference was held even though the timeline was not met unless the child was no longer within the jurisdiction of the Early ACCESS program; and (b) completing a subsequent data review for compliance of the regulatory requirement for each individual case below 100 percent compliance during the reporting period.

#### 8C - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining seven uncorrected [finding/findings] of noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Response to actions required in FFY 2019 SPP/APR

The State verified the 7 uncorrected findings of noncompliance identified in FFY 2018 were corrected by notifying each Regional Grantee of the noncompliance and verifying through emails and/or record reviews that for each individual case of noncompliance, timely transition conference were eventually held unless the child was no longer within the jurisdiction of the Early ACCESS program.

Additionally, the State verified that each Regional Grantee is correctly implementing the regulatory requirements by conducting a follow-up review of data from the web-based IFSP data system for each of the Regional Grantees that did not meet 100% compliance for holding timely transition conferences. Each Regional Grantee demonstrated implementation of the requirement with 100% compliance as verified by the Lead Agency.

# 8C - OSEP Response

# 8C - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# **Indicator 9: Resolution Sessions**

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

#### **Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the EDFacts 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.

YES

Provide an explanation of why it is not applicable below.

lowa has had 0 resolutions.

# 9 - Prior FFY Required Actions

None

# 9 - OSEP Response

OSEP notes that this indicator is not applicable.

# 9 - Required Actions

#### **Indicator 10: Mediation**

#### Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

#### **Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the EDFacts 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 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	0
SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	0
SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	0

# Targets: Description of Stakeholder Input

The State's Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), Regional Grantee administrators, and the Early ACCESS Grantee Leadership Team provide stakeholder input on SPP/APR indicator targets, SSIP development and implementation, and 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 Early ACCESS Grantee Leadership Team is made up of approximately 30 members that attend meetings which include liaisons from: Regional Grantees; signatory agencies; Iowa Educational Services for the Blind and Visually Impaired; Iowa's Deafblind Service Project; and Iowa School for the Deaf.

A five-step process is used with each stakeholder group to review data and provide input for the SPP/APR:

- 1. Members are provided baseline, target, and trend data for each compliance and performance/results indicator.
- 2. The importance of stakeholder input regarding the Early ACCESS system is reviewed. This includes ensuring that stakeholder feedback is reported in the APR and used for improvement activities.
- 3. A question-and-answer period occurs to clarify any data questions and concepts.
- 4. Members work in small groups and large groups to analyze the data and draw conclusions. Signatory agency consultants are available to facilitate and answer questions.
- 5. Conclusions and comments regarding setting new targets, progress or slippage of meeting targets, root causes, and improvement activities are shared.

Analysis conclusions, discussion notes, and comments are documented and provided to Early ACCESS and Lead Agency staff to include in the APR for each indicator where appropriate. Questions which require additional data to provide answers are collected. The Early ACCESS State Team is responsible for following through with obtaining additional data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

Groups, Meetings, and Members of Key Stakeholders Input for Iowa Part C Early ACCESS:

State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually

- Parents of Children with Disabilities
- Service Providers
- Signatory Agencies
- Representative of Insurance Commission
- Mental Health Providers

- Representative of Head Start
- Local/Regional/State Representatives of Mental Health, Private Medical and Physicians
- Higher Education
- State legislators

Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees; monthly meetings

Early ACCESS Grantee Leadership; five meetings held annually

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

In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

The State of Iowa has had less than 10 mediations a year. Therefore, the state is not required to set targets for indicator C10.

#### **Historical Data**

Baseline Year	Baseline Data
2005	

FFY	2015	2016	2017	2018	2019
Target>=					
Data					

## **Targets**

FFY	2020	2021	2022	2023	2024	2025
Target>=						

#### FFY 2020 SPP/APR Data

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

Provide additional information about this indicator (optional)

# 10 - Prior FFY Required Actions

None

# 10 - OSEP Response

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

# 10 - Required Actions

# **Indicator 11: State Systemic Improvement Plan**

#### **Instructions and Measurement**

Monitoring Priority: General Supervision

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

#### Measurement

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

#### Instructions

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

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

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

#### Overview of the Three Phases of the SSIP

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

#### Phase I: Analysis:

- Data Analysis;
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

#### Specific Content of Each Phase of the SSIP

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

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

#### Phase III: Implementation and Evaluation

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

#### A. Data Analysis

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

# B. Phase III Implementation, Analysis and Evaluation

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

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

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

#### C. Stakeholder Engagement

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

#### Additional Implementation Activities

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

# 11 - Indicator Data

#### Section A: Data Analysis

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

lowa's State-identified Measurable Result (SiMR) is an increase in the percentage of families reporting that Early ACCESS has helped them help their child develop and learn. The SiMR aligns with the 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.

Link to Iowa's Early ACCESS 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	2020	2021	2022	2023	2024	2025
Target>=	83.25%	83.25%	84.25%	85.25%	86.25%	87.25%

#### FFY 2020 SPP/APR Data

Number of respondent participating in Part C report that early interv services have helped the help their children deve	who ention e family	Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
50		57	0.00%	83.25%	87.72%	Met target	No Slippage

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

The SiMR data source is the Family Outcomes Survey-Revised: Part C (2010), which is also used for Iowa's 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 at the time of the data pull from the web-based IFSP data system. Unique survey links for each family were disseminated in two ways using ISTAR (lowa's System to Achieve Results): 1) passcodes and a link to an online survey were emailed to families who had provided email addresses, and 2) passcodes were sent

via text to families who preferred completing the survey on their phone. All survey responses were collected and calculated in ISTAR.

Of the 986 families who were sent a survey, 57 surveys were completed, yielding a 5.78% response rate. Using statistical parameters of a confidence level of 95% +/- 10% margin to ensure representativeness, lowa would need a survey return rate of 92 responses. Given only 57 surveys were received, Early ACCESS cannot say with confidence that survey results were representative of the population or from a broad cross section of families who received Early ACCESS services.

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 88% for FFY20, which remained stable from the previous year. In June 2021, there were three Trainee Coaches, six Provider Coaches, and seven Master Coaches statewide, representing an increase of three Master Coaches. The Early ACCESS providers' use of FGRBI with fidelity is measured by the implementation of the FGRBI key indicators. In the FFY20 nine month coaching cycle, Early ACCESS providers demonstrated improvement and a performance value of 69% of the FGRBI key indicators observed in their first video to 74% in their third video. This illustrated an increase of 5 percentage points in performance from the previous year.

#### 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 FFY20 continued to indicate high caregiver competence (Mean = 5.66, Median = 5.75) and confidence (Mean = 5.65, Median = 5.60) related to child outcomes while also reflecting a higher use of FGRBI key indicators by Early ACCESS providers. Data from FFY20 had 29 more respondents (response rate = 71%) than the previous year.

#### 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 FFY20, discussed at Early ACCESS Grantee Leadership team meetings, and addressed 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 FFY20, the Early ACCESS Regional Grantees reported a shift in barriers which now included sustainability efforts, supporting the transition to virtual services, and developing and delivering training for the new 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)

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

The State believes that COVID-19 impacted the reliability and completeness of this data. In response to the public health emergency, the State consulted with stakeholders, reviewed data, and determined to limit involvement of the Regional Grantees in the distribution efforts. Therefore, Early ACCESS providers did not have the responsibility of communicating with families regarding the survey. Additionally, the State did not provide the options of distributing paper surveys or using interpreters, due to COVID-19.

Of the 986 families who were sent the Family Outcomes Survey-Revised: Part C (2010), 57 surveys were completed, yielding a 5.78% response rate. As a result, the response rate for the SiMR was extremely low. The State cannot say with confidence that survey results were representative of the population or from a broad cross section of families that received early intervention services.

In an effort to improve response rates, future collection of family data will utilize improved access to family contact information as well as family preferences for communication, and timely electronic delivery of surveys.

#### Section B: Implementation, Analysis and Evaluation

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

NO

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

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

The Early ACCESS evaluation plan was updated in 2018-2019, and has been reviewed and updated annually since then. The evaluation questions, measures, and data collection methods provide the State with information from a variety of sources to evaluate the effectiveness of the improvement activities addressed in the SSIP. The following three areas of data support the State's decision to continue with the current evaluation plan: 1) consistent progress among Early ACCESS provider and coach fidelity scores; 2) advancement of system improvements to support sustainability; and 3) continued improvement in family outcomes reflecting high levels of family confidence and competence.

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 focus in FFY20 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 intentionally utilize and apply data-based decision making for sustainability of lowa'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 FFY20, 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 FFY19 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.

In FFY20, coaches used a Coaching Manual and a Coaching Fidelity Checklist to ensure coaching sessions were implemented with fidelity. The average fidelity score was 88%, which was the same as the previous year.

The goal of the coaching sessions was to support Early ACCESS providers in using FGRBI with families. The FFY20 data represented 55 first videos, 47 second videos, and 44 third videos. The average fidelity scores from first to third video were 69% to 74%, showing an increase in the use of FGRBI key indicators during the training cycle. Additionally, the baseline scores for Early ACCESS providers increased 5 percentage points from FFY19, which suggests providers are beginning their training with more familiarity and knowledge of FGRBI than previous cohorts.

In the beginning of the training sequence, Early ACCESS providers completed FGRBI online modules to learn basic practices. Forty-three providers completed the pre- and post-module assessment. The average pre-module score was 68% and the average post-module score was 86%, illustrating an increase in knowledge of FGRBI upon module completion.

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 lowa'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 that 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 lowa's institutes of higher education (IHE) in order to develop a high-quality comprehensive system of personnel development with sustainability of knowledge of evidence-based practices among future practitioners. In June 2020, the State began offering webinars with higher education representatives across multiple disciplines to introduce the Cross-Disciplinary Early Childhood Competencies developed by the National Early Childhood Personnel Center. The purpose of each webinar was to connect pre-service learning to in-service professional development and evidence-based practices. A result of the webinar series was a first ever collaboration between two universities representing two different professional disciplines. In FFY20 activities, the State continued to implement strategies to bridge the pre-service and in-service gap across disciplines so early intervention providers were provided consistent information and training reflective of the cross-disciplinary early childhood competencies.

Progress towards outcomes has been made through:

- Partnerships between institutes of higher education from multiple disciplines;
- 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, has met 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 lowa.

Progress towards outcomes has been made through:

- Family Engagement Task Team of the Iowa Council for Early ACCESS;
- 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 of a new IDEA data system, ACHIEVE.

Did the State implement any <u>new</u> (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

Development of IDEA Data System (Accountability & Continuous Improvement; Data System)

lowa has continued development of a new IDEA system, ACHIEVE, with a launch date in April 2022. A primary goal for the system is to develop, deliver, and ensure individualized plans and services for learners, birth to 21. The system is being designed to also improve data reporting capabilities. Iowa's Early ACCESS State Team has been involved throughout system and content development. In addition, Early ACCESS Regional Grantee leadership, service coordinators, and providers have had continual opportunities to test and provide input during development.

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 (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 additional intentional discussions with administrators about implementation fidelity, sustainability, and scale-up efforts. The statewide goal is to continue the implementation of a collaboratively developed system plan supported by lowa's Regional Grantee administrators and leadership, the lowa Council for Early ACCESS, and all four 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 is also developing statewide professional learning which incorporates the application of FGRBI key indicators as well as required processes and procedures reflected in IDEA statute and procedural safeguards.

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.

In FGRBI, it is the parent or caregiver who promotes child learning. 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, lowa'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 child's development and learning, which reinforces their confidence and competency as well as results in an increase in the teaching opportunity cycle. 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 Part C SPP/APR Indicator 4C Family Outcomes and Iowa's SiMR.

To build toward full implementation of the FGRBI, the lowa 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 = 68%, and post-score average = 86%.

- 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: Infusing the Early Childhood Outcomes (COS) Process into Program Practices; The Growing Brain; and Coaching during Service Coordination.

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 addition, beginning in spring of 2022, the professional learning for the new ACHIEVE system will integrate the FGRBI framework into the child and family evaluation, assessments, and development of the IFSP. This will provide an opportunity to expand the implementation of FGRBI into all aspects of the IFSP process. 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.

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

The 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, and the Early ACCESS Grantee Leadership Team provide stakeholder input on SPP/APR indicator targets, SSIP development and implementation, and 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 Early ACCESS Grantee Leadership Team is made up of approximately 30 members that attend meetings which include liaisons from: Regional Grantees; signatory agencies; Iowa Educational Services for the Blind and Visually Impaired; Iowa's Deafblind Service Project; and Iowa School for the Deaf.

A five-step process is used with each stakeholder group to review data and provide input for the SPP/APR:

- 1. Members are provided baseline, target, and trend data for each compliance and performance/results indicator.
- 2. The importance of stakeholder input regarding the Early ACCESS system is reviewed. This includes ensuring that stakeholder feedback is reported in the APR and used for improvement activities.
- 3. A question-and-answer period occurs to clarify any data questions and concepts.
- 4. Members work in small groups and large groups to analyze the data and draw conclusions. Signatory agency consultants are available to facilitate and answer questions.
- 5. Conclusions and comments regarding setting new targets, progress or slippage of meeting targets, root causes, and improvement activities are shared.

Analysis conclusions, discussion notes, and comments are documented and provided to Early ACCESS and Lead Agency staff to include in the APR for each indicator where appropriate. Questions which require additional data to provide answers are collected. The Early ACCESS State Team is responsible for following through with obtaining additional data for deeper analysis and discussion at subsequent meetings.

The specific stakeholder groups noted below regularly engaged in topics of Part C implementation and evaluation including an annual review of the IDEA Part C Annual Performance Report. These groups and other stakeholders have also been involved in recent activities specific to the development of the 2020-2025 State Performance Plan.

Groups, Meetings, and Members of Key Stakeholders Input for Iowa Part C Early ACCESS: State Interagency Coordinating Council (Iowa Council for Early ACCESS); five meetings held annually

- Parents of Children with Disabilities
- Service Providers
- Signatory Agencies
- Representative of Insurance Commission
- Mental Health Providers
- Representative of Head Start
- Local/Regional/State Representatives of Mental Health, Private Medical and Physicians
- Higher Education
- State legislators

Regional Grantee Administrators (Directors of Special Education) for nine Regional Grantees: monthly meetings

Early ACCESS Grantee Leadership; five meetings held annually

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

In addition to review of APR indicator data, the stakeholder groups and the Early ACCESS regional and state-level implementation teams also routinely review data related to the ongoing implementation and continuous improvement of the Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes but is not limited to: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data.

These data inform decisions about personnel development for use of evidence-based practices as well as address barriers to successful implementation of those practices. Stakeholders provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input arises.

#### 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 FFY20 included:

- Building a new data system, ACHIEVE, which included Early ACCESS providers, Signatory Agency representatives, administrators, and families;
- Discussing the implementation plan for 2021-2022 with Regional Grantee Administrators (AEA Directors of Special Education); and,
- Redesigning public facing resources and marketing materials for Early ACCESS, including the website for coordinated intake, and based on input from families, providers, and public partners.

Input and feedback were also specifically gathered from parents who participated in discussions of improvement strategies during public webinars hosted by the Lead Agency and Early ACCESS State Team. Discussions of data were intentionally structured to provide a means for active, two-way communication among stakeholders. Parents were prompted and encouraged to ask questions and actively participate in the conversation during the webinars, as well as provide more detailed individual feedback and input on improvement strategies using an online survey.

A separate webinar opportunity was co-hosted by the Lead Agency and ASK Resource Center, lowa's statewide parent training, information, and advocacy center, or PTIC. The Lead Agency and ASK Resource Center shared information regarding the webinar throughout their respective networks. This webinar was specifically planned for parents and families of infants and toddlers currently or previously served in Early ACCESS; it provided the opportunity for smaller group discussions of three potential priority areas, as well as an online survey to share additional individual information and suggestions. The three priority areas represented multiple indicators and were: 1) identifying children eligible for Early ACCESS, 2) promoting positive family and child outcomes, and 3) supporting smooth transitions. The newly developed state performance plan addresses prioritized improvement activities based on their input.

Additional efforts to increase capacity of diverse parent group involvement included Lead Agency hosted public webinars; opportunities to provide feedback during in-person meetings and via online surveys; and facilitated small group discussions coordinated with ASK Resource Center (PTIC). Registration for each of the webinars was shared broadly across the state through various early education, health, and human service agencies and networks to increase the diversity of parents participating by geographic region. Demographic data were collected through webinar registration and in survey responses for analysis and additional future strategies in targeting diverse parent and stakeholder groups.

#### 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 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.

lowa's SiMR uses Indicator 4C data, which had a very low response yielding a 5.78% response rate in FFY20. Strategies that will be implemented to increase the response rate include:

- 1) integration of the family survey into the new Iowa ACHIEVE system,
- 2) improved timeliness of electronic survey distribution, and
- 3) increased access to accurate family contact information.

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

The ACHIEVE system will become available in the field in April 2022; all IFSPs will be entered into the data system by June 30, 2023. The State anticipates the response to the survey to measure lowa's SiMR and Part C SPP/APR Indicator 4 will increase as more IFSPs are entered into ACHIEVE and distributed electronically based upon family communication preferences. An increased response rate will increase the validity of the SiMR data.

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

Not applicable

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

Stakeholders discussed the need to reset the baseline year for SPP/APR Indicator 4, which was originally FFY 2005, to FFY 2014. The rationale for setting a new baseline was based on a review of the historical data, use of a new survey instrument, and new survey collection methods.

# 11 - Prior FFY Required Actions

None

# 11 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2014, and OSEP accepts that revision.

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

# 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

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Submitted on:

04/26/22 5:50:03 PM

# **ED Attachments**





