

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2019**

Delaware



**PART C DUE
February 1, 2021**

**U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202**

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The FFY 2019-20 Annual Performance Report (APR) covers the period of July 1, 2019 through June 30, 2020 which will be submitted February 1, 2021.

The Department of Health and Social Services (DHSS), as the lead agency for Part C of the Individuals with Disabilities Education Act (IDEA) in Delaware, oversees early intervention service activities for Part C of the IDEA in Delaware, for infants and toddlers birth through two years of age with disabilities and their families. The DHSS Birth to Three Early Intervention Program (hereafter referred to as the Program) has multiple components in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to the two Birth to Three Early Intervention Regional Programs – Child Development Watch (hereafter referred to as Regional Programs – CDW) as well as to external early intervention service providers.

FFY 2019-20 was a pivotal year for addressing compliance and quality performance issues in the state. The Program focused much of its attention on improving performance on the State Performance Plan (SPP) indicators. Program policies and processes focus on data being timely, complete, and accurate.

On December 2-4, 2019 federal staff from the U.S. Department of Education, Office of Special Education Programs (OSEP), Monitoring State and Improvement Planning Division conducted a Differentiated Monitoring and Support (DMS) Technical Assistance (TA) visit to Delaware's Birth to Three Early Intervention Program. The following needs were identified:

- Lead agency needs to improve performance on regulation 34 C.F.R. §303.120
- Lead agency role in supervision, monitoring funding, interagency coordination and other responsibilities; 34 C.F.R. §303.119
- Personnel standards with policies ensuring that all providers meet qualifications; 34 C.F.R. §303.420(b)(2))
- Parent consent of eligibility evaluation, assessment and services; 34 C.F.R. §303.343
- IFSP team participation and decisions being made about services; 34 C.F.R. §303.321
- Evaluation and assessment of child and family; 34 C.F.R. §303.635(a)(10), 300.640 and 300.101
- Free Appropriate Public Education (FAPE) and Use of Funds for children with summer birthdays as well as those eligible under state mandate; 34 C.F.R. §303.342
- Ensuring valid and reliable data is contained in the Annual Performance Report (APR), particularly Indicator 1 which pertains to timely delivery of services; 34 C.F.R. §303.118
- Evidence of a Comprehensive System of Personnel Development (CSPD) across programs, procedures, and training calendar; 34 C.F.R. §303.700
- Lead Agency must create formal written procedures for State Monitoring and Enforcement Mechanisms to ensure compliance and 34 C.F.R. §303.435-436
- There needs to be a formal, written procedure in place to ensure families understand their rights under Part C of IDEA and ensure staff are trained on formally handling parent complaints.

The State's determinations for both 2019 and 2020 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's November 26, 2020 revised determination letter informed the State that it must report with its FFY 2019 SPP/APR submission, due February 1, 2021, 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. To address these identified needs, the Birth to Three Early Intervention Program received OSEP-recommended technical assistance from the Center for IDEA Early Childhood Data Systems (DaSy), Early Childhood Personnel Center (ECPC), the Early Childhood Technical Assistance Center (ECTA), and the IDEA Data Center (IDC). Birth to Three – Administration also contracted with WestEd, Collective Learning Consultants (CLC) and Larry Ringer for additional technical assistance support. With their assistance, DHSS developed a comprehensive Delaware Birth to Three Policies and Procedures Manual, which DHSS submitted to OSEP in September 2020. As a result of intensive TA, we were able to increase communications with the Regional Programs regarding requirements related to compliance. Delaware will continue to provide OSEP with updates and additional information so that OSEP may determine the scope of engagement necessary to improve compliance. This will include further collaboration with OSEP-funded technical assistance centers and independent contractors, working with stakeholders to launch a root cause analysis to identify the factors that contributed to low compliance, and additional OSEP engagement and follow-up.

Additional information related to data collection and reporting

Data System: The data system (DHSSCares) is a vital component to the general supervision system. The two Regional Programs – CDW enter and maintain their own data in DHSSCares. The data system is web-based to allow for data to be entered from state offices and remote, third-party locations. The system includes child demographics, referral, Part C eligibility, evaluations, assessments, family-directed assessments, Individual Family Service Plan (IFSP) data, service delivery data, child outcome scores, progress notes and transition conference details. This allows for a wide array of performance tracking and management reports to be generated at the state and regional levels. DHSSCares also generates the Annual Child Count reports, Child Outcome Summary (COS) reports, and other data required for compliance and quality management purposes. Data training and TA are provided by Program – Administration in a train the trainer model.

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.

FFY 2019 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Current Initiatives:

The Birth to Three Early Intervention Program (the Program) is responsible for the general administration and supervision of programs and activities administered by the two Regional Programs – CDW and external early intervention service providers. These responsibilities include:

1. The monitoring of programs;
2. Providing technical assistance, if necessary;
3. Correcting any noncompliance identified through monitoring as soon as possible and in no case later than one year after the lead agency's identification of the noncompliance;
4. The identification and coordination of all available resources for early intervention services within the State, including those from federal, state, local, and private sources;

5. The assignment of financial responsibility and fiscal management;
6. The development of procedures to ensure that early intervention services are provided to infants and toddlers with disabilities and their families under Part C of IDEA in a timely manner, pending the resolution of any disputes among public agencies or early intervention service providers; and
7. The entry into formal interagency agreements or other written methods of establishing financial responsibility with the Department of Education, Department of Services for Children, Youth, Families, and Head Start.

Integrated Monitoring Activities: Birth to Three – Administration monitors on compliance and performance measures based on the collection, analysis and utilization of data from all available sources, primarily the statewide data system (DHSSCares), and the Family Outcomes Survey report. Due to the impact of COVID-19, the annual chart reviews did not occur on site, however were conducted via desk audits with email follow up.

Demonstrating Correction in OSEP Memo 09-02, the Program establishes the following to determine that previously identified noncompliance has been corrected, Delaware:

1. Accounts for all instances of noncompliance, including noncompliance identified:
 - a. Through the state's on site and virtual monitoring system or other monitoring procedures such as self-assessment
 - b. Through the review of data collected by the state, including compliance data collected through a state data system;
2. Identifies where (in what Early Intervention Services (EIS) programs), noncompliance occurred, the percentage level of noncompliance in each of those sites, and the root cause(s) of the noncompliance.
3. If change is needed, the Program requires each Regional Program – CDW to review and modify policies, procedures, with guidance, that contributed to or resulted in noncompliance; and
4. Determines, in each EIS program with identified noncompliance that the EIS program is correctly implementing the specific regulatory requirement(s). This must be based on Delaware's review of updated data such as data from subsequent on-site monitoring or data collected through the data system.

In Spring 2020, the Program began the development of a more in-depth accountability system for the monitoring and accountability component of the General Supervision system. A program Corrective Action Plan (pCAP) template was created to use as a tool for the Program, the Regional Programs – CDW and external early intervention service providers to use in the determination of reasons of noncompliance using root cause analysis logic and benchmarks for improvements. A more integrated monitoring system, based on the results of the pCAP will be collaborated on to ensure a timely resolution to current noncompliance as well as to prevent future noncompliance.

Rules, Policies and Procedures:

The Program implements policies and procedures to ensure programs are aware of proper processes for services and data tracking. In an effort to strengthen the statewide system of early intervention, the Program began developing new and revised policies and procedures in Spring 2020 to ensure statewide compliance with the federal Part C regulations and strengthen accountability. The Program created a comprehensive manual of policies and procedures and published those for public review and comment in April and May. The final Birth to Three Early Intervention Program Policies and Procedures were submitted to OSEP in September 2020 and are pending approval by OSEP.

The Program maintains interagency agreements for statewide coordination and collaboration with the Department of Services for Children, Youth, Families and the Department of Education, and Head Start.

Birth to Three – Administration collaborates with the Department of Education and the Office of Early Learning by adding an Ages and Stages Questionnaire (ASQ) link to the Birth to three website. This is to offer families an additional opportunity to access developmental screenings. Birth to Three – Administration continues to collaborate with Help Me Grow/211 to ensure that any ASQ screenings that come through the Birth to Three – Administration portal are processed timely so that parents are aware of their child's current developmental needs. Should a screening indicate the need for further evaluation, a referral is sent to the Regional Program – CDW.

Participation in outreach events occur through the year. Program staff attend and provide resource materials to at risk populations, general public and early intervention professionals. Some of the outreach activities were designed to reach military families, underserved populations, more specifically the Amish community in Delaware. Foster families, homeless or displaced families and multi-cultural populations were a main focus of several of the outreach activities. Statewide collaboration occurred with many family and child servicing organizations including; New Directions Early Head Start, the Child Care Association of Sussex County Delaware, Exceptional Family Member Program at the Dover Air Force Base, and Christiana Care's health community workers to name a few.

Birth to Three staff also participated in the planning of, attendance to and provision of vendor information tables at conferences throughout Delaware. In previous years, these included The Life Conference which is designed to support individuals with disabilities across the life span; The Making a Difference Conference, which is designed to educate and inform early childhood educators and child care center staff; the Inclusion Conference, which is designed to offer participants the opportunity in breakout sessions and workshops on early intervention and education specific topics. Due to the onset of COVID-19 in March of 2020, Birth to Three – Administration was not able to participate in as many face to face vendor events and virtual events had not been developed at that time.

Fiscal Management and Accountability:

The Program has in place a System of Payment policy, approved by OSEP in 2015. It utilizes a central billing system to process claims. With parent consent and notification, private and public insurances are accessed to contribute funds for services. A sliding fee scale is utilized when parents do not provide consent to utilize their private insurance; however, service provision is not contingent upon any family's ability to pay for services. The Program ensures that federal Part C funds are used as the payor of last resort, as well as obligated and liquidated within the allowable timeframe and for appropriate activities.

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.

During the past year the Program has engaged in extensive technical assistance to address some of the state-identified needs as well as the information addressed during the OSEP onsite visit. These TA activities included participation in:

- o National Service Coordinator Training Workgroup and the subgroup on the SC Leadership both supported by DEC and ECP
- o Part C Data Manager Calls that are set up by ECTA

- o Monthly OSEP TA calls
- o Frequent COVID-19 webinars sponsored by the Infant and Toddler Coordinators Association (ITCA)
- o Participation in multiple webinars put on by national TA Centers
- o Regular TA meetings and work with independent contractors, Ardith Ferguson (WestEd), Larry Ringer, and Patrice Linehan (Collective Learning Consultants)

Birth to Three – Administration provides virtual and onsite technical assistance for each of the two Regional Programs – CDW locations. Program leadership provide regulatory guidance and technical assistance to ensure progress towards compliance and evidence-based service delivery practices. All new staff are offered a 16-hour training and orientation on federal policies and regulatory guidance on early intervention and service coordination, as well as on the Delaware specific early intervention program. These modules have been endorsed by the University of Delaware through the University's Human Development and Family Sciences department, Early Childhood Education (ECE) program, to be recognized by subject matter experts. The training modules are also utilized as resources for veteran service coordinators to ensure consistency of information and best practices.

The Program provides individualized, targeted technical assistance virtual and site visits as needed, and ongoing TA occurs via phone and email. The Program also provides training on the DHSSCares data system to allow for consistency in data management and program documentation. One-on-one technical assistance is also available to individual staff as requested or identified through monitoring. Training and ongoing technical assistance are offered on topics such as transition, early childhood outcomes, birth mandates, and other topics as necessary.

Birth to Three – Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. The Program collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year-olds by 25% within 60 months (July 2021). In addition, Birth to Three – Administration holds a governor-appointed chair of the Early Hearing Detection and Intervention Advisory Board (EHDI) and The Governor's Advisory Council for Exceptional Children (GACEC) and is an active participant on the State Council for Persons with Disabilities.

Regional Program – CDW continues to benefit from Autism-related services funded through HRSA (Health Resources & Services Administration) and AMCHP (Association of Maternal & Child Health Programs) by providing expedited medical evaluations for children identified with Autism Spectrum Disorder (ASD) concerns. This allows children on the Autism Spectrum to receive medical supports as well as other needed supports as determined by the child's and family's IFSP.

The Program plans to utilize the Center for Appropriate Dispute Resolution in Special Education's (CADRE) materials recently developed to explain the dispute resolution options under Part C of the IDEA: mediation, written state complaints and the due process complaint and hearing procedures specific to families with infants or toddlers with disabilities. The Program will also continue to work with contracted TA consultants to solidify a process for maintaining track and records for any dispute resolutions that may occur in Delaware. Delaware adheres to Delaware Part C due process hearing procedures. The Program has constructed sections of the policy manual to address dispute resolution and has created forms to use in tracking data as needed.

As a result of the determination of Needs Assistance, Birth to Three formally engages continuous technical assistance, through; IDC, DASYS, ECTA, OSEP, Delaware Department of Education (DDOE) / Office of Early Learning (OEL) and independent contracted consultants.

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.

Delaware has received technical assistance from ECTA's Early Childhood Personnel Center (ECPC) and participated in ECPC leadership institutes to support a birth to five comprehensive systems professional development plan to address training and professional development needs in early intervention and early childhood systems. This plan is currently being reviewed by Delaware stakeholders to assess this cross sector sustainable personnel and professional development system for all programs serving young children, in order to sustain a qualified work force. The Program actively participates in the Early Childhood Early Intervention Professional Development Community of Practice (ECEIPDCoP), and National Service Coordinators Training Workgroup to address training needs of early intervention service coordinators.

In addition, the Program also collaborates with Regional Program – CDW leadership in the hiring of all Early Childhood Special Educators (ECSE) providing services to infants and toddlers with disabilities that participate in early intervention services in Delaware. The Program has developed a Personnel Standards and Guidelines Matrix that ensures all ECSEs have appropriate collegiate certification and professional experience with a focus on infants and toddlers with special needs, and their families.

Stakeholder Involvement:

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

In FFY 2019, the Program focused much of its work on results-based accountability and the extensive input of stakeholders in the previous year. The Program solicited ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Birth to Three and CDW share federal and state level reporting data with stakeholders. The onset of COVID-19 in March of 2020 presented challenges for conducting meetings face to face. Birth to Three – Administration and stakeholders made the decision to move all ICC meetings to a virtual setting until it was safe to change back to in person meetings. During the ICC meetings held in January, July, September and October, the Birth to Three program shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in APR Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://www.dhss.delaware.gov/dhss/dms/epqc/birth3/>

The Birth to Three – Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is lead with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A culmination of all calls is created to distribute during each quarterly ICC Meeting.

The Program actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. The Program collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children by 25% within 60 months (July 2021). In addition, the Program Part C Coordinator is a governor-appointed member of the Early Hearing Detection and Intervention Advisory Board (EHDI) and The Governor's Advisory Council for Exceptional Children (GACEC) and is an active participant on the State Council for Persons with Disabilities.

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team.

The SSIP Core Leadership Team represents stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met in-person in early 2020 and then established bi-weekly virtual meetings in response to COVID-19 restrictions. The Birth to the Three Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the DEC RP they observe in practice with their children

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

YES

Reporting to the Public:

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

The Program reports to the public on the performance of each Regional Program on the targets in the SPP/APR as soon as practicable, but not later than 120 days following the submission of its FFY APR as required by 34 CFR §303.702(b)(1)(i)(A).

These reports are posted on the Program website at <https://www.dhss.delaware.gov/dhss/dms/epqc/birth3/>

A complete copy of the Program's SPP, including any revisions, and the APR are located on the Birth to Three website at (<https://www.dhss.delaware.gov/dhss/dms/epqc/birth3/>)

The Program reports on the following:

- A. Current data;
- B. Current data performance in relation to state targets and the two Regional Programs using percentage measurements;
- C. Description of whether the Regional Program met the target, made progress or slipped.

The Regional Program Performance Report also includes:

Data are generated from the following sources:

- A. DHSSCares data system;
- B. Family Outcomes Survey;
- C. Onsite monitoring;
- D. Table 1 Report of Children Receiving Early Intervention Services in Accordance with Part C; and,
- E. Table 2 Report of Program Setting Where Early Intervention Services are Provided to Children with Disabilities and Their Families in Accordance with Part C

Per section 508 and Section 255 of the Rehabilitation Act of 1973, each report is completed within 508 compliance to be visually safe and accessible for individuals with disabilities

Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies, and evidence-based practices that were implemented by the State and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State's capacity to improve its SiMR data. If, in its FFY 2019 SPP/APR, the State is not able to demonstrate progress in implementing its coherent improvement strategies, including progress in the areas of infrastructure improvement strategies or the implementation of evidence-based practices with fidelity, the State must provide its root cause analysis for each of these challenges.

OSEP notes that one or more of the attachments included in the State's FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2018 SPP/APR

Intro - OSEP Response

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

The State reported that, due to the circumstances created by the COVID-19 pandemic and resulting interruption of EIS programs and services, the State experienced challenges with implementation of Indicator 11 and associated data collection activities.

OSEP issued a monitoring report to the State on January 19, 2021 and is currently reviewing the State's responses submitted on April 23 and June 1, 2021 and will respond under separate cover.

Intro - Required Actions

The State must provide the FFY 2020 required data for Indicator 11, including the State's progress in implementing the State Systemic Improvement Plan, in the FFY 2020 SPP/APR.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	81.28%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	76.08%	79.00%	79.75%	64.54%	55.33%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
217	295	55.33%	100%	82.37%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.

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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).

Having corrected the calculation for timely services, based on information provided during the December 2019 OSEP DMS visit, the state determined in its FFY 2018 APR, and now determines, the definition of timely service delivery to be that each service will start within 30 days of the written parental consent which is indicated as a signature on the IFSP (Section 12). The Program calculates timeliness by the time period elapsed between the date the parent consents to the services in the IFSP and the actual start date of the service.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Annual chart monitoring occurred in March through June 2020. Audit reviews were conducted for both Regional Programs – Child Development Watch Kent/Sussex and New Castle, to ascertain the level of compliance of service delivery timelines.

If needed, provide additional information about this indicator here.

Charts were randomly selected using the caseload report of each Regional Program staff person managing a case. As in previous APRs, included in this calculation are children whom Delaware has identified the cause for the delay as exceptional family circumstances documented in the child's record. The numbers of these children are included in both the numerator and denominator when calculating compliance.

During FFY 2019, at least 5 charts of every Family Service Coordinator were randomly reviewed (if a Coordinator had fewer than 5 cases all cases were reviewed). A total of 295 charts were reviewed; 135 cases were managed by Regional Program – Kent/Sussex and 160 cases were managed by Regional Program – New Castle. All charts were monitored for timely service delivery.

Of those 295 charts, 217 (73.56%) children received all their services within the 30-day state-designated timeline. An additional 26 (8.81%) children experienced a service delay as a result of exceptional family circumstances. The exceptional family circumstances were all documented in the child's early intervention record, and were defined as 8 families requesting a delay of services to a time after the 30 time period, 1 family cancelled the initial visit and requested a date after the timeline had expired, 1 family was not available when the early intervention provider showed up at their home. 4 families refused services after the referral had been made to the early intervention service provider, 1 was difficult to contact to make arrangements for the initial visit, 1 family had lost contact with the provider and the FSC, and 6 families chose to delay services due to COVID-19. Delaware has been including exceptional family circumstances in both the numerator and the denominator. This resulted in an 82.37% (243/295) compliance rate. This is a significant increase from FFY18's 55.33% compliance rate.

A total of 52 families had delays in services not related to exceptional family circumstances. Families of 20 infants/toddlers experienced delays due to services not being available through the Regional External Early Intervention Service Providers. The data showed that for the remaining 32 families, 3 were unable to be calculated appropriately due to data entry error, and 29 were due to Regional Program staff late scheduling.

While the onset of COVID-19 occurred during this monitoring period, the data showed little influence from it. The Program anticipates that during annual chart review for the FFY20 APR data, it is expected to see a marked influence from COVID-19.

For the 52 instances of noncompliance identified in FFY2019 for each of the two Regional Programs, findings of noncompliance have been issued and Program Corrective Action Plans (pCAPS) are required. Correction of noncompliance based on FFY 2019 data will be reported in the FFY2020 APR which will be submitted on February 1, 2022.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

1 - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR and also report valid correction data consistent with OSEP Memo 09-02. OSEP also will address its December 2019 monitoring visit under separate cover.

Response to actions required in FFY 2018 SPP/APR

In its initial review of the State's FFY 2018 data for this indicator, OSEP stated that those data were not valid and reliable. In its November 24, 2020 revised 2020 Determination Letter, OSEP concluded that the State's FFY 2018 data for this indicator were in fact valid and reliable.

Although the FFY 2018 data for both Regional Programs showed less than 100% compliance for this indicator, the Program did not issue any formal written findings of noncompliance based on the FFY 2018 data for this indicator.

The Program has issued written findings of noncompliance, based upon FFY 2019 data in January 2021 (during FFY 2020), and will report on correction of those findings in the FFY 2020 APR, due in February 2022.

1 - OSEP Response

In response to actions required in the FFY 2018 APR, the State reported that "[t]he Program has issued written findings of noncompliance, based upon FFY 2019 data in January 2021 (during FFY 2020), and will report on correction of those findings in the FFY 2020 APR, due in February 2022". OSEP notes that the State referenced FFY 2019 data instead of FFY 2018 data in its narrative.

1 - Required Actions

Because the State issued findings of noncompliance, based on FFY 2018 data, in January 2021, the State must report on the status of correction of those findings in FFY 2020 SPP/APR due February 1, 2022. Additionally, because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings issued in January 2021, or with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	85.12%

FFY	2014	2015	2016	2017	2018
Target>=	90.01%	90.02%	90.03%	90.04%	90.05%
Data	95.38%	94.72%	96.21%	96.52%	95.41%

Targets

FFY	2019
Target>=	95.41%

Targets: Description of Stakeholder Input

In FFY 2019, the Program focused much of its work on results-based accountability and the extensive input of stakeholders in the previous year. The Program solicited ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Birth to Three and CDW share federal and state level reporting data with stakeholders. The onset of COVID-19 in March of 2020 presented challenges for conducting meetings face to face. Birth to Three – Administration and stakeholders made the decision to move all ICC meetings to a virtual setting until it was safe to change back to in person meetings. During the ICC meetings held in January, July, September and October, the Birth to Three program shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in APR Indicators 1, 7, 8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://www.dhss.delaware.gov/dhss/dms/epqc/birth3/>

The Birth to Three – Administration conducts weekly Executive Interagency Coordinating Council committee “opportunity” calls to allow for continuous engagement with stakeholders. Each call is lead with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A culmination of all calls is created to distribute during each quarterly ICC Meeting.

The Program actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. The Program collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children by 25% within 60 months (July 2021). In addition, the Program Part C Coordinator is a governor-appointed member of the Early Hearing Detection and Intervention Advisory Board (EHDl) and The Governor's Advisory Council for Exceptional Children (GACEC) and is an active participant on the State Council for Persons with Disabilities.

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team.

The SSIP Core Leadership Team represents stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team

met in-person in early 2020 and then established bi-weekly virtual meetings in response to COVID-19 restrictions. The Birth to the Three Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the DEC RP they observe in practice with their children

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,083
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	1,133

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
1,083	1,133	95.41%	95.41%	95.59%	Met Target	No Slippage

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

In FFY 2019, the Program focused much of its work on results-based accountability and the extensive input of stakeholders in the previous year. The Program solicited ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

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Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2008	Target>=	48.10%	48.20%	48.30%	48.40%	48.50%
A1	46.63%	Data	63.28%	61.15%	64.89%	63.79%	63.74%
A2	2008	Target>=	40.10%	40.20%	40.30%	40.40%	40.50%
A2	48.73%	Data	49.80%	50.41%	53.63%	41.46%	38.00%
B1	2008	Target>=	50.10%	50.20%	50.30%	50.40%	50.50%
B1	48.39%	Data	75.94%	74.22%	70.44%	67.68%	69.25%
B2	2008	Target>=	45.10%	45.20%	45.30%	45.40%	45.50%
B2	41.53%	Data	48.58%	50.41%	49.79%	36.15%	34.62%
C1	2008	Target>=	50.10%	50.20%	50.30%	50.40%	50.40%
C1	50.54%	Data	65.71%	71.23%	65.30%	65.28%	67.05%
C2	2008	Target>=	45.10%	45.20%	45.30%	45.40%	45.50%
C2	47.46%	Data	53.85%	55.31%	50.62%	42.61%	41.25%

Targets

FFY	2019
Target A1>=	48.60%
Target A2>=	49.24%
Target B1>=	50.60%

Target B2>=	45.60%
Target C1>=	51.06%
Target C2>=	47.98%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

929

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	1	0.11%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	254	27.34%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	309	33.26%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	233	25.08%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	132	14.21%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	542	797	63.74%	48.60%	68.01%	Met Target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	365	929	38.00%	49.24%	39.29%	Did Not Meet Target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	4	0.43%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	253	27.23%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	360	38.75%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	226	24.33%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	86	9.26%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	586	843	69.25%	50.60%	69.51%	Met Target	No Slippage

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 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	312	929	34.62%	45.60%	33.58%	Did Not Meet Target	Slippage

Provide reasons for B2 slippage, if applicable

FFY 2019 saw a small decrease in reported eligibility being based on established condition. Of the 929 children with completed COS, 167 (17.98%) had an existing medical condition which may have affected the developmental trajectory of the child. In comparison to the FFY18 data where 165 (19.90%) of the 829 children with completed COS, had an existing medical condition which affected their development.

While the number of FFY19 COS completed was 10.76% higher the FFY18 COS, the onset of COVID-19 impacted the way data were captured. Coordinators, Assessors and external Early Intervention Service Providers were unable to provide the face to face interaction with families in order to obtain their information for the EXIT COS process. EXIT COS were still able to be completed via telehealth intervention which was a new endeavor for both families and staff.

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	4	0.43%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	252	27.13%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	303	32.62%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	324	34.88%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	46	4.95%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	627	883	67.05%	51.06%	71.01%	Met 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	370	929	41.25%	47.98%	39.83%	Did Not Meet Target	Slippage

Provide reasons for C2 slippage, if applicable

FFY 2019 saw a small decrease in reported eligibility being based on established condition. Of the 929 children with completed COS, 167 (17.98%) had an existing medical condition which may have affected the developmental trajectory of the child. In comparison to the FFY18 data where 165 (19.90%) of the 829 children with completed COS, had an existing medical condition which affected their development.

While the number of FFY19 COS completed was 10.76% higher the FFY18 COS, the onset of COVID-19 impacted the way data were captured. Coordinators, Assessors and external Early Intervention Service Providers were unable to provide the face to face interaction with families in order to obtain their information for the EXIT COS process. EXIT COS were still able to be completed via telehealth intervention which was a new endeavor for both families and staff.

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	1,090
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.	215

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 COS is completed as part of the IFSP process at the Initial IFSP meeting and after the completions of Transition activities. Information for the initial rating is collected during the MDE and MDA process, using a variety of developmental assessment tools, observation, and family report; and the exit rating is based on the most current assessments of the providers, observation, and family report. The IFSP team uses the Child Outcomes Summary (COS) process to collect and report child outcomes data to the federal government.

The Program runs a canned report that populates data based on the criteria necessary to complete this indicator. Periodic review is conducted to ensure valid and reliable child outcome data are entered.

Provide additional information about this indicator (optional)

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2006	Target>=	90.40%	90.80%	91.20%	91.60%	92.00%
A	46.30%	Data	91.95%	92.12%	89.18%	93.75%	92.23%
B	2006	Target>=	93.40%	93.80%	94.20%	94.60%	95.00%
B	49.00%	Data	95.34%	96.27%	97.39%	97.37%	96.11%
C	2006	Target>=	93.40%	93.80%	94.20%	94.60%	95.00%
C	55.90%	Data	97.88%	97.10%	94.78%	97.04%	96.82%

Targets

FFY	2019
Target A>=	92.40%
Target B>=	95.40%
Target C>=	95.40%

Targets: Description of Stakeholder Input

In FFY 2019, the Program focused much of its work on results-based accountability and the extensive input of stakeholders in the previous year. The Program solicited ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as

methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Birth to Three and CDW share federal and state level reporting data with stakeholders. The onset of COVID-19 in March of 2020 presented challenges for conducting meetings face to face. Birth to Three – Administration and stakeholders made the decision to move all ICC meetings to a virtual setting until it was safe to change back to in person meetings. During the ICC meetings held in January, July, September and October, the Birth to Three program shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in APR Indicators 1, 7, 8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://www.dhss.delaware.gov/dhss/dms/epqc/birth3/>

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The Program actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware’s children and their families. The Program collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State’s three-year old children by 25% within 60 months (July 2021). In addition, the Program Part C Coordinator is a governor-appointed member of the Early Hearing Detection and Intervention Advisory Board (EHDl) and The Governor’s Advisory Council for Exceptional Children (GACEC) and is an active participant on the State Council for Persons with Disabilities.

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team.

The SSIP Core Leadership Team represents stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met in-person in early 2020 and then established bi-weekly virtual meetings in response to COVID-19 restrictions. The Birth to the Three Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the DEC RP they observe in practice with their children

FFY 2019 SPP/APR Data

The number of families to whom surveys were distributed	846
Number of respondent families participating in Part C	283
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	261
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	283
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	272
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children’s needs	283
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	274
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	283

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	92.23%	92.40%	92.23%	Did Not Meet Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	96.11%	95.40%	96.11%	Met Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	96.82%	95.40%	96.82%	Met Target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

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

This year, the Center for Research in Education & Social Policy (CRESP) collected survey information for the Program from August through September 2019. This family satisfaction survey was conducted via telephone, Internet, and mail with a nonprobability sampling method. The survey included one respondent per family, and the survey questions covered the period during which the child received services (i.e., 2019).

A total of 283 families successfully completed the 2019 Family Survey with 50.9% of the families from the northern region and 49.1% of the families from the southern region. The response rate this year was 33.5%, which exceeded the 30% response rate goal.

Families were asked about their overall satisfaction with Birth to Three Regional Programs – CDW services as well as their perceptions in seven clustered areas: a) changes that occurred in their families, b) changes in their children’s development, c) family-program relations, d) opportunities to jointly make decisions with programs about the services for their children, e) program accessibility and responsiveness, f) changes in quality of life, and g) understanding of children’s social-emotional development.

The entire population of 846 families participating in the Birth to Three Regional Programs – CDW were included in the calculations. CRESP used volunteer sampling to collect data from families by reaching out to all families in the program by mail and/or by telephone. Like previous years, the goal was to have at least 30% of the total number of families receiving services complete the survey. Of the 846 families, a total of 283 families completed the survey either by telephone or online. These families represent 33.5% of the total number of families in the database provided (compared to 42.8% last year). Of these 283 families, 50.9% were from the northern region of the state (New Castle County) and 49.1% from the southern region of the state (Kent and Sussex Counties). The demographic composition was as follows: 57.1% reporting Caucasian alone, 19.4% reporting African American alone, 4.9% reporting Asian alone, 8.2% reporting other race alone, and 10.4% reporting two or more races. Of the families completing the survey, 25.9% indicated that they have Hispanic or Latino ethnicity. Information about the race/ethnicity of the children from families who participated in the Family Survey is compared to the rates based on the 2018 Child Count data provided by the Program.

Of the families that completed the survey, 63.6% of the families have male children enrolled and 36.4% of the families have female children enrolled in the Program. This represents a similar proportion compared to last year. The most recent Birth to Three Early Intervention Program enrollment data indicates that there are 67.4% males and 32.6% females enrolled in the program. See attached 2018 Family Survey Report

Provide additional information about this indicator (optional)

Due to contractual challenges, it was not possible to collect data for this indicator during FFY 2018. The data reported in the FFY 2018 APR were collected after June 30, 2019 (during August and September 2019) and were, therefore, FFY 2019 data. That is the reason why the data reported in the FFY 2018 APR are the same as the FFY 2019 data reported in this APR. The data collected in 2020 between September and December will be reported in the FFY2020 APR which will be submitted February 1, 2022.

4 - Prior FFY Required Actions

Response to actions required in FFY 2018 SPP/APR

4 - OSEP Response

OSEP cannot determine slippage because the State reported that there were no data collected in FFY 2018. The State reported the following, "[d]ue to contractual challenges, it was not possible to collect data for this indicator during FFY 2018. The data reported in the FFY 2018 APR were collected after June 30, 2019 (during August and September 2019) and were, therefore, FFY 2019 data. That is the reason why the data reported in the FFY 2018 APR are the same as the FFY 2019 data reported in this APR. The data collected in 2020 between September and December will be reported in the FFY2020 APR which will be submitted February 1, 2022."

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts Metadata and Process System (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 and compare the results to the target and to national data. The data reported in this indicator should be consistent with the State's reported 618 data reported in Table 1. If not, explain why.

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.98%

FFY	2014	2015	2016	2017	2018
Target >=	1.01%	1.02%	1.02%	1.04%	1.05%
Data	1.15%	1.33%	1.14%	1.03%	0.83%

Targets

FFY	2019
Target >=	1.06%

Targets: Description of Stakeholder Input

In FFY 2019, the Program focused much of its work on results-based accountability and the extensive input of stakeholders in the previous year. The Program solicited ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Birth to Three and CDW share federal and state level reporting data with stakeholders. The onset of COVID-19 in March of 2020 presented challenges for conducting meetings face to face. Birth to Three – Administration and stakeholders made the decision to move all ICC meetings to a virtual setting until it was safe to change back to in person meetings. During the ICC meetings held in January, July, September and October, the Birth to Three program shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in APR Indicators 1, 7, 8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://www.dhss.delaware.gov/dhss/dms/epqc/birth3/>

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The Program actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. The Program collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children by 25% within 60 months (July 2021). In addition, the Program Part C Coordinator is a governor-appointed member of the Early Hearing Detection and Intervention Advisory Board (EHDIA) and The Governor's Advisory Council for Exceptional Children (GACEC) and is an active participant on the State Council for Persons with Disabilities.

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The SSIP Core Leadership Team represents stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met in-person in early 2020 and then established bi-weekly virtual meetings in response to COVID-19 restrictions. The Birth to the Three Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the DEC RP they observe in practice with their children

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	94
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	10,618

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
94	10,618	0.83%	1.06%	0.89%	Did Not Meet Target	No Slippage

Compare your results to the national data

Based on the 2018 ITCA Child Count Data Charts, the State of Delaware's children Birth to 1 year old with IFSPs are lower than the national average.

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts Metadata and Process System (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 and compare the results to the target and to national data. The data reported in this indicator should be consistent with the State's reported 618 data reported in Table 1. If not, explain why.

6 - Indicator Data

Baseline Year	Baseline Data
2005	2.94%

FFY	2014	2015	2016	2017	2018
Target >=	2.71%	2.72%	2.73%	2.74%	2.75%
Data	2.91%	3.20%	3.31%	3.31%	3.27%

Targets

FFY	2019
Target >=	2.76%

Targets: Description of Stakeholder Input

In FFY 2019, the Program focused much of its work on results-based accountability and the extensive input of stakeholders in the previous year. The Program solicited ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

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Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	1,133
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	32,350

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
1,133	32,350	3.27%	2.76%	3.50%	Met Target	No Slippage

Compare your results to the national data

Based on the 2018 ITCA Child Count Data Charts, the State of Delaware's birth to three population is lower than the national average.

Provide additional information about this indicator (optional)**6 - Prior FFY Required Actions**

None

6 - OSEP Response**6 - Required Actions**

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	89.90%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	91.87%	93.50%	89.67%	82.11%	92.67%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
196	295	92.67%	100%	86.78%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

There was an increase of delays due to circumstances other than exceptional family circumstances documented in the child's record. The reason for the 6.36% slippage was due to the Regional Program – CDW staff scheduling late either the evaluation, the assessment, the family-directed assessment or the initial IFSP meeting. While the onset of COVID-19 occurred during this monitoring period, the data showed little influence from it. The Program anticipates that during annual chart review for the FFY20 APR data, it is expected to see a marked influence from COVID-19.

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.

60

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Both Regional Programs – CDW (Kent/Sussex and New Castle) -- are monitored annually. A report run in DHSSCares, the data system for the Birth to Three program in Delaware, identified all children who were Part C eligible in March and April 2020.

As in previous APRs, DHSS included in this calculation, children for whom the Program has identified the cause for the delay as exceptional family circumstances documented in the child's record. The numbers of these children are included in both the numerator and denominator when calculating compliance.

During FFY2019, at least 5 charts of every Family Service Coordinator were randomly reviewed (if a staff had fewer than 5 cases all cases were reviewed). A total of 295 charts were reviewed, 135 cases were managed by Regional Program – CDW Kent Sussex. Regional Program – CDW New Castle managed 160 cases. All charts that were audited included IFSPs and Services.

State data indicated that while 66.44% (196/295) of families had an IFSP meeting conducted within 45 days, 86.77% (256/295) of families were provided an IFSP meeting date within the required timeline or the delay was due to exceptional family circumstances documented in the child's record. More specifically, 60 initial IFSP meetings were conducted outside the 45-day timeline due to exceptional family circumstances. For those families, 5 families had reasons of child hospitalization or child condition which caused the delay; 5 families had occurrences of the child or family being ill causing the initial IFSP to be rescheduled; 15 families were difficult to contact; 1 family did not show for the initial IFSP meeting, 33 families requested that initial IFSP be completed after the 45 day timeline expired and a Family Service Coordinator lost complete contact with 1 family causing the delay in conducting the initial IFSP

The data shows that the remaining 39 (13.22%) of families who did not receive an initial IFSP within 45 days of the referral were due to FSC late scheduling of 9 (3.05%) and 30 (10.17%) were due to the availability of the Program/FSC to conduct the meeting with the family.

The Program was able to determine that of the 39 families who did not receive an initial IFSP within 45 days of the completed referral date due to non-exceptional family circumstances, 19 were conducted within 60 days (15 days beyond the 45-day timeline); 14 were conducted within 75 days (30 days beyond the 45-day timeline); 5 were conducted within 105 days (60 days beyond the 45-day timeline) and 1 was conducted within 107 days (62 days beyond the 45-day timeline).

Provide additional information about this indicator (optional)

During FFY 2019, at least 5 charts of every Family Service Coordinator were randomly reviewed (if a staff had fewer than 5 cases, all cases were reviewed). A total of 295 charts were reviewed; 135 cases were managed by Regional Program – Kent/Sussex and 160 cases were managed by Regional Program – New Castle. These child records were selected as an accurate representation of the data related to the measure of Indicator 7 for all enrolled children for the year, based on race, ethnicity and gender.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

7 - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR and also report valid correction data consistent with OSEP Memo 09-02. OSEP also will address its December 2019 monitoring visit under separate cover.

Response to actions required in FFY 2018 SPP/APR

In its initial review of the State's FFY 2018 data for this indicator, OSEP stated that those data were not valid and reliable. In its November 24, 2020 revised 2020 Determination Letter, OSEP concluded that the State's FFY 2018 data for this indicator were in fact valid and reliable.

Although neither Regional Program had 100% compliance for FFY 2018, the Program did not issue any written findings of noncompliance during FFY 2018 or based upon the FFY 2018 data.

The Program has issued written findings of noncompliance, based upon FFY 2019 data, in January 2021 (during FFY 2020), and will report on correction of those findings in the FFY 2020 APR, due in February 2022.

7 - OSEP Response

In response to actions required in the FFY 2018 APR, the State reported that "[t]he Program has issued written findings of noncompliance, based upon FFY 2019 data in January 2021 (during FFY 2020), and will report on correction of those findings in the FFY 2020 APR, due in February 2022." OSEP notes that the State referenced FFY 2019 data instead of FFY 2018 data in its narrative.

7 - Required Actions

Because the State issued findings of noncompliance, based on FFY 2018 data, in January 2021, the State must report on the status of correction of those findings in FFY 2020 SPP/APR due February 1, 2022. Additionally, because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings issued in January 2021, or with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	85.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	91.56%	91.36%	88.57%	94.85%	100.00%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
295	295	100.00%	100%	100.00%	Met Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

0

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Annual chart reviews were conducted from March 2020 through June 2020.

Both Regional Programs – CDW (Kent/Sussex and New Castle) are monitored annually. A report run from DHSSCares, the data system for the Birth to Three program in Delaware, identified children who had an active IFSP who were in the transition process on February 1, 2020.

As in previous APRs, included in this calculation are children whom the Program has identified the cause for the delay as exceptional family circumstances documented in the child's record. The numbers of these children are included in both the numerator and denominator when calculating compliance.

During FFY 2019, at least 5 charts of every Family Service Coordinator were randomly reviewed (if a staff had fewer than 5 cases all cases were reviewed). A total of 295 charts were reviewed, 135 cases were managed by Regional Program – CDW Kent Sussex. Regional Program – CDW New Castle managed 160 cases. All charts that were audited included IFSPs and Services

All 295 of the charts audited were identified as children with disabilities exiting Part C where the IFSP included transition steps and services at least 90 days before the child's 3rd birthday. Transition steps were documented in 100% of the charts at least 90 days before the toddler's birthday. The date on which transition steps and services were discussed with parents, and transition steps and services were added to the IFSP, were noted in the progress notes as well as documented in the transition section of the IFSP, showing that transition steps and services were included in IFSPs for all toddlers at least 90 days before toddlers' third birthdays.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8A - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR and also report valid correction data consistent with OSEP Memo 09-02. OSEP also will address its December 2019 monitoring visit under separate cover.

Response to actions required in FFY 2018 SPP/APR

In its initial review of the State's FFY 2018 data for this indicator, OSEP stated that those data were not valid and reliable. In its November 24, 2020 revised 2020 Determination Letter, OSEP concluded that the State's FFY 2018 data for this indicator were in fact valid and reliable.

8A - OSEP Response

8A - Required Actions

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

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

Instructions

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
1,059	1,059	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

Describe the method used to collect these data

An Operations Agreement exists between the Department of Health and Social Services, Division of Management Services, Division of Public Health and the Delaware Department of Education. This agreement specifically defines the roles of the two regional Department of Education (DOE)/Regional Program - CDW liaisons that are employed by DOE. These individuals act as liaisons between the Regional Programs and the local school districts in order to facilitate transition.

This year, notification reports were sent through the DOE liaisons to the local school districts on 100% of the 1059 children identified as potentially eligible for Part B services.

Notification is distributed on directory information for children who reside in each LEA (local school district) and will shortly reach the age of eligibility for preschool services under Part B, according to regulations under 303.209(b)(1) and to the SEA. Delaware included these requirements of IDEA 2004 and associated regulations when updating the Interagency Agreement for the Early Intervention System under Part C of the Individuals with Disabilities Education Improvement Act of 2004.

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

NO

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

State database

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

The full reporting year ran from July 2019 through June 2020.

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

All children who were over 26 months, were Part C Eligible and had an active IFSP had demographic information shared with the State and School Districts to ensure that notifications occurred at least 90 days prior to but no more than 6 months, their third birthday

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8B - Prior FFY Required Actions

Response to actions required in FFY 2018 SPP/APR

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	75.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	86.39%	86.25%	88.41%	81.23%	93.33%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
147	179	93.33%	100%	97.06%	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.

9

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

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Annual chart reviews were conducted from March 2020 through June 2020.

Both Regional Programs – CDW (Kent/Sussex and New Castle) are monitored annually for transition timelines. A report run in DHSSCares, the data system for the Birth to Three program in Delaware, identified children who had an active IFSP and were in the transition process on February 1, 2020 .

As in previous APRs, included in this calculation are children whom the Program has identified the cause for the delay as exceptional family circumstances documented in the child's record. The numbers of these children are included in both the numerator and denominator when calculating compliance.

During FFY2019, at least 5 charts of every Family Service Coordinator were randomly reviewed (if a staff had fewer than 5 cases all cases were reviewed). A total of 295 charts were reviewed, 135 cases were managed by Regional Program – CDW Kent Sussex. Regional Program – CDW New Castle managed 160 cases. All charts that were audited included IFSPs and Services.

During FFY 2019, 295 charts were randomly selected using the caseload report of each Regional Program – CDW Family Service Coordinator. Of those 295 randomly selected cases, 179 were age-appropriate for transition criteria set to measure compliance in this area. According to the data, 23 of the 179 did not receive a transition within the 9 month - 90 day transition timeline. FFY 2019 data were calculated the same as in previous years. As in previous APRs, included in this calculation are children whom Delaware has identified the cause for the delay as exceptional family circumstances. Exceptional family circumstances contributed to 18 family not receiving a transition in a timely manner. Those exceptional family circumstances were as follows; 6 families had referrals made to the Regional Program less than 45 days from the child's 3rd birth date, 1 family requested to schedule the conference outside of the timeline, 1 family initially refused the transition conference, however subsequently decided to commence with it, 5 families were difficult to contact and 5 families had difficulty meeting timelines due to concerns surrounding COVID-19 The remaining 5 families had a delayed transition meeting due to late scheduling by Regional Program staff.

Provide additional information about this indicator (optional)

DHSS has revised from zero to nine the number of toddlers for whom the parent did not provide approval for the transition conference. These nine children were determined eligible for Part B preschool education services (as children who were eligible for Part B services based on a birth mandate designation) prior to the children reaching 27 months of age. The parents requested that a transition conference be conducted prior to the age of 27 months, and declined to participate in an additional transition conference after the child reached the age of 27 months. Therefore, these nine children were not included in the numerator and denominator for this indicator. Due to this change, the number of children whose family provided approval for a transition conference to be conducted between 9 months and 90 days from the child's 3rd birthday changed from 179 to 170.

The data changed from 32 instances of families not having a transition conference 9 months to 90 days before the child's 3rd birthday to 23 instances. There were 18 instances attributed to exceptional family circumstances.

Ultimately, the percentage of families conducting transition conferences between 9 months and 90 days of the child's 3rd birthday changed from 97.21% to 97.06% compliance.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8C - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR and also report valid correction data consistent with OSEP Memo 09-02. OSEP also will address its December 2019 monitoring visit under separate cover.

Response to actions required in FFY 2018 SPP/APR

In its initial review of the State's FFY 2018 data for this indicator, OSEP stated that those data were not valid and reliable. In its November 24, 2020 revised 2020 Determination Letter, OSEP concluded that the State's FFY 2018 data for this indicator were in fact valid and reliable.

Although neither Regional Program had 100% compliance for this indicator for FFY 2018, the Program did not issue any written findings of noncompliance during FFY 2018 or based upon FFY 2018 data.

The Program has issued written findings of noncompliance, based upon FFY 2019 data, in January 2021 (during FFY 2020), and will report on correction of those findings in the FFY 2020 APR to be submitted in February 2022.

8C - OSEP Response

The State reported that "[six] families had referrals made to the Regional Program less than 45 days from the child's 3rd birth date" and that these families were delayed in receiving timely transition services due to exceptional family circumstances. OSEP reminds the State that exceptional family circumstances, as defined in 34 CFR §303.310, refer to clear circumstances outside the State LA's or EIS provider's control, such as family illness or a natural disaster, that do not permit the underlying activity to occur and thus the child and family are unavailable as a practical matter. It is unclear how referrals being made to the Regional Program less than 45 days from the child's 3rd birthday qualify as exceptional family circumstances.

8C - Required Actions

When reporting data for this indicator in the FFY 2020 SPP/APR, the State must clarify the circumstances in which it identifies the cause for the delay as exceptional family circumstances, as defined in 34 C.F.R. § 303.310(b).

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

The State of Delaware has adopted Part C due process procedures under section 639 of the IDEA.

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 = $((2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1) \text{ times } 100.$

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

In FFY 2019, the Program focused much of its work on results-based accountability and the extensive input of stakeholders in the previous year. The Program solicited ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Birth to Three and CDW share federal and state level reporting data with stakeholders. The onset of COVID-19 in March of 2020 presented challenges for conducting meetings face to face. Birth to Three – Administration and stakeholders made the decision to move all ICC meetings to a virtual setting until it was safe to change back to in person meetings. During the ICC meetings held in January, July, September and October, the Birth to Three program shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in APR Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://www.dhss.delaware.gov/dhss/dms/epqc/birth3/>

The Birth to Three – Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is lead with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A culmination of all calls is created to distribute during each quarterly ICC Meeting.

The Program actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. The Program collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children by 25% within 60 months (July 2021). In addition, the Program Part C Coordinator is a governor-appointed member of the Early Hearing Detection and Intervention Advisory Board (EHDI) and The Governor's Advisory Council for Exceptional Children (GACEC) and is an active participant on the State Council for Persons with Disabilities.

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team.

The SSIP Core Leadership Team represents stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met in-person in early 2020 and then established bi-weekly virtual meetings in response to COVID-19 restrictions. The Birth to the Three Administration

staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the DEC RP they observe in practice with their children

Historical Data

Baseline Year	Baseline Data
0	0.00%

FFY	2014	2015	2016	2017	2018
Target>=					0.00%
Data					

Targets

FFY	2019
Target>=	0.00%

FFY 2019 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
0	0	0		0.00%		N/A	N/A

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Designated Lead Agency Director

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

Name:

Hope Sanson

Title:

Part C Data Manager

Email:

Hope.Sanson@Delaware.Gov

Phone:

302-296-8659

Submitted on:

04/27/21 3:46:15 PM