

# **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**

**Mississippi**



**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 Mississippi State Department of Health (MSDH) is the lead agency responsible for administering Part C of IDEA, known as the Mississippi First Steps Early Intervention Program (MSFSEIP). The MSDH has organized the State's 82 counties into three public health regions, each of which operates multiple Local FSEIP responsible for ensure all eligible infants and toddlers and their families receive early intervention services. The Northern Region has two Local FSEIPs and the Central and Southern Regions have three Local FSEIPs each, for a total of eight Local FSEIPs. The MSFSEIP is advised in program administration by the Mississippi State Interagency Coordinating Council (MSICC) whose members, along with other stakeholders, participate on workgroups providing feedback on systemic improvement efforts.

During FFY2018, the MSDH implemented new procedures for vendor agreements with early intervention service providers due to a new state contract law and a new electronic approval routing system. These changes resulted in many agreements not being implemented in a timely manner, leading most Local FSEIPs to fail to meet 45-Day timelines (Indicator 7) and to provide Timely Services (Indicator 1), necessitating extensive provision of compensatory services and slippage in Indicators 4 [4A, 4B] (Family Outcomes) and 7 (45-Day Timeline). As a result of these challenges, in FFY2019, oversight for the MSFSEIP system was streamlined with a single line of oversight for personnel in the State and Regional offices. Throughout FFY2019, the MSFSEIP state office provided general supervision and technical assistance to each of the Local FSEIPs, supported the collecting and reporting of data in a timely manner, and provided guidance to ensure compliance with federal regulations. However, in March 2020, the state issued a stay-at-home order, resulting in the suspension of in-person service delivery. The MSFSEIP issued temporary procedures to ensure the continued delivery of services via teleintervention approaches and the use of digital signatures, as allowed under state law, based on guidance from the Office of Special Education Programs (OSEP) and OSEP-funded Technical Assistance Centers.

In FFY2019, all Local FSEIPs were monitored based on data collected between January and March of 2020. Findings of noncompliance were issued for Indicators 1 (Timely Services), 7 (45-Day), 8A (Transition Steps and Services), 8B (Transition Notification), and 8C (Transition Conference) in June 2020. All monitored Local FSEIPs had new or ongoing finding of noncompliance for all compliance indicators. The MSFSEIP continues to provide technical assistance to the Local FSEIPs to assist them in identifying and addressing root causes of noncompliance and improving their performance for outcomes for children and families. Further, the MSFSEIP and Local FSEIPs continued implementation of systematic improvement efforts to enhance the program infrastructure and to implement evidence-based practices.

Mississippi's determination for FFY2018 was "Needs Assistance" based on ongoing issues with compliance, including failure to correct longstanding noncompliance, and issues with data completeness and both within and across state comparisons of child outcomes. Root cause analyses of noncompliance demonstrated Local FSEIPs were not adequately tracking compliance with federally-required timelines. In Spring 2018, Mississippi requested technical assistance from the IDEA Data Center to assist local programs in using their data to inform improvement efforts, selecting Local FSEIP 5, with longstanding noncompliance on Indicator 1 (Timely Services) as the first focus. This work resulted in the development and implementation of tracking tools to monitor timelines. After further refinement in FFY2018, these tools were mandated for all Local FSEIPs with intensive monitoring of individual Service Coordinators in Local FSEIPs with longstanding noncompliance. Additional tracking tools for monitoring caseloads were also developed at the end of FFY2018. These efforts were continued throughout FFY2019 to promote compliance. After failures to implement and respond to monitoring, the leadership of Local FSEIP 5, the program with longstanding noncompliance, was changed. Due to systemic issues with noncompliance, the MSFSEIP began review and revision of the general supervision system, with anticipation of the implementation of a new data system on July 1, 2020. The MSFSEIP also sought guidance from state contacts from OSEP-funded technical assistance centers. Additional training, technical assistance, and intensive supports were provided to Local FSEIPs with ongoing noncompliance in FFY2019; however, these efforts were interrupted due to the public health emergency and subsequent response.

#### Additional information related to data collection and reporting

#### General Supervision System

##### **The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.**

The MSFSEIP has implemented a general supervision system that includes universal, focused, and targeted monitoring approaches to ensure each Local FSEIP implements all Federal regulations and State policies and procedures for Part C of IDEA. The MSFSEIP monitors Local FSEIPs using a combination of methods including annual self-assessments, annual fiscal audits, annual onsite visits, data reviews (i.e., reviews of data in the Child Registry), desk audits (i.e., reviews of paper records), interviews, observations, and issues identified during dispute resolutions, as applicable.

The MSFSEIP has a Monitoring Coordinator and assigns additional State staff to assist with conducting monitoring reviews, desk audits, interviews, observations, and onsite visits. In addition, Local FSEIPs receive technical assistance from MSFSEIP employees and contractual personnel to address program-specific concerns (see TA Section below). These supports are intended to assist Local FSEIP staff with identifying the root cause(s) of noncompliance within the FSEIP and ensure timely correction of noncompliance. The MSFSEIP takes enforcement actions, as appropriate, against any Local FSEIP that fails to correct noncompliance in a timely manner.

In FFY2019, the MSFSEIP sought guidance from state contacts from OSEP-funded technical assistance centers to review and revision of the general supervision system, with anticipation of the implementation of a new data system on July 1, 2020. This system will enable a more robust and responsive general supervision model to incorporate universal, focused, and targeted TA with the State's general supervision efforts.

#### 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.**

The MSFSEIP provides ongoing technical assistance by identifying Local FSEIP needs and providing general, focused, and targeted TA to local FSEIP and service providers. The MSFSEIP identify Local FSEIP training needs by periodic data analyses, QTA reports, and specific requests for TA. General TA is provided by MSFSEIP staff through monthly conference calls and quarterly Local FSEIP meetings. Focused and targeted TA are provided by MSFSEIP employees and an assigned QTA using a variety of methods, as needed, including via phone and email, onsite visits, observation and feedback sessions, coaching, assisted preliminary desk audits, conference calls, and video-conferences. As needed, personnel will accompany Service

Coordinators and Providers on home visits to offer guidance and support during comprehensive evaluations, Individualized Family Service Plan (IFSP) meetings, and service delivery as well as assist with reviewing paper records and data quality in the electronic Child Registry. Technical assistance is provided to Program and Service Coordinators to identify root cause(s) of noncompliance, develop strategies and activities for any Local FSEIP-developed Corrective Action Plans (CAPs), and implement CAPs.

The MSFSEIP has an Operations Director who oversees the Monitoring Coordinator and QTA. The Operations Director works with national experts on implementing train-the-trainer models of TA service delivery. The Operations Director and Part C Coordinator ensure personnel receive quality professional development and offer supervision and guidance on early intervention best practices via monthly meetings and reviews of monthly reports. The MSFSEIP State personnel have participated in national professional conferences and in TA opportunities provided through OSEP TA Centers. In addition, they engage in ongoing professional development via webinars and Professional Learning Communities (PLCs).

The MSFSEIP is developing a more robust technical assistance model to include universal, focused, and targeted TA to better align with the State's general supervision efforts. The TA system is preparing local coaches and regional training coordinators to support implementation of evidence-based practices in addition to the supports offered by the QTA.

#### **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.**

The MSFSEIP provides annual training to Local FSEIP staff and providers on Federal regulations and State policies and procedures. In addition, the MSFSEIP provides Regional and Local FSEIP trainings on referral procedures, data system and child record maintenance, family rights, evaluation and eligibility determination, IFSP development and revisions, timely services, transition, working with families of children who are deaf/hard of hearing, routines-based model implementation, ongoing child assessments, and financial management.

As a part of the State Systemic Improvement Plan (SSIP), the MSFSEIP's reconstituted Comprehensive System of Personnel Development (CSPD) Leadership Team continued revisions of personnel standards and development of orientation and credentialing procedures for early intervention personnel with support from national experts, OSEP-funded TA Centers, and other State Part C programs. The expanded CSPD Leadership Team supported the MSFSEIP's ability to develop new partnerships to expand professional development opportunities. All training under development includes three levels of support: knowledge development, skill development, and knowledge and skill application. Knowledge development is provided through online training modules and self-study with integrated assessments. Skill development is provided through real-time online or face-to-face training with integrated application exercises. Knowledge and skill application is provided via field-based observation and on-the-job coaching. The progress of all MSFSEIP and Local FSEIP staff and providers will be tracked through these levels of learning experiences. This new approach to professional development will ensure service providers have the knowledge and skills to provide services effectively to improve results for infants and toddlers with disabilities and their families. The MSFSEIP has begun implementing these CSPD initiatives as part of the Phase III of the SSIP.

#### **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).**

The MSFSEIP has multiple avenues to engage stakeholders in advising the program. The State Interagency Coordinating Council (SICC), including SSIP Stakeholders, meets quarterly for a public meeting and more frequently for workgroup activities. The SICC is comprised of parents, service providers, state agency representatives from Health, Education, Human Services, Child Protective Services, Medicaid, and Insurance, representatives from Head Start, the Institute of Higher Learning (IHL), University programs, and advocacy groups, and other community leaders.

On November 14, 2014, the SICC assisted the MSFSEIP in setting the FFY2014-FFY2019 APR targets for Indicators 2, 3, and 4:

Indicator 2: Natural Environment target to set to remain at 95% for FFY2014-FFY2019.

Indicator 3: Child Outcomes:

Summary Statement 1 for Outcomes A - C targets were set to remain at 85% for FFY2014-FFY2019.

Summary Statement 2 for Outcomes A - C targets were set as follow:

A2 – 65% for FFY2014-FFY2019  
B2 – 63% for FFY2014-FFY2015  
B2 – 64% for FFY2016  
B2 – 64.5% for FFY2017  
B2 – 65% for FFY2018  
B2 – 65.5% for FFY2019  
C2 – 63% for FFY2014-FFY2015  
C2 – 63.5% for FFY2016  
C2 – 64% for FFY2017-FFY2019

Indicator 4: Family Survey targets were set at 92% for FFY2014-FFY2019.

On February 13, 2015, the SICC assisted the MSFSEIP in setting APR targets for Indicators 5 and 6:

Indicator 5: Child Find 0-1 target was set as follows:

For FFY2014, the target was set at 0.61%  
For FFY2015, the target was set at 0.62%  
For FFY2016, the target was set at 0.63%  
For FFY2017, the target was set at 0.64%  
For FFY2018, the target was set at 0.65%  
For FFY2019, the target was set at 0.66%

Indicator 6: Child Find 0-3 target was as follows:

For FFY2014, the target was set at 1.72%  
For FFY2015, the target was set at 1.74%  
For FFY2016, the target was set at 1.76%  
For FFY2017, the target was set at 1.78%

For FFY2018, the target was set at 1.80%

For FFY2019, the target was set at 1.82%

#### **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 MSFSEIP shared the complete APR at its SICC/SSIP Stakeholder Meeting as well as a results summary page. The MSFSEIP discussed the results by Indicator and answered all public questions posed. The performance of each Local FSEIP was disaggregated and shared at subsequent SICC meetings providing comparison relative to the MSFSEIP targets. The MSFSEIP also publishes several years of APR data on the MSDH website ([http://msdh.ms.gov/msdhsite/\\_static/41,0,74,63.html](http://msdh.ms.gov/msdhsite/_static/41,0,74,63.html)). The website also provides information (i.e., phone and email contact information) to submit comments about the SPP/APR.

#### **Intro - Prior FFY Required Actions**

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

The State's IDEA Part C determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 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.

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

#### **Intro - OSEP Response**

The State has not publicly reported on the FFY 2018 (July 1, 2018-June 30, 2019) performance of each EIS program or provider located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of the IDEA.

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 June 23, 2020 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.

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

#### **Intro - Required Actions**

The State has not publicly reported on the FFY 2018 (July 1, 2018-June 30, 2019) performance of each EIS program or provider located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of IDEA. With its FFY 2020 SPP/APR, the State must provide a Web link demonstrating that the State reported to the public on the performance of each early intervention service program or provider located in the State on the targets in the SPP/APR for FFY 2018. In addition, the State must report with its FFY 2020 SPP/APR, how and where the State reported to the public on the FFY 2019 performance of each early intervention service program or provider located in the State on the targets in the SPP/APR.

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

# 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	76.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	90.67%	90.23%	86.80%	86.14%	85.26%

### 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
254	318	85.26%	100%	87.11%	Did Not Meet Target	No Slippage

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

*This number will be added to the "Number of 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).**

Mississippi First Step Early Intervention Program's criteria for "timely" receipt of services is defined as receiving all early intervention services identified on the IFSP no later than 30 business days after written parental consent for services.

**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).**

January 1, 2020 - March 30, 2020

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

The State has pulled multiple reports during different time periods and results average about the same across reporting time frames.

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

The State had 41 instances of missed timelines due to system-based issues. Most delays in Local FSEIP 1, 5, and 9 were related to significant provider shortages. Other Local FSEIPs, which also have some provider shortages, mainly experienced delays do to holidays.

**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
1	0	0	1

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

All cases that caused the non compliance have been addressed and fixed. Programs had to resubmit new Correction of Action Plans to address continued noncompliance.

**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
FFY 2017	6	1	5
FFY 2013	1	0	1

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Based on an analysis of local contributing factors and the extent of noncompliance, the FSEIP 1 developed a Correction Action Plan (CAP) to address timely delivery of services. This corrective action plan focused on ensuring correction of all instances of identified noncompliance (Prong I) and activities to

address root causes of noncompliance, mostly related to provider issues (e.g., recruitment of additional providers and better utilization of providers to balance caseloads). The FSEIP 1 submitted to the State evidence of correction of all instances of noncompliance (Prong I) and documentation of completion of all CAP activities

to address root causes of noncompliance. This evidence was reviewed and verified by the MSFSEIP. Subsequently, the MSFSEIP pulled and reviewed one month of data for FSEIP 1, including all records with services due (N=10). The MSFSEIP verified all services (100%) reviewed, after the CAP activities were completed, met the state definition of timely services (Prong II). Based on follow-up record reviews, Local FSEIP 1 was found in compliance with providing services in a timely manner.

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

The MSFSEIP verified that Local FSEIP 1 corrected each individual case of noncompliance. In all instances, all services documented on the IFSP were verified as having started using records from providers and updated documentation in the Child Registry (data system).

**FFY 2017**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

All cases that caused the finding have been addressed and services were started, but due to COVID-19 Programs have been unable to meet compliance for timely service when monitored.

**FFY 2013****Findings of Noncompliance Not Yet Verified as Corrected****Actions taken if noncompliance not corrected**

Local FSEIP 5 has not provided evidence of correction of Prong II of noncompliance for the Timely Provision of Services. As of January 1, 2020, a MSFSEIP staff member was reassigned as the Local FSEIP 5 Program Coordinator to address ongoing issues of noncompliance, including the Timely Provision of Services. Due to COVID-19 timely services continues to be an issue with Program 5 when monitored for compliance. The program has hired several new providers to address the shortage and with the help of the new data system going online in July 2020 and providers gaining access in January 2021 the program will be able to track timely services more regularly.

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

**1 - Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2018, the remaining five uncorrected findings identified in FFY 2017, and the one uncorrected finding identified in FFY 2013 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 and each EIS program or provider with remaining noncompliance identified in FFY 2018, FFY 2017, and FFY 2013: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the EDFacts Metadata and Process System (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	97.00%

FFY	2014	2015	2016	2017	2018
Target>=	95.00%	95.00%	95.00%	95.00%	95.00%
Data	93.22%	91.30%	89.71%	88.86%	88.19%

### Targets

FFY	2019
Target>=	95.00%

### Targets: Description of Stakeholder Input

The MSFSEIP has multiple avenues to engage stakeholders in advising the program. The State Interagency Coordinating Council (SICC), including SSIP Stakeholders, meets quarterly for a public meeting and more frequently for workgroup activities. The SICC is comprised of parents, service providers, state agency representatives from Health, Education, Human Services, Child Protective Services, Medicaid, and Insurance, representatives from Head Start, the Institute of Higher Learning (IHL), University programs, and advocacy groups, and other community leaders.

On November 14, 2014, the SICC assisted the MSFSEIP in setting the FFY2014-FFY2019 APR targets for Indicators 2, 3, and 4:

Indicator 2: Natural Environment target to set to remain at 95% for FFY2014-FFY2019.

Indicator 3: Child Outcomes:

Summary Statement 1 for Outcomes A - C targets were set to remain at 85% for FFY2014-FFY2019.

Summary Statement 2 for Outcomes A - C targets were set as follow:

- A2 – 65% for FFY2014-FFY2019
- B2 – 63% for FFY2014-FFY2015
- B2 – 64% for FFY2016
- B2 – 64.5% for FFY2017
- B2 – 65% for FFY2018
- B2 – 65.5% for FFY2019
- C2 – 63% for FFY2014-FFY2015
- C2 – 63.5% for FFY2016
- C2 – 64% for FFY2017-FFY2019

Indicator 4: Family Survey targets were set at 92% for FFY2014-FFY2019.

On February 13, 2015, the SICC assisted the MSFSEIP in setting APR targets for Indicators 5 and 6:

Indicator 5: Child Find 0-1 target was set as follows:

- For FFY2014, the target was set at 0.61%
- For FFY2015, the target was set at 0.62%

For FFY2016, the target was set at 0.63%  
 For FFY2017, the target was set at 0.64%  
 For FFY2018, the target was set at 0.65%  
 For FFY2019, the target was set at 0.66%

Indicator 6: Child Find 0-3 target was as follows:  
 For FFY2014, the target was set at 1.72%  
 For FFY2015, the target was set at 1.74%  
 For FFY2016, the target was set at 1.76%  
 For FFY2017, the target was set at 1.78%  
 For FFY2018, the target was set at 1.80%  
 For FFY2019, the target was set at 1.82%

**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	1,880
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	2,152

**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
1,880	2,152	88.19%	95.00%	87.36%	Did Not Meet Target	No Slippage

Provide additional information about this indicator (optional)

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

**2 - Required Actions**

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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

### 3 - Indicator Data

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

NO

#### Targets: Description of Stakeholder Input

The MSFSEIP has multiple avenues to engage stakeholders in advising the program. The State Interagency Coordinating Council (SICC), including SSIP Stakeholders, meets quarterly for a public meeting and more frequently for workgroup activities. The SICC is comprised of parents, service providers, state agency representatives from Health, Education, Human Services, Child Protective Services, Medicaid, and Insurance, representatives from Head Start, the Institute of Higher Learning (IHL), University programs, and advocacy groups, and other community leaders.

On November 14, 2014, the SICC assisted the MSFSEIP in setting the FFY2014-FFY2019 APR targets for Indicators 2, 3, and 4:

Indicator 2: Natural Environment target to set to remain at 95% for FFY2014-FFY2019.

Indicator 3: Child Outcomes:

Summary Statement 1 for Outcomes A - C targets were set to remain at 85% for FFY2014-FFY2019.

Summary Statement 2 for Outcomes A - C targets were set as follow:

- A2 – 65% for FFY2014-FFY2019
- B2 – 63% for FFY2014-FFY2015
- B2 – 64% for FFY2016
- B2 – 64.5% for FFY2017
- B2 – 65% for FFY2018
- B2 – 65.5% for FFY2019
- C2 – 63% for FFY2014-FFY2015
- C2 – 63.5% for FFY2016
- C2 – 64% for FFY2017-FFY2019

Indicator 4: Family Survey targets were set at 92% for FFY2014-FFY2019.

On February 13, 2015, the SICC assisted the MSFSEIP in setting APR targets for Indicators 5 and 6:

Indicator 5: Child Find 0-1 target was set as follows:

- For FFY2014, the target was set at 0.61%
- For FFY2015, the target was set at 0.62
- For FFY2016, the target was set at 0.63%
- For FFY2017, the target was set at 0.64%
- For FFY2018, the target was set at 0.65%
- For FFY2019, the target was set at 0.66%

Indicator 6: Child Find 0-3 target was as follows:

- For FFY2014, the target was set at 1.72%
- For FFY2015, the target was set at 1.74%
- For FFY2016, the target was set at 1.76%
- For FFY2017, the target was set at 1.78%
- For FFY2018, the target was set at 1.80%
- For FFY2019, the target was set at 1.82%

#### Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2013	Target>=	85.00%	85.00%	85.00%	85.00%	85.00%
A1	84.69%	Data	83.74%	79.05%	77.78%	81.28%	80.37%
A2	2013	Target>=	65.00%	65.00%	65.00%	65.00%	65.00%
A2	64.46%	Data	62.71%	65.45%	61.53%	60.22%	61.60%
B1	2013	Target>=	85.00%	85.00%	85.00%	85.00%	85.00%
B1	84.18%	Data	80.80%	81.05%	77.92%	80.69%	83.86%
B2	2013	Target>=	63.00%	63.00%	64.00%	64.50%	65.00%
B2	62.65%	Data	61.49%	61.23%	57.18%	53.04%	52.78%
C1	2013	Target>=	85.00%	85.00%	85.00%	85.00%	85.00%
C1	84.25%	Data	83.99%	83.67%	80.80%	80.98%	80.31%
C2	2013	Target>=	63.00%	63.00%	63.50%	64.00%	64.00%
C2	61.36%	Data	63.77%	61.56%	56.99%	55.43%	55.74%

**Targets**

FFY	2019
Target A1>=	85.00%
Target A2>=	65.00%
Target B1>=	85.00%
Target B2>=	65.00%
Target C1>=	85.00%
Target C2>=	64.00%

**FFY 2019 SPP/APR Data**

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

1,173

**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	12	1.02%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	82	6.99%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	346	29.50%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	428	36.49%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	305	26.00%

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	774	868	80.37%	85.00%	89.17%	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	733	1,173	61.60%	65.00%	62.49%	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	13	1.11%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	170	14.49%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	403	34.36%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	434	37.00%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	153	13.04%

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	837	1,020	83.86%	85.00%	82.06%	Did Not Meet Target	Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	587	1,173	52.78%	65.00%	50.04%	Did Not Meet Target	Slippage

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

Over the past years the program has been implementing certain components of the State Systemic Improvement Plan (SSIP) that deals with child outcomes scoring. Because the high turnover in Service Coordinators we are seeing different scoring for children from when they entered and at exiting. State has observed that there were less children who was scored at (e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers) than previous years. Also because of COVID-19 the State also saw less COS reporting for individuals who left the program between March 2020 and June 2020.

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

Over the past years the program has been implementing certain components of the State Systemic Improvement Plan (SSIP) that deals with child outcomes scoring. Because the high turnover in Service Coordinators we are seeing different scoring for children from when they entered and at exiting. State has observed that there were less children who was scored at (e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers) than previous years. Also because of COVID-19 the State also saw less COS reporting for individuals who left the program between March 2020 and June 2020.

**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	12	1.02%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	178	15.17%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	393	33.50%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	423	36.06%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	167	14.24%

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	816	1,006	80.31%	85.00%	81.11%	Did Not Meet Target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	590	1,173	55.74%	64.00%	50.30%	Did Not Meet Target	Slippage

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

Over the past years the program has been implementing certain components of the State Systemic Improvement Plan (SSIP) that deals with child outcomes scoring. Because the high turnover in Service Coordinators we are seeing different scoring for children from when they entered and at exiting. State has observed that there were less children who was scored at (e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers) than previous years. Also because of COVID-19 the State also saw less COS reporting for individuals who left the program between March 2020 and June 2020.

**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	1,902
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.	392

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.**

Each child's evaluation team, including the Service Coordinator and parent, uses assessment data collected at entry to determine child outcomes ratings using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process. At exit, the child's IFSP team, including the Service Coordinator and parent, uses results of ongoing assessments data collected at exit to determine child outcomes ratings using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process.

**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>=	92.00%	92.00%	92.00%	92.00%	92.00%
A	84.00%	Data	90.70%	86.84%	89.33%	91.85%	90.12%
B	2006	Target>=	92.00%	92.00%	92.00%	92.00%	92.00%
B	87.00%	Data	92.87%	87.80%	90.97%	93.01%	90.29%
C	2006	Target>=	92.00%	92.00%	92.00%	92.00%	92.00%
C	88.00%	Data	89.30%	86.63%	90.27%	89.80%	89.08%

### Targets

FFY	2019
Target A>=	92.00%
Target B>=	92.00%
Target C>=	92.00%

### Targets: Description of Stakeholder Input

The MSFSEIP has multiple avenues to engage stakeholders in advising the program. The State Interagency Coordinating Council (SICC), including SSIP Stakeholders, meets quarterly for a public meeting and more frequently for workgroup activities. The SICC is comprised of parents, service

providers, state agency representatives from Health, Education, Human Services, Child Protective Services, Medicaid, and Insurance, representatives from Head Start, the Institute of Higher Learning (IHL), University programs, and advocacy groups, and other community leaders.

On November 14, 2014, the SICC assisted the MSFSEIP in setting the FFY2014-FFY2019 APR targets for Indicators 2, 3, and 4:

Indicator 2: Natural Environment target to set to remain at 95% for FFY2014-FFY2019.

Indicator 3: Child Outcomes:

Summary Statement 1 for Outcomes A - C targets were set to remain at 85% for FFY2014-FFY2019.

Summary Statement 2 for Outcomes A - C targets were set as follow:

- A2 – 65% for FFY2014-FFY2019
- B2 – 63% for FFY2014-FFY2015
- B2 – 64% for FFY2016
- B2 – 64.5% for FFY2017
- B2 – 65% for FFY2018
- B2 – 65.5% for FFY2019
- C2 – 63% for FFY2014-FFY2015
- C2 – 63.5% for FFY2016
- C2 – 64% for FFY2017-FFY2019

Indicator 4: Family Survey targets were set at 92% for FFY2014-FFY2019.

On February 13, 2015, the SICC assisted the MSFSEIP in setting APR targets for Indicators 5 and 6:

Indicator 5: Child Find 0-1 target was set as follows:

- For FFY2014, the target was set at 0.61%
- For FFY2015, the target was set at 0.62%
- For FFY2016, the target was set at 0.63%
- For FFY2017, the target was set at 0.64%
- For FFY2018, the target was set at 0.65%
- For FFY2019, the target was set at 0.66%

Indicator 6: Child Find 0-3 target was as follows:

- For FFY2014, the target was set at 1.72%
- For FFY2015, the target was set at 1.74%
- For FFY2016, the target was set at 1.76%
- For FFY2017, the target was set at 1.78%
- For FFY2018, the target was set at 1.80%
- For FFY2019, the target was set at 1.82%

**FFY 2019 SPP/APR Data**

The number of families to whom surveys were distributed	1,467
Number of respondent families participating in Part C	203
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	166
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	203
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	152
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	203
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	181
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	201

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)	90.12%	92.00%	81.77%	Did Not Meet Target	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)	90.29%	92.00%	74.88%	Did Not Meet Target	Slippage

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	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)	89.08%	92.00%	90.05%	Did Not Meet Target	No Slippage

**Provide reasons for part A slippage, if applicable**

In FFY2019, the MSFSEIP had a continued increase in the number of referrals and active cases while simultaneously experiencing increased rates of turnover among Service Coordinators resulting in significant increases in caseloads. As a result, families experienced less frequent contacts and shorter visits with Service Coordinators and/or were reassigned Service Coordinators during the year. Therefore, fewer families reported early intervention helped them know their rights.

**Provide reasons for part B slippage, if applicable**

In FFY2019, the MSFSEIP had a continued increase in the number of referrals and active cases while simultaneously experiencing increased rates of turnover among Service Coordinators resulting in significant increases in caseloads. As a result, families experienced less frequent contacts and shorter visits with Service Coordinators and/or were reassigned Service Coordinators during the year. Therefore, fewer families reported early intervention helped them communicate their children's needs.

Sampling Question	Yes / No
Was sampling used?	NO

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

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

The State over the past several years has attempted to revise the method that the surveys are distributed and time frame that they are collected. The State is in the process of developing a new data system which will be active July 1, 2020, this new data system will allow the State to send out surveys twice a year instead of a once a year. The new process will allow the State to survey more families through out the fiscal year. Because of COVID the State was not able to send out Family Surveys twice a year.

**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.**

see Mississippi Family Survey Chart

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

Due to COVID-19 the State had to change our process of sending out surveys to families. Normally Service Coordinators will hand deliver the Family Surveys to families and explain to them the importance of filling out the survey and mailing it back in. Because, of COVID-19 the State mailed out all family surveys at the State office because service coordinators where not able to go to family homes.

**4 - Prior FFY Required Actions**

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

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

**4 - OSEP Response**

**4 - Required Actions**

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

**4 - State Attachments**



FFY Family Survey Chart 1.pdf

## 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	0.53%

FFY	2014	2015	2016	2017	2018
Target >=	0.61%	0.62%	0.63%	0.64%	0.65%
Data	0.62%	0.57%	0.65%	0.85%	0.92%

### Targets

FFY	2019
Target >=	0.66%

### Targets: Description of Stakeholder Input

The MSFSEIP has multiple avenues to engage stakeholders in advising the program. The State Interagency Coordinating Council (SICC), including SSIP Stakeholders, meets quarterly for a public meeting and more frequently for workgroup activities. The SICC is comprised of parents, service providers, state agency representatives from Health, Education, Human Services, Child Protective Services, Medicaid, and Insurance, representatives from Head Start, the Institute of Higher Learning (IHL), University programs, and advocacy groups, and other community leaders.

On November 14, 2014, the SICC assisted the MSFSEIP in setting the FFY2014-FFY2019 APR targets for Indicators 2, 3, and 4:

Indicator 2: Natural Environment target to set to remain at 95% for FFY2014-FFY2019.

Indicator 3: Child Outcomes:

Summary Statement 1 for Outcomes A - C targets were set to remain at 85% for FFY2014-FFY2019.

Summary Statement 2 for Outcomes A - C targets were set as follow:

A2 – 65% for FFY2014-FFY2019  
 B2 – 63% for FFY2014-FFY2015  
 B2 – 64% for FFY2016  
 B2 – 64.5% for FFY2017  
 B2 – 65% for FFY2018  
 B2 – 65.5% for FFY2019  
 C2 – 63% for FFY2014-FFY2015  
 C2 – 63.5% for FFY2016  
 C2 – 64% for FFY2017-FFY2019

Indicator 4: Family Survey targets were set at 92% for FFY2014-FFY2019.

On February 13, 2015, the SICC assisted the MSFSEIP in setting APR targets for Indicators 5 and 6:

Indicator 5: Child Find 0-1 target was set as follows:

For FFY2014, the target was set at 0.61%  
 For FFY2015, the target was set at 0.62  
 For FFY2016, the target was set at 0.63%  
 For FFY2017, the target was set at 0.64%  
 For FFY2018, the target was set at 0.65%

For FFY2019, the target was set at 0.66%

Indicator 6: Child Find 0-3 target was as follows:

- For FFY2014, the target was set at 1.72%
- For FFY2015, the target was set at 1.74%
- For FFY2016, the target was set at 1.76%
- For FFY2017, the target was set at 1.78%
- For FFY2018, the target was set at 1.80%
- For FFY2019, the target was set at 1.82%

**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	261
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	35,518

**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
261	35,518	0.92%	0.66%	0.73%	Met Target	No Slippage

**Compare your results to the national data**

Mississippi's Birth to 1 =  $261/35,518 = .73\%$  of the Mississippi's birth to one population was in early intervention. as compared to  $(51,939/3,783,052 = 1.37\%$  of the US population was in early intervention.

**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	1.36%

FFY	2014	2015	2016	2017	2018
Target >=	1.72%	1.74%	1.76%	1.78%	1.80%
Data	1.69%	1.72%	1.73%	1.85%	1.95%

#### Targets

FFY	2019
Target >=	1.82%

#### Targets: Description of Stakeholder Input

The MSFSEIP has multiple avenues to engage stakeholders in advising the program. The State Interagency Coordinating Council (SICC), including SSIP Stakeholders, meets quarterly for a public meeting and more frequently for workgroup activities. The SICC is comprised of parents, service providers, state agency representatives from Health, Education, Human Services, Child Protective Services, Medicaid, and Insurance, representatives from Head Start, the Institute of Higher Learning (IHL), University programs, and advocacy groups, and other community leaders.

On November 14, 2014, the SICC assisted the MSFSEIP in setting the FFY2014-FFY2019 APR targets for Indicators 2, 3, and 4:

Indicator 2: Natural Environment target to set to remain at 95% for FFY2014-FFY2019.

Indicator 3: Child Outcomes:

Summary Statement 1 for Outcomes A - C targets were set to remain at 85% for FFY2014-FFY2019.

Summary Statement 2 for Outcomes A - C targets were set as follow:

- A2 – 65% for FFY2014-FFY2019
- B2 – 63% for FFY2014-FFY2015
- B2 – 64% for FFY2016
- B2 – 64.5% for FFY2017
- B2 – 65% for FFY2018
- B2 – 65.5% for FFY2019
- C2 – 63% for FFY2014-FFY2015
- C2 – 63.5% for FFY2016
- C2 – 64% for FFY2017-FFY2019

Indicator 4: Family Survey targets were set at 92% for FFY2014-FFY2019.

On February 13, 2015, the SICC assisted the MSFSEIP in setting APR targets for Indicators 5 and 6:

Indicator 5: Child Find 0-1 target was set as follows:

- For FFY2014, the target was set at 0.61%
- For FFY2015, the target was set at 0.62%
- For FFY2016, the target was set at 0.63%
- For FFY2017, the target was set at 0.64%
- For FFY2018, the target was set at 0.65%
- For FFY2019, the target was set at 0.66%

Indicator 6: Child Find 0-3 target was as follows:  
 For FFY2014, the target was set at 1.72%  
 For FFY2015, the target was set at 1.74%  
 For FFY2016, the target was set at 1.76%  
 For FFY2017, the target was set at 1.78%  
 For FFY2018, the target was set at 1.80%  
 For FFY2019, the target was set at 1.82%

**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	2,152
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	108,721

**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
2,152	108,721	1.95%	1.82%	1.98%	Met Target	No Slippage

**Compare your results to the national data**

Mississippi's Birth through age 2 (2,152/108,721 =1.95% of the Mississippi's birth through age 2 population was in early intervention, as compared to (427,234/11,534,695 =3.70% of the US population was in early intervention.

**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	88.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	95.65%	94.78%	95.80%	96.18%	89.73%

### 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
225	277	89.73%	100%	88.81%	Did Not Meet Target	No Slippage

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

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

21

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

22

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).**

January 1, 2020 - March 30, 2020

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

The State has pulled multiple reports during different time periods and results average about the same across reporting time frames.

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

The State had 31 instances of missed timelines due to system-based issues. Most delays in Local FSEIP 5, and 9 were related to significant service coordinator shortages. Other Local FSEIPs, which also have some provider shortages. COVID-19 might have played apart in some timeframes been missed but Service Coordinators did not note that justification in there explanation.

**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
1	0	0	1

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

All cases that caused the finding have been addressed and services where started, but due to COVID-19 Programs have been unable to meet compliance for timely service when monitored.

**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
FFY 2017	7	1	6

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Based on an analysis of local contributing factors and the extent of noncompliance, the FSEIP 1 developed Correction Action Plan (CAP) to address 45-day. This corrective action plan focused on ensuring correction of all instances of identified noncompliance (Prong I) and activities to address root causes of noncompliance, mostly related to provider issues (e.g., recruitment of additional providers and better utilization of providers to balance caseloads). The FSEIP 1 submitted to the State evidence of correction of all instances of noncompliance (Prong I) and documentation of completion of all CAP activities to address root causes of noncompliance. This evidence was reviewed and verified by the MSFSEIP. Subsequently, the MSFSEIP pulled and reviewed one month of data for FSEIP 1, including all records with IFSPs (N=10). The MSFSEIP verified all IFSPs (100%) reviewed, after the CAP activities were completed, met the federal 45-day time frame (Prong II). Based on follow-up record reviews, Local FSEIP 1 was found in compliance with conducting FISP within the 45-day timeframe.

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

The MSFSEIP verified that Local FSEIP 1 corrected each individual case of noncompliance. In all instances, all IFSPs were reviewed and documented in the Child Registry (data system) and verified as having been completed with-in the 45 day timeline.

**FFY 2017**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The State required FSEIP to resubmit CAPs, but due to COVID-19 Programs have been unable to meet compliance for 45-day time line when monitored.

**7 - Prior FFY Required Actions**

None

**7 - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

**7 - Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2018 and the six uncorrected findings of noncompliance identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 and each EIS program or provider with remaining noncompliance identified in FFY 2018 and FFY 2017: (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	83.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	98.49%	93.58%	97.32%	96.73%	96.01%

**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
168	214	96.01%	100%	90.19%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

Local FSEIP 5 was significantly understaffed and FSEIP 8 and 9 experienced high Service Coordinator turnover. Inadequate staffing for the other programs resulted in delays in the transition plans with steps and services.

**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.

25

**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).**

January 1, 2020 - March 30, 2020

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

The State has pulled multiple reports during different time periods and results average about the same across reporting time frames.

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

Local FSEIP 5 was significantly understaffed and FSEIP 8 and 9 experienced high Service Coordinator turnover. Inadequate staffing resulted in delays in the development of timely transition plans with steps and services.

**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
2	0	0	2

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The State required all programs that are in noncompliance to resubmit CAPs to address continue noncompliance. But due to COVID-19 Programs have been unable to meet compliance Transition Steps and Plans.

**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
FFY 2017	4	1	3

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Based on an analysis of local contributing factors and the extent of noncompliance, the FSEIP 6 developed Correction Action Plan (CAP) to address Transition Steps and Services. This corrective action plan focused on ensuring correction of all instances of identified noncompliance (Prong I) and activities to address root causes of noncompliance, mostly related to service coordinator case load. The FSEIP 6 submitted to the State evidence of correction of all instances of noncompliance (Prong I) and documentation of completion of all CAP activities to address root causes of noncompliance. This evidence was reviewed and verified by the MSFSEIP. Subsequently, the MSFSEIP pulled and reviewed one month of data for FSEIP 7, including all records were Transition Steps and services were due (N=10). The MSFSEIP verified all cases (100%) reviewed, after the CAP activities were

completed, met the federal definition of timely transition (Prong II). Based on follow-up record reviews, Local FSEIP 6 was found in compliance with developing transition steps and plans with in the federal time frame..

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

The MSFSEIP verified that Local FSEIP 6 corrected each individual case of noncompliance. In all instances, the case where inactive due to child aging out of early intervention.

**FFY 2017**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The State required all programs that are in non compliance to resubmit CAPs to address continue noncompliance. But due to COVID-19 Programs have been unable to meet compliance Transition Steps and Plans.

**8A - Prior FFY Required Actions**

None

**8A - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

**8A - Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining two uncorrected findings of noncompliance identified in FFY 2018 and three uncorrected findings identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 and each EIS program or provider with remaining noncompliance identified in FFY 2018 and FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Indicator 8B: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	66.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.33%	97.62%	99.81%	99.65%	99.09%

**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
208	214	99.09%	100%	97.20%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

Program 5 and Program 6 each had Service Coordinator to leave the program, when the Program Coordinator received the cases transition notification had not been completed. Program 1, 4 and 7 transition notification was completed on the cases but they were done after the 33month timeframe.

**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**

The following criteria is was used to collect Transition 8B; (1) Child has IFSP; (2) Excludes Children with Late Referral (after 34.5 months); (3) Excludes Children Exiting Before 33 months.

**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).**

January 1, 2020 - March 30, 2020

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

The State has pulled multiple reports during different time periods and results average about the same across reporting time frames.

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

Six cases from 5 programs had notification that where late or not sent to the LEAs. The state noted that several of the programs had turnovers in staff that carried a large cases loads. Program 4 and 7 was do to supervision of the service coordinator not to ensure that procedures where being followed.

**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
1	0	0	1

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The State required all programs that are in noncompliance to resubmit CAPs to address continue noncompliance. But due to COVID-19 Programs have been unable to meet compliance for notification.

**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
FFY 2017	4	0	4
FFY 2016	1	1	0

**FFY 2017**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The State required all programs that are in noncompliance to resubmit CAPs to address continue noncompliance. But due to COVID-19 Programs have been unable to meet compliance Transition Steps and Plans.

## **FFY 2016**

### **Findings of Noncompliance Verified as Corrected**

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

In FFY2016, the MSFSEIP did identify and make findings of noncompliance in Local FSEIP 7 related to Indicator 8B (SEA and LEA Notification). Based on an analysis of local contributing factors and the extent of noncompliance, the FSEIP 7 was issued a state-developed Correction Action Plan (CAP) to address transition plans. This corrective action plan focused on ensuring correction of all instances of identified noncompliance (Prong I) and activities to address root causes of noncompliance, mostly related to a personnel/supervision issue. The FSEIP 7 submitted to the State evidence of correction of all instances of noncompliance (Prong I) and documentation of completion of all CAP activities to address root causes of noncompliance. This evidence was reviewed and verified by the MSFSEIP. Subsequently, the MSFSEIP pulled and reviewed one month of data for FSEIP 7, including all records with transition SEA and LEA Notification due (N=10). The MSFSEIP verified all notifications (100%) reviewed, after the CAP activities were completed, met the timeline for notification (Prong II). Based on follow-up record reviews, Local FSEIP 7 was found in compliance with providing timely notification, less than one year from the date of findings.

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

All children for whom their cases were identified for noncompliance have aged out of the EIP. Local Program 7 was required to review root causes of noncompliance and to submit/update a Correction Action Plan to address issues leading to noncompliance.

## **8B - Prior FFY Required Actions**

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

## **8B - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## **8B - Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2018 and the remaining four uncorrected findings identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 and each EIS program or provider with remaining noncompliance identified in FFY 2018 and FFY 2017: (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 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	45.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.14%	91.29%	97.32%	91.24%	93.93%

**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
168	214	93.93%	100%	90.19%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

Program 2 and 5 had Service Coordinators who left the agency and did not complete Transition conferences before they left. Program Coordinators held transition conference for all families that did not have there conferences before 33 months. Other Local programs documented case overload for the reason of late transition conferences.

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

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

0

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

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

25

**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).**

January 1, 2020 - March 30, 2020

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

The State has pulled multiple reports during different time periods and results average about the same across reporting time frames.

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

There were 21 instances of system-based issues that led to delays in transition conferences, mainly caused by staff shortages and large caseloads. The Local Programs reported significant Service Coordinator turnover which had a cascading effect of increasing case loads on remaining personnel. As some of the reassigned cases were nearing transition deadlines, the (new) Service Coordinators had difficulty meeting the deadlines for these additional cases while managing their existing cases.

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

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

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The State required all programs that are in noncompliance to resubmit CAPs to address continue noncompliance. But due to COVID-19 Programs have been unable to meet compliance for transition conference.

**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
FFY 2017	5	0	5

## **FFY 2017**

### **Findings of Noncompliance Not Yet Verified as Corrected**

#### **Actions taken if noncompliance not corrected**

The State required all programs that are in noncompliance to resubmit CAPs to address continue noncompliance. But due to COVID-19 Programs have been unable to meet compliance for transition conference.

## **8C - Prior FFY Required Actions**

None

## **8C - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## **8C - Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining three uncorrected findings of noncompliance identified in FFY 2018 and the remaining five uncorrected findings identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2019 and each EIS program or provider with remaining noncompliance identified in FFY 2018 and FFY 2017: (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 ED Facts Metadata and Process System (EMAPS)).

#### Measurement

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

#### Instructions

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

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

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

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

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

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

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

### 9 - Indicator Data

#### Not Applicable

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

YES

**Provide an explanation of why it is not applicable below.**

The MSFSEIP has not included Resolution Sessions in its policies for dispute resolution.

### 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

The MSFSEIP has multiple avenues to engage stakeholders in advising the program. The State Interagency Coordinating Council (SICC), including SSIIP Stakeholders, meets quarterly for a public meeting and more frequently for workgroup activities. The SICC is comprised of parents, service providers, state agency representatives from Health, Education, Human Services, Child Protective Services, Medicaid, and Insurance, representatives from Head Start, the Institute of Higher Learning (IHL), University programs, and advocacy groups, and other community leaders.

On November 14, 2014, the SICC assisted the MSFSEIP in setting the FFY2014-FFY2019 APR targets for Indicators 2, 3, and 4:

Indicator 2: Natural Environment target to set to remain at 95% for FFY2014-FFY2019.

Indicator 3: Child Outcomes:

Summary Statement 1 for Outcomes A - C targets were set to remain at 85% for FFY2014-FFY2019.

Summary Statement 2 for Outcomes A - C targets were set as follow:

A2 – 65% for FFY2014-FFY2019

B2 – 63% for FFY2014-FFY2015

B2 – 64% for FFY2016

B2 – 64.5% for FFY2017

B2 – 65% for FFY2018

B2 – 65.5% for FFY2019

C2 – 63% for FFY2014-FFY2015

C2 – 63.5% for FFY2016

C2 – 64% for FFY2017-FFY2019

Indicator 4: Family Survey targets were set at 92% for FFY2014-FFY2019.

On February 13, 2015, the SICC assisted the MSFSEIP in setting APR targets for Indicators 5 and 6:

Indicator 5: Child Find 0-1 target was set as follows:

For FFY2014, the target was set at 0.61%

For FFY2015, the target was set at 0.62

For FFY2016, the target was set at 0.63%

For FFY2017, the target was set at 0.64%

For FFY2018, the target was set at 0.65%  
 For FFY2019, the target was set at 0.66%

Indicator 6: Child Find 0-3 target was as follows:

For FFY2014, the target was set at 1.72%  
 For FFY2015, the target was set at 1.74%  
 For FFY2016, the target was set at 1.76%  
 For FFY2017, the target was set at 1.78%  
 For FFY2018, the target was set at 1.80%  
 For FFY2019, the target was set at 1.82%

**Historical Data**

Baseline Year	Baseline Data
2005	

FFY	2014	2015	2016	2017	2018
Target>=					
Data					

**Targets**

FFY	2019
Target>=	

**FFY 2019 SPP/APR Data**

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

Provide additional information about this indicator (optional)

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

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

**10 - Required Actions**

**Indicator 11: State Systemic Improvement Plan**



FFY19 SSIP Report  
Template revised -20

## **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:**

Stacy Callender

#### **Title:**

Part C Coordinator

#### **Email:**

Stacy.Callender@msdh.ms.gov

#### **Phone:**

601-576-7427

#### **Submitted on:**

04/27/21 5:18:23 PM

## ED attachments



ms  
-resultsmatrix-2021c



MS-2021DataRubric  
PartC.xlsx



MS-C-Dispute-Reso  
lution-2019-20.pdf