

# VT Part C

# FFY2016 State Performance Plan / Annual Performance Report

Executive Summary:

Vermont's Part C Early Intervention services are part of Vermont's statewide Children's Integrated Services (CIS) Program. CIS is administered by the Agency of Human Services, Department for Children and Families, Child Development Division. The Agency of Education is Vermont's co-lead for Part C services. This relationship is governed by an Interagency Agreement, revised June 2014, and subsequently approved by OSEP.

CIS is a statewide health promotion, prevention and early intervention system of services intended to:

- Promote a child's healthy growth and development,
- Support parents/guardians and child care providers to prevent health or developmental challenges arising from social and environmental factors,
- Support families with a child from birth to three with a developmental delay or medical condition that may result in a developmental delay,
- Support families pre-natally through age six address factors that can put their child at risk for birth defects, or ongoing health, or developmental issues, including social or emotional health and development,
- Support families and early care and education programs so that children with special health or developmental needs, or involved with Vermont's child protection system, access high quality early care and education programs to support their development.

Vermont's Part C Early Intervention services are known as CIS Early Intervention services. The State of Vermont Child Development Division contracts with 12 regional non-profit community-based organizations (often Parent-Child Centers) to deliver CIS Early Intervention services. Vermont CIS Early Intervention provides some form of service to approximately 2,100 children annually (up from 1,600 in FFY '13).

More broadly, Vermont's CIS Early Intervention services are delivered in the context of CIS. CIS Services are provided to:

1. Pregnant/Postpartum women who desire support to stay healthy, and/or have questions about a condition or risk situation that affects their well-being.
2. Children whose parent or caregiver has questions or concerns about a suspected developmental delay or condition.
3. Families who have questions or concerns about their children's behavior, health, mental health, wellbeing, or providing a stable, healthy environment for their family.
4. Early Childhood/Child Care providers who enroll children with specialized health or developmental needs.

CIS provides a systematic referral and intake process that leads to:

1. multidisciplinary and consultative team review, linking with other community resources as needed;
2. comprehensive screening, connected to Vermont's Help Me Grow universal screening initiative and in compliance with CAPTA (Child Abuse Prevention and Treatment Act);
3. multidisciplinary assessment as needed or upon the request of a family; and, for families/children receiving services:
4. identification of a primary service coordinator who works with them to develop functional outcomes, coordinate needed services, support access/referrals to additional resources as needed, and ensuring timelines and family rights are maintained;
5. regular reviews to assess progress and achievement of goals to promote better outcomes; and
6. supports for families transitioning from CIS services (such as when all goals are successfully met, to on-going services for women beyond two months postpartum, at age 3 for Part C Early Intervention, and beyond age six for other services).

CIS services are provided by community-based organizations with qualified and supervised professionals. CIS Early Intervention practitioners have, at a minimum, a bachelor's degree in early childhood special education, social work, or another related human services field. CIS Early Intervention providers performing assessments maintain a CIS Early Intervention Certificate.

CIS home visiting services use evidence-based models. These models are delivered in accordance with standards adopted by Vermont's Home Visiting Alliance in response to Act 66: *An Act Relating to Home Visiting Standards*. CIS services, including CIS Early Intervention, are available year-round. Service delivery occurs in the natural environments of the families or children to the maximum extent possible. This may be the child's home or a community-based program or setting. Services delivered in the natural environment of the child or child's family are better able to support families' routines and children's inclusion with typically developing peers.

The purpose of Children's Integrated Services is to:

1. increase child and family access to high quality child development services;
2. promote the health, social and economic well-being of the recipients of these services;
3. provide performance-based contracts for the provision of services to pregnant/postpartum women, children from birth to age six and their families;
4. increase access to health insurance and a medical and dental home;
5. strengthen implementation of CIS with a particular emphasis on: infrastructure; outreach; referral and intake; multidisciplinary screening and assessment; integrated services planning; service delivery; and transition; and

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

- 6. support a more comprehensive approach to service delivery including: supporting timely delivery of direct services, consultation, group education, team and supervision time, documentation, other record keeping requirements, and data collection and reporting.

The CIS Program is overseen by a team including: The CIS Director, Data Manager, and Program Coordinators overseeing nursing, family support, early intervention and specialized child care services. Data is collected and monitored by this team. Quality of service provision and adherence to federal Part C of the Individuals with Disabilities Education Act is also overseen by this team.

Vermont's Early Intervention Program utilizes technical assistance provided by the Office of Special Education Programs (OSEP) and OSEP-funded technical assistance centers to support continuous quality improvement. Additionally, the strategies identified within the State Systemic Improvement Plan (Indicator 11 within the Annual Performance Report) provide an foundation to improvement. The Vermont Early Intervention Program adopted the following data statement to define the value of data to our ongoing improvement efforts:

*Data illuminate's solutions to our challenges.*

*We use data as an essential tool to see the big picture and make intentional decisions that enable us to focus our limited resources to promote positive outcomes for children, families and staff.*

*We believe in all children reaching their developmental potential*

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**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.

**Fiscal Management:**

CIS Early Intervention's system of payments adheres to Fiscal Certification 34 CFR §303.202 requirements. This includes ensuring that Part C funds are not used to satisfy a financial commitment for services that would otherwise have been paid for from another private or public source consistent with 34 CFR §303.510. Written parental consent to bill private insurance or Medicaid is obtained from a child's family/guardian and provided to all service providers named in the child's individualized family services plan (IFSP) known as the One Plan, with a copy also kept in the child's file. Families with private insurance have the ability to request additional financial assistance to help pay co-pays or deductibles in order to ensure services are provided at no cost to the family. Regional CIS Early Intervention community-based organizations are required to submit both budget and actual expenditures annually to ensure maintenance of effort for early intervention funding as required by 34 CFR §300.225(b).

**Supervision and Monitoring:**

CIS conducts contract monitoring on three regions annually, resulting in each region being monitored at least once every four years. This monitoring includes client file reviews for adherence to contractual requirements, including the following areas that meet Part C regulations:

1. timeliness of service delivery and transition processes;
2. the provision of services in the natural environment(s) identified by the child's family; and
3. parent/guardian's participation in their child's team and the development of their child's plan, including outcomes that address the family's hopes and priorities.

Regions are provided with a summary of the contract monitoring visit including three identified areas of strength and up to three areas in need of improvement. Regions are required to submit a Quality Improvement Plan to address any areas in need of improvement. This monitoring assures all CIS services are delivered in accordance with the CIS contract. Further, this assures that CIS Early Intervention services are maintained and delivered in accordance with federal IDEA Law and Part C Regulations, and Vermont Special Education Rule within the CIS array.

CIS Part C community-based organization is further supervised and specifically monitored as follows:

1. CIS Early Intervention community-based organizations are required by contract to keep copies of the current federal and state laws, regulations, rules and state policies and procedures related to Part C Early Intervention and Part B Special Education for Preschool Children for reference and guidance.
2. Vermont Part C (CIS Early Intervention), in collaboration with Vermont Part B, reviews its current rules, policies and procedures regularly to ensure compliance with the Part C federal regulations and the State of Vermont Special Education Rules. As co-leads, CIS Early Intervention and Vermont's Part B services, which are delivered by the Agency of Education, provide any necessary training and/or technical assistance to regional CIS Early Intervention Programs. The Part C and Part B Program Administrators meet

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

monthly.

3. The State CIS Early Intervention program maintains, and posts for the public ([http://dcf.vermont.gov/cdd/reports/IDEA\\_Part\\_C](http://dcf.vermont.gov/cdd/reports/IDEA_Part_C)) the Vermont Part C Early Intervention State Performance Plan and Annual Performance Report. The State, with the regional, community-based organizations utilize these data for continuous quality assurance.
4. All Monitoring Reports, letters of findings of noncompliance and Quality Improvement Plans, determination letters, and Regional Interagency Agreements are kept on file by the State CIS Early Intervention program.
5. Copies of all monitoring records, Quality Improvement Plans, and any corrective action plans are made available to the CIS State administrative team and key partners who are participating in carrying out the Part C Early Intervention services. The CIS State administrative team and key partners seek input on the status of the region's outcomes by reviewing the publicly reported data, contract monitoring reports, and any other data used to develop regional Quality Improvement Plans, or to maintain, improve and/or correct performance and/or compliance,
6. All required Quality Improvement Plans created by the regional CIS Early Intervention community-based organizations, including activities and evaluation measures are reviewed to ensure all activities are carried out as planned. The State CIS Data Manager reviews all monthly data submitted by the regional contracted CIS Early Intervention programs to ensure data is complete and any non-compliance is corrected within one year of identification.
7. Vermont Part C has a manual data management system. All data are submitted manually by regions at least once per month and manually entered by State CIS Early Intervention Staff. The State CIS Early Intervention data management system and process enables Vermont to review and verify each data element for the APR and 618 (including Child Count) at the time of entry. If errors (such as missing data, discrepancies or unexplained anomalies) are noted, regions are promptly provided technical assistance to correct their data or their interpretation of Federal regulation and/or State rule to ensure compliance in the delivery of Part C services.
8. The State CIS Early Intervention data management staff performs desk audits of regional host agencies at least quarterly to identify any potential noncompliance, any data anomalies, and data trends requiring targeted technical assistance.
9. Annually, child and family outcomes are reviewed as part of the State's determination process. Quality Improvement Plans, with advice and assistance from the Vermont Interagency Coordinating Council, and with technical assistance provided by the State CIS Early Intervention staff are required for CIS Early Intervention host agencies having 'Required Actions' as a result of the determination process.
10. Regional CIS Early Intervention host agencies with findings of non-compliance are also identified during the State's determination process. Regional CIS Early Intervention host agencies are required to develop strategies for improvement and submit these within their Quality Improvement Plans to the State CIS Early Intervention office. Subsequently, the State CIS Early Intervention staff monitor by desk audit or on-site file reviews to verify correction of non-compliance to 100% within one year of the date of written notification of the finding of non-compliance.

### Stakeholder involvement in Monitoring:

The State CIS Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report for their review prior to submission. The State CIS Early Intervention program reviews the APR data with the VICC annually for their input, as they function in an "advise and assist" role.

In addition, the VICC co-hosts, with the State CIS Early Intervention team, the annual determinations meeting with the 12 Regional CIS Early Intervention host agencies. The VICC members support the regional host agency staff and any regional CIS Coordinators, or other regional stakeholders who attend, to review their annual data, determinations and any findings.

At this meeting, and afterwards, Regional CIS Early Intervention host agencies work on Quality Improvement Plan development using the Local Contributing Factors Tools available through the Early Childhood Technical Assistance Center (ECTA), as well as educational and technical materials available through ECTA, the Center for IDEA Early Childhood Data Systems, and the National Center for Systemic Improvement. The VICC members support the Regional CIS Early Intervention host agencies to think critically about their data, consider root causes, identify concrete areas for improvement, and interim evaluation measures to track progress.

### Procedural Safeguards, Complaints and Dispute Resolution

VT Part C has an agreement with the VT Agency of Education (AOE) to use the Part B Special Education Dispute Resolution process. The AOE has the capacity and skills to conduct the Part C dispute resolution process that the Part C host agency does not. This process is posted on the web at: [http://education.vermont.gov/documents/EDU-Procedural\\_Safeguards\\_Notice\\_English.pdf](http://education.vermont.gov/documents/EDU-Procedural_Safeguards_Notice_English.pdf). In addition, information on submitting a complaint and due process rights are available at: [http://dcf.vermont.gov/child-development/cis/IDEA\\_part\\_C/parental\\_rights#Complaint](http://dcf.vermont.gov/child-development/cis/IDEA_part_C/parental_rights#Complaint).

A database managed by a representative of the AOE is used to track signed, written complaints, including complaints with reports issued, complaints withdrawn or dismissed and complaints pending and the timelines within each action was completed. The AOE database also includes tracking data for due process hearings and mediations.

The CIS Contracts include language requiring CIS Early Intervention host agencies to assure and document that families are regularly informed of their rights under IDEA, Part C dispute resolution and that staff refer a family to the State office immediately if a complaint is not resolved by the Early Intervention supervisor/director to the family's satisfaction. CIS Early Intervention host agency staff inform families of their rights to file a formal complaint and/or request mediation or a due process hearing during the intake process, and at least at the initial IFSP/One Plan meeting, during annual reviews and at transition. Written materials are given to families at these times and additionally upon request.

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

Finally, families are informed by CIS Early Intervention host agency staff about and have access to a Procedural Safeguards online training module housed at Vermont Family Network, Vermont’s Parent Training Information Center. Based on results of the annual Family Outcomes Survey, State CIS Early Intervention staff have identified and prioritized Parental Rights as a focus area and provide ongoing technical assistance to the regional CIS Early Intervention programs.

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**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.

Technical Assistance is provided to the regional CIS Early Intervention host agency staff as follows:

1. The State CIS Early Intervention hosts a monthly teleconference with the regional CIS Early Intervention host agencies. This call is used to disseminate information, gather regional feedback or input, and provide technical assistance related to interpretation of Federal regulations and/or State Rules to ensure the provision of timely, high-quality Part C services in accordance with IDEA.
2. The State CIS Data Manager hosts a monthly teleconference with regional CIS Early Intervention host agencies. This call is used to support regional understanding of and compliance with required child count data reporting, address any data discrepancies, and support regional correction of findings of non-compliance.
3. The State CIS Early Intervention staff provides on-going technical assistance on site to CIS Early Intervention host agencies experiencing staff or leadership changes, determinations of non-compliance, or in response to questions asked by regional CIS Early Intervention staff. Technical assistance includes the use of materials, trainings and technical assistance from ECTA, DaSy, and NCSI.
4. The State CIS Early Intervention staff provides technical assistance to regions based on results of Family Outcomes and Child Outcomes, that includes the following steps:
  - i. Inclusion of the regional CIS Early Intervention staff in a review of the results so that all providers and service coordinators are aware of their status regarding child/family outcomes and can participate in plan development.
  - ii. Analysis of the data and identification of contributing factors with the regional CIS Early Intervention staff, using *Contributing Factors tool* and the *Relationship of Quality Practices to Child and Family Outcome Measurement*
  - iii. Determination of desired results and a plan to address identified contributing factors (including strategies, resources needed, timelines and interim evaluation measures
  - iv. Quarterly review and revision of plan
  - v. Provision of technical assistance as identified in the plan

Additionally, to provide effective, evidence-based technical assistance, the State Early Intervention Staff receives ongoing technical assistance from:

1. the Office of Special Education Programs technical assistance and through participation on webinars and at the Leadership Institute to improve understanding of federal regulations and improve Vermont’s compliance with federal timelines, especially Indicator’s 8B and 8C, and performance on Child Outcomes. Strategies the State has implemented or will be implementing are described in greater detail within narratives for Indicators 8B and 8C and Child Outcomes below.
2. the Early Childhood Technical Assistance Center and the Center for IDEA Early Childhood Data Systems to improve Child Outcomes. Strategies the State has implemented or will be implementing are described in greater detail within narratives for Indicator 3 below.
3. the Early Childhood Personnel Center through technical assistance and through participation in the ECPC Leadership Institute to improve recruitment, retention and qualifications of Early Intervention staff. Strategies the State has implemented or will be implementing are described in greater detail within the narratives for the Professional Development System, Indicator 1, and Indicator 11 below.
4. the National Center for Systemic Improvement through technical assistance and as a member of the Cross-State Learning Collaborative to improve Family Outcomes. Strategies the State has implemented or will be implementing are described in greater detail within narratives for Indicator 4 and Indicator 11 below.

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**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

The State CIS contract includes the following language related to professional development:

*“All CIS professionals demonstrate competence and adhere to current best practices by participating in ongoing, annual professional development and regular supervision. CIS supervisors will maintain a record of staff professional development for State review upon request. Staff can also elect to document their professional development through the Bright Futures Information System (BFIS). All professional development activities referenced in this contract count toward demonstration of competence...”*

*All Staff and subcontractors funded through CIS must:*

1. regularly access the CDD CIS Website (<http://dcf.vermont.gov/cdd/cis>), CIS Blog (<https://cisvt.wordpress.com/>), and CIS Guidance Manual (<http://cispartners.vermont.gov/manual>) for guidance, forms, and current information;...

*All staff new to CIS shall successfully complete (with an 80% or better quiz score) on-line CIS training modules within 30 days of hire. These training modules are available on: <http://cispartners.vermont.gov/trainings>. These include, but are not limited to:*

1. CIS Orientation (3 modules)
2. One Plan [IFSP] Orientation (5 modules)
3. Early Intervention Orientation (8 modules) – Required for EI providers only; recommended for all other CIS service providers.
4. Other modules as they become available.

*In addition to professional development required by the service provider’s specialty, license or certification; those outlined in the job descriptions in Appendix 1; and trainings required to meet Federal and State requirements, all CIS staff shall attend/complete at least 10 additional clock hours of professional development activities annually from the following;*

1. the annual CIS Conference (attendance may be limited by the State);
2. scheduled CIS Community of Practice Calls, which will be identified in advance as professional development by the state, and for which participants must complete an electronic evaluation at the conclusion of each call;
3. relevant on-line CIS training modules;
4. other professional development required by CIS State Staff based on contract monitoring activities;
5. other State-sponsored trainings, both core and discipline-specific....”

Additionally, CIS Early Intervention host agencies are required to submit proof of the qualifications of staff to the State to assure the Office of special Education that all Early Intervention staff meet the Vermont Part C requirement of holding a bachelor’s degree in early childhood or a related field.

The State CIS Early Intervention program provides direct training to regional CIS Early Intervention staff and early childhood professionals as needed related to new initiatives such as the updated State of Vermont Special Education Rules, and Ages and Stages Questionnaire (ASQ) and Ages and Stages Social Emotional (ASQ-SE) trainings to implement the screening requirement for Part C. Additionally, the State CIS Early Intervention program provides joint training and Memos to the Field with our Part B/619 partner to address inclusion practices, and Child Find and Transitions requirements within the federal regulations and State rules. Any trainings are provided in person or via webinars.

The State CIS Early Intervention program provides financial support for the annual conference hosted by the Vermont Family Network, Vermont’s Parent Training Information Center; and, at times, financial support is provided to the regional CIS Early Intervention programs to support needed professional development. Regional CIS Early Intervention programs who mentor bachelor’s and master’s candidates in field placements receive memberships to the Division of Early Childhood or Zero to Three publications to support their investment in mentoring as well as their own ongoing professional development.

State CIS Early Intervention staff are members of professional development committees such as the Child Development Division Professional Preparation and Development Committee and the Building Bright Futures Personnel Preparation and Development Committee. Through a contract with the Center on Disability and Community Inclusion, the VT I-Team Early Intervention Project provides interdisciplinary, collaborative training focused on supporting infants and toddlers with significant and complex needs and their families.

The Vermont early childhood system has the following additional resources for professional development:

1. The Child Development Division’s Bright Futures Child Care Information System is being examined as an option for tracking CIS professional development in the future
2. UVM’s Early Childhood Special Education Personnel Preparation Program
3. The Vermont Higher Education Collaborative
4. Early Multi-Tiered System of Supports, in collaboration with Part B/619
5. VT LEND (Leadership Education in Neurodevelopmental and Related Disabilities) program. Provides long-term, graduate level interdisciplinary training and interdisciplinary services and care.

The State CIS program hosts a CIS Professional Development Committee. This committee is composed of CIS State staff and representatives from regional CIS programs and CIS partners, including the Child Development Division’s Statewide Systems and Community Collaboration unit, Northern Lights Career Development Center, and the Vermont Department of Health. This committee plans and coordinates the annual CIS Conference, the CIS on-line training modules, and has developed the CIS Competencies and CIS



CIS Early Intervention Certification:

The State CIS Early Intervention program has implemented an Early Intervention Certificate, based on review of Early Intervention credentialing in other states. As of June 30, 2016, all regional CIS Early Intervention staff who wish to conduct evaluations for determining eligibility for Part C, are required to hold a CIS Early Intervention Certificate or a Special Education Endorsement. The State CIS Early Intervention program, with input from regional CIS Early Intervention providers and other stakeholders has begun to develop the renewal process for this certification. The goal will be to align renewal requirements with opportunities for professional growth. This is based on evidenced based effective personnel recruitment and retention practices learned from technical assistance received through the Early Childhood Personnel Center.

Vermont CIS Early Intervention's development of a Comprehensive System of Personnel Development is discussed in detail in Vermont's submission of the State Systemic Improvement Plan for Indicator 11.

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**Stakeholder Involvement:**  apply this to all Part C results indicators

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

The Vermont Interagency Coordinating Council (VICC) functions in an "advise and assist" role for all of Children's Integrated Services (CIS). This further supports the integration of CIS services and the success of CIS in promoting and enhancing positive outcomes for children and their families prenatally through age six. The VICC meets at least quarterly in order to review and advise the State about: the State Performance Plan and Annual Performance Report targets, Annual Performance Report data and report submissions, new guidance or initiatives such as updated State Rules, the State Systemic Improvement Plan, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

The State CIS Early Intervention program has a position focused on recruitment and retention of members (especially parents) of the VICC as well as engagement with parents at a regional level. The VICC has produced and updated outreach rack card, VICC Orientation Manual, and publicly reports VICC information on a new VICC web site (<http://cispartners.vermont.gov/icc>). In addition, in 2018, the VICC is intending to engage with regional CIS Early Intervention programs to host two VICC meetings at a regional level and intentionally outreach to engage parents to participate in these meetings. The meetings will be facilitated in a family-friendly manner in order to successfully engage those parents who attend as full participants with the regular VICC members. The success of these meetings will be evaluated by the VICC and will inform next steps for regional meeting strategies.

Vermont's CIS Early Intervention other regional parent engagement is coordinated with activities within the scope of Vermont's Early Learning Challenge Grant and in collaboration with Vermont's Building Bright Futures Early Childhood Advisory Council as these activities seek to engage families around early childhood issues statewide.

Through monthly calls with the CIS Early Intervention host agencies, as well as on-going technical assistance provided to regional Part C staff as described above, the State CIS Early Intervention program regularly engages with Early Intervention service providers to determine issues and challenges they are facing in their provision of Part C services and to provide support to address these issues as needed. Further, as part of the SSIP process, the State CIS Early Intervention program engages with the regional CIS Early Intervention staff around the implementation of identified strategies and ongoing evaluation of progress.

The CIS Early Intervention State Team provides updates on the CIS Blog and within the Newsletter produced by the Vermont Family Network, Vermont's parent information center, in order to keep families informed of activities related to Indicator 11 and Vermont's SSIP. Additionally, the Vermont Family Network produces a monthly newsletter that serves as a way of keeping families informed about training, resources, and ways they can become involved in providing input into Vermont's Part C system, such as participating as a member of the Vermont Interagency Coordinating Council.

CIS Early Intervention State Team members participate in many statewide initiatives and work groups representing the needs of infants and toddlers with disabilities and their families. These groups include: Early Childhood Multi-tiered System of Supports; Universal Screening; Child and Family Trauma Workgroup; Vt-FACTS (broad health and developmental screening for children involved with child protection); VT Early Learning Standards development and revisions; Early Learning Challenge Grant projects.

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## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

### Reporting to the Public:

How and where the State reported to the public on the FFY 2015 performance of each EIS Program or Provider 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 2015 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2015 APR in 2017, is available.

As reported above, the State CIS Early Intervention develops all reports and publishes them on line as follows:

1. January: Review the Draft Annual Performance Report with the Vermont Interagency Coordinating Council and finalize with their input for submission to the Office of Special Education Programs in February.
2. February: complete copies of VT Part C's State Performance Plan and Annual Performance Report to the Agency of Human Services/Child Development Division's website: [http://dcf.vermont.gov/cdd/reports/part\\_c](http://dcf.vermont.gov/cdd/reports/part_c). This website link is forwarded to the Vermont Agency of Education and Vermont Family Network for posting on their respective websites and in VFN's statewide newsletter. It is also posted to the CIS blog at: <https://cisvt.wordpress.com/>.
3. March/April: Publicly report VT Part C's statewide and regional EI program data on Agency of Human Services/Child Development Division's website: [http://dcf.vermont.gov/cdd/reports/part\\_c](http://dcf.vermont.gov/cdd/reports/part_c).
4. November: Report out on/discuss progress on the State Performance Plan including statewide and regional Early Intervention program data from data collected July 1<sup>st</sup> the previous year through June 30<sup>th</sup> of the current year and being prepared for the Annual Performance Report due in February to a combined VT Interagency Coordinating Council and CIS Early Intervention Regional Program Directors and Stakeholders Meeting.
5. April and November: Publicly report VT Part C 618/Child Count data on Agency of Human Services/Child Development Division's website: [http://dcf.vermont.gov/cdd/reports/part\\_c](http://dcf.vermont.gov/cdd/reports/part_c).

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### Actions required in FFY 2015 response

### OSEP Response

The State's determinations for both 2016 and 2017 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 29, 2017 determination letter informed the State that it must report with its FFY 2016 SPP/APR submission, due February 1, 2018, 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.

States were instructed to submit Phase III Year Two of the State Systemic Improvement Plan (SSIP) by April 2, 2018. The State provided the required information.

In the FFY 2017 APR, the State must report FFY 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 implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities; (2) measures and outcomes that were implemented since the State's last SSIP submission (i.e., April 2, 2018); and (3) a summary of the infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short- and long-term outcomes that are intended to impact the SIMR.

The State's IDEA Part C determination for both 2017 and 2018 is Needs Assistance. In the State's 2018 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 2017 SPP/APR submission, due February 1, 2019, 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.

### Required Actions

The State's IDEA Part C determination for both 2017 and 2018 is Needs Assistance. In the State's 2018 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 2017 SPP/APR submission, due February 1, 2019, 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.



# FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

## Indicator 1: Timely provision of services

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)

### Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		86.40%	92.34%	97.00%	98.00%	98.70%	97.70%	97.40%	97.00%	97.36%	97.14%

FFY	2015
Target	100%
Data	93.00%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

### FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

### FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
885	1216	93.00%	100%	88.08%

### Reasons for Slippage

Based on continued slippage in this area, and OSEP's determination and Differentiated Monitoring and Support, Vermont has been engaging in activities to improve performance on this Indicator. Root cause analysis conducted with the Vermont Interagency Coordinating Council along with stakeholders representing each region in the state identified that: Vermont has seen an increase in children with medical diagnosis and Early Intervention practitioners are reporting an increase in complexity of the needs of infants and toddlers entering Part C. Most notable are those infants and toddlers involved in Vermont's child protection system. Vermont's population of children who have been victims of abuse or neglect has risen over two percentage points over the past three years. Rates of children coming into the custody of the State (birth - 17 years old) have also risen dramatically: from 1,627 in 2013, to 2,105 in 2016. Children from birth through 3 years of age account for the largest growing population of these children: rising from being 23% of the population of children in State custody in 2013, to 31% of the population of children in State custody in 2016.

When children are taken into State custody, they may experience several moves in foster care placements. These moves can delay CIS Early Intervention services from starting, or interrupt services that have been in place. Vermont is working with the Family Services Division (Vermont's child protection agency) to determine how to mitigate these delays or interruptions. Currently Vermont CIS Early Intervention and the Family Services Division are sharing data to ensure we know which children enrolled in Early Intervention are impacted by child abuse, neglect or significant safety concerns within their home environment. Vermont believes that this collaboration will help the state find a way to ensure timelines are able to be met effectively for infants and toddlers involved in the child protection system.

In addition, Vermont, like other states, have struggled with finding private therapists who are willing to serve children under the age of three in their natural environments. Private therapists who have ceased providing services to children enrolled in Early Intervention have reported cancellations/no shows by the family, reimbursement rates being too low, and billing challenges to be the most common reason. In addition, Vermont has seen very low population growth in the past twenty years (from 597,193 in 1996 to only 624,594 in 2016, which is < 5%). Since 2013, the total population in Vermont has actually declined by around 50 people. Review of the data for Indicator 1 found that 66% of the services that were not delivered timely was due to the availability of private therapists, while 29% was due to Early Intervention Practitioners (predominantly specialized instruction). Vermont has sought input from the Infant Toddler Coordinator's Association around strategies other states have used to improve timely services provided by private therapists.

Vermont has struggled to recruit and retain qualified professionals in many fields. CIS Early Intervention has experienced this in rising turnover of both Early Intervention practitioners and private therapists. While the State cannot increase provider reimbursement rates, work has been done to improve timely reimbursement to providers by mapping the billing process and determining areas for improvement such as ensuring regional CIS Early Intervention Programs are giving private therapists copies of all paperwork necessary to support not only their provision of services, but their billing processes as well.

With Technical Assistance from the Early Childhood Personnel Center, the State is currently examining ways the impact recruitment and retention of regional Early Intervention providers. A statewide recruitment and retention survey has been administered for the past two years to assist Vermont in identifying trends in the field and strategies for improvement. The survey results from this second year of data have recently been shared with regional contracted CIS provider agencies. State CIS staff, including those from the State Early Intervention program, will be meeting with regional agency leaders to interpret these data and identify strategies to support recruitment and retention efforts.

It is believed that, with technical assistance from ECPC, Vermont's Early Intervention personnel development needs will be able to leverage Vermont's broader system of early childhood services and professional development across disciplines. Since all early childhood professions have identified recruitment and retention issues similar to Early Intervention, Vermont believes it is critical to align our personnel development efforts and leverage our scarce resources. For the first time, in FY '17, Early Intervention training has been included in the State's contract for early childhood professional development. It is expected that aligning our training needs within this contract will ensure regular and strategic delivery of training that supports statewide access and streamlined registration, simplifying the process for practitioners. Vermont will continue to access technical assistance through ECPC to further support personnel recruitment and retention activities. Vermont understands that only with a sufficient quantity of qualified service providers, will Vermont's CIS Early Intervention program be able to provide services in a timely manner to infants and toddlers.

Over the past year, Vermont CIS Early Intervention has reviewed data with regions around all timeline indicators. With these reviews, the State identified a common reason for missing timelines, beyond provider capacity issues described above, was date calculation errors. This means, many timelines were missed by between one and five days due to regional Early Intervention Service Coordinators counting by months rather than counting actual calendar days. As a result of this discovery, the State provided guidance and technical assistance to regional CIS Early Intervention programs around the necessity to utilize date calculators: whether through database queries/calculators or through using on-line applications developed for this purpose. Many regions have seen improvement in meeting federally regulated timelines because of their implementation and utilization of date calculators. More improvement is expected in the coming year.

Finally, Vermont has been providing intensive technical assistance to the region of the state that serves almost a third of the total number of children receiving CIS Early Intervention Services in Vermont. This region accounted for 60% of the noncompliance in the timely provision of services. Through a monthly review of current data, the region with the State Technical Assistance staff are identifying root causes for delays in timely service provision.

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

The region has developed a system of automated reminders for staff around the federally regulated timelines, increased supervision around these, and have provided education to staff who have been identified as not understanding expectations around the timelines. Since this monthly data review with Technical Assistance began, the region has been able to become fully staffed and has seen a marked reduction in delays to the start of Early Intervention Services. This monitoring and technical assistance will continue until this region is able to assure timely delivery of services in compliance with the federal regulations.

### 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.

186

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).

Vermont's CIS Early Intervention program requires that all services be provided to an infant or toddler enrolled in the program within 30 days of the parent/caregiver's signed consent. Enrolled means that the child has been found eligible (due to a diagnosed condition or documented delay identified using a means-tested 5-domain assessment), and the parent/caregiver has agreed to engage with their infant/toddler in receiving services from the program.

An initial meeting is held with the family to discuss the child's eligibility, review the initial assessment, develop outcomes, including strategies, to address the child's needs, and identify services that the family feels would best enable them to help their child meet the identified outcomes. These decisions may take more than one meeting.

Once the child's family has decided on the plan for CIS Early Intervention Services, they sign the plan giving their consent for those planned services to be initiated. Services must be initiated within 30 calendar days of the parent/caregiver's signed consent, unless they have agreed to a later date (ex. the team with the family may plan on evaluations to be conducted at a later point to determine a child's progress, perhaps 4 months in the future, or for consultation to be provided as needed upon the request of the family).

In calculating this indicator, the State reviews all services for every enrolled child for which a parent/caregiver has provided their consent. The State reports on all services that have been delivered within 30 days of the date the parent/caregiver provided consent for those services to be initiated. For services planned to begin later than 30 days, the State also reviews to determine that those services were delivered as planned and consented to by the family. The timeliness of these services is also reported within this indicator.

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

- State monitoring
- State database

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

The data reported were from the period beginning July 1, 2016 through June 30, 2017.

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

**Data Method/Source:** Desk audit of entire FFY 2016 Part C State Database, July 1, 2016 through June 30, 2017. Vermont reports these data for all infants and toddlers enrolled at any point in Vermont's Children's Integrated Services Early Intervention Program within the reporting period.

### Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

### Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	3	0	1

### FFY 2015 Findings of Noncompliance Verified as Corrected

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

The State verified correction of noncompliance from a review of the State's database from July 1, 2015 through June 30, 2016. Through this review, the State was able to verify that three regions achieved 100% compliance for sixty days or more to the timely provision of services, demonstrating correction by initiating services in accordance with the federally regulated timelines within the FFY' 16 APR year.

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

The State reviewed the actual start dates of services within the State database. The actual start dates of services are provided by the regional CIS Early Intervention Programs to verify the date that services were initially provided to infants and toddlers enrolled within the program. The State was able to identify that each service planned and consented to by the family was ultimately provided in each instance where there was a finding of non-compliance, with the exception of one region.

### FFY 2015 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Vermont had one region that was unable to demonstrate correction to a finding of non-compliance. In the case where correction was not able to be verified, after investigation the State determined that the child for whom the service was not provided is no longer in the system.

As stated above in the explanation of slippage, Vermont's State CIS Early Intervention program is providing intensive technical assistance to this region to ensure the agency is able to correctly implement regulatory

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

requirements for Part C Early Intervention services. This technical assistance was intensified in October of 2017, as a result of the State being unable to identify correction to all cases where there was a finding of non-compliance.

The technical assistance includes monthly meetings with the organization contracted to provide CIS Early Intervention services within the region. These meetings include a review of the region's data for this indicator as queried from the State's database, a review of progress on individual cases, root cause analysis, identification of regional strategies or progress on strategies that have been implemented, and overall progress or regression of compliance with this indicator.

**FFY 2014 Findings Not Yet Verified as Corrected**

*Actions taken if noncompliance not corrected*

The regional agency contracted to provide CIS Early Intervention services that was not able to demonstrate compliance is receiving intensive intervention from the State to improve compliance in this area. This intensive technical assistance includes: monthly meetings to review of the region's data for this indicator as queried from the State's database, a review of progress on individual cases, root cause analysis, identification of regional strategies or progress on strategies that have been implemented, and overall progress or regression of compliance with this indicator.

**OSEP Response**

Because the State reported less than 100% compliance for FFY 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. In addition, the State must demonstrate, in the FFY 2017 SPP/APR, that the remaining uncorrected findings of noncompliance identified in FFY 2015 and FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2016 and each EIS program or provider with remaining noncompliance identified in FFY 2015 and FFY 2014: (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 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

**Required Actions**

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 2: Services in Natural Environments**

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)

**Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			94.00%	95.00%	95.00%	95.00%	96.10%	96.20%	96.20%	96.40%	96.60%
Data		98.00%	96.17%	97.00%	98.00%	98.00%	99.00%	99.70%	98.70%	98.88%	97.38%

FFY	2015
Target ≥	96.80%
Data	96.54%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target ≥	97.00%	97.20%	97.30%

Key:

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

**Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups	7/12/2017	<a href="#">Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</a>	932	
SY 2016-17 Child Count/Educational Environment Data Groups	7/12/2017	<a href="#">Total number of infants and toddlers with IFSPs</a>	959	

**FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
932	959	96.54%	97.00%	97.18%

**Actions required in FFY 2015 response**

none

**OSEP Response**

**Required Actions**



**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**  
**Indicator 3: Early Childhood Outcomes**

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)

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)? **No**

**Historical Data**

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2009	Target ≥						71.40%	61.00%	61.20%	61.40%	61.60%	61.60%
		Data					71.20%	60.80%	61.50%	64.20%	67.10%	66.67%	66.88%
A2	2009	Target ≥						66.30%	59.60%	59.80%	60.00%	60.00%	60.00%
		Data					66.10%	59.40%	57.70%	60.70%	62.60%	61.54%	62.13%
B1	2009	Target ≥						79.20%	68.10%	68.30%	68.50%	68.70%	68.90%
		Data					79.00%	67.90%	71.70%	75.90%	74.40%	71.57%	74.56%
B2	2009	Target ≥						58.20%	53.60%	53.80%	54.00%	54.20%	54.20%
		Data					58.00%	53.40%	50.50%	53.80%	54.50%	54.05%	55.20%
C1	2009	Target ≥						77.60%	73.10%	73.30%	73.50%	73.50%	73.50%
		Data					77.40%	72.90%	71.20%	76.50%	74.40%	74.31%	75.84%
C2	2009	Target ≥						65.90%	60.80%	61.00%	61.20%	61.40%	61.40%
		Data					65.70%	60.60%	62.00%	62.30%	62.60%	60.12%	60.21%

	FFY	2015
A1	Target ≥	61.60%
	Data	65.13%
A2	Target ≥	60.00%
	Data	60.90%
B1	Target ≥	69.10%
	Data	66.07%
B2	Target ≥	54.20%
	Data	49.21%
C1	Target ≥	73.50%
	Data	72.98%
C2	Target ≥	61.40%
	Data	64.01%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target A1 ≥	61.60%	61.60%	61.60%
Target A2 ≥	60.00%	60.00%	60.00%
Target B1 ≥	69.30%	69.50%	69.70%
Target B2 ≥	54.20%	54.20%	54.20%
Target C1 ≥	73.50%	73.50%	73.50%
Target C2 ≥	61.40%	61.40%	61.40%

Key:

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement



FFY 2016 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	653.00
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Outcome A: Positive social-emotional skills (including social relationships)

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	4.00	0.73%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	141.00	25.87%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	87.00	15.96%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	131.00	24.04%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	182.00	33.39%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
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 $(c+d)/(a+b+c+d)$ .	218.00	363.00	65.13%	61.60%	60.06%
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 $(d+e)/(a+b+c+d+e)$ .	313.00	545.00	60.90%	60.00%	57.43%

Reasons for A1 Slippage

Vermont has been receiving technical assistance from the Early Childhood Technical Assistance Center and the Center for IDEA Early Childhood Data Systems since the September of 2017, to address the needs for improvement in this area as identified in Vermont's Determination of Needs Assistance and Differentiated Monitoring by the Office of Special Education Programs. This technical assistance has helped the State to gain a greater understanding of the Child Outcomes Rating system and progress categories. In addition, Vermont is completing a self-assessment using a tool provided by these Centers to identify areas for improvement.

Some improvement strategies have been implemented: Based on feedback from regional Early Intervention program staff, in October, the State provided training to Early Intervention Service Coordinators and practitioners to support them in understanding the COS rating process and how to report COS data to the State. Also reviewed were how age-anchoring tools, family participation, and decision trees can support the rating process. Over 90% of Vermont's Early Intervention staff attended this meeting. The State provided additional technical assistance to address follow-up questions during the November and December monthly Technical Assistance calls with the regional Early Intervention programs.

During a collaborative meeting with the Vermont Interagency Council and regional Early Intervention Supervisors and Directors, State showed the video: *COS Data to OSEP Progress Categories/Summary Statements* produced by the Early Childhood Technical Assistance Center (ECTA) and the Center for IDEA Early Childhood Data Systems (<http://dasyonline.org/cos-osep-reporting>) to support practitioner's understanding of the developmental trajectories for child outcomes based on the Child Outcomes Progress Categories.

Vermont Early Intervention practitioners have been using the ECTA on-line training modules within their Quality Improvement Plans over FFY'16. It is believed that provider's improved understanding of the child outcomes rating process, especially practitioners learning that ratings need to consider development across settings for an area, caused rating accuracy to improve, and the slippage in this area is less a result of children not making as much progress, but rather ratings to more accurately reflect children's development upon exit. With more accurate rating at entry and exit, Vermont expects to begin to see these data reflect child progress in the coming years.

Vermont Part C and Part B/619 are collaborating in order to continue to support Early Intervention practitioner's ongoing professional development in accurately child outcomes ratings. With technical assistance from Early Childhood Technical Assistance Center (ECTA) and the Center for IDEA Early Childhood Data Systems, Vermont will be exploring hosting the ECTA learning modules on an in-state web site. This will enable Vermont to gather data around utilization of the modules and practitioner test results. These data will help Vermont ensure both new and seasoned practitioners are accessing the modules regularly and are demonstrating a solid knowledge of the content.

In FFY'15, Vermont had 37% of enrolled infants and toddlers exit with less than 6 months of service, with 63% having remained in the program for more than 6 months. In FFY'16, 34% of enrolled infants and toddlers exited with less than 6 months of service, while 66% received remained in the program for more than 6 months. This changing trend reflects what Early Intervention and other Children's Integrated Services practitioners have shared: children are entering the program at younger ages and with more complex needs and remaining in the program for longer.

With the Vermont Interagency Council and representatives from all twelve of Vermont's Early Intervention regional programs examined root causes behind Vermont's slippage in the Child Outcome indicators. It was determined that Vermont has seen an increase in the numbers of infants and toddlers enrolled in Vermont's Early Intervention services who have complex medical needs or are in the custody of the State's child protection system. In a review of the data for this APR, stakeholders found that these two populations exhibited the least improvement in Child Outcomes overall.

Children with complex medical diagnosis's and those in the custody of Vermont's child protection system miss more visits with service providers and experience more adverse childhood events/trauma than their same age peers. Stakeholders discussed the need for Vermont to consider ways in which we can improve our system of service delivery to these two populations to address the identified root causes. Vermont Early Intervention program, along with our stakeholders, will be seeking to identify strategies targeted to these two populations throughout this year.

Vermont's Children's Integrated Services collaborates with the Vermont Child Health Improvement Program and the Center on Disability and Community Inclusion the University of Vermont to address the needs of Vermont's infants and toddlers enrolled in Early Intervention services who have significant medical complexities. This project provides direct case consultation and targeted professional development to Early Intervention practitioners and therapists to support them to improve children's developmental functioning.

During the spring and summer of 2017, Vermont's Children's Integrated Services collaborated with the Agency of Education to improve referrals for children in State child protection custody to the Educational Surrogate program. Root cause analysis from the FFY'15 APR indicated that delays in assigning Educational Surrogates were causing delays in children getting enrolled in Early Intervention and starting to receive services. As a result of this collaborative work, Vermont has seen a significant improvement in the timeliness of assignment of Educational Surrogates, ensuring infants and toddlers in the custody of the State due to abuse or neglect receive timely Early Intervention services.

In the summer of 2017, Vermont's Children's Integrated Services collaborated with the Family Services Division of the Department for Children and Families (the State's child protection Division). This collaboration resulted in data sharing to identify which infants and toddlers enrolled in Early Intervention are also involved with the child protection system whether in custody, or because of significant safety concerns. While still being developed, it is believed that this data sharing will enable the State to identify strategies to improve communication at a regional level, resulting in a reduction of missed Early Intervention services.

Reasons for A2 Slippage

Vermont has broad eligibility, which means that children are found eligible for CIS Early Intervention Services if they have a developmental delay, regardless of degree, documented through a means-tested 5-domain assessment tool or have a diagnosed condition that may lead to a delay. In FFY '16, 653 children exited CIS Early Intervention Services having received at least six months of services, which was 66% of all children who entered the program. Of the 993 infants and toddlers who exited CIS Early Intervention services during this period, 552 (56%) exited with a delay resulting in their being found potentially eligible for Part B services (meaning they exhibited at least a 25% delay in at least one domain), while, overall, 724 (73%) exited with a disability of some degree.

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Initial root cause of the data for FFY '16's Child Outcomes has led Vermont's VICC, with stakeholder representation from all twelve regions of the state, to consider that Vermont's eligibility criteria and high degree of child find result in children who are near age-appropriate levels entering the program at very young ages and leaving the program meeting their outcomes at age appropriate levels with less than six months of services. Noticing the trend of fewer children exiting at age-appropriate levels, combined with higher numbers of children exiting with a disability of some degree, regional CIS Early Intervention program staff with the VICC questioned how many of the children receiving services for less than six months entered the program near or within the developmental levels of same-age peers, and how many exited at the level of same-age peers. To answer this question, in November of 2017, Vermont began to require COS ratings to be submitted for all children who enter and who exit the CIS Early Intervention program regardless of length of time in the program. With these data, Vermont expects to have additional information to inform or refute this theory. These data will be reviewed with the VICC and regional stakeholders in the fall of 2018.

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	6.00	1.10%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	155.00	28.44%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	131.00	24.04%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	174.00	31.93%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	79.00	14.50%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
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 $(c+d)/(a+b+c+d)$ .	305.00	466.00	66.07%	69.30%	65.45%
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 $(d+e)/(a+b+c+d+e)$ .	253.00	545.00	49.21%	54.20%	46.42%

### Reasons for B2 Slippage

Vermont has broad eligibility, which means that children are found eligible for CIS Early Intervention Services if they have a developmental delay, regardless of degree, documented through a means-tested 5-domain assessment tool or have a diagnosed condition that may lead to a delay. In FFY '16, 653 children exited CIS Early Intervention Services having received at least six months of services, which was 66% of all children who entered the program. Of the 993 infants and toddlers who exited CIS Early Intervention services during this period, 552 (56%) exited with a delay resulting in their being found potentially eligible for Part B services (meaning they exhibited at least a 25% delay in at least one domain), while, overall, 724 (73%) exited with a disability of some degree.

Initial root cause of the data for FFY '16's Child Outcomes has led Vermont's VICC, with stakeholder representation from all twelve regions of the state, to consider that Vermont's eligibility criteria and high degree of child find result in children who are near age-appropriate levels entering the program at very young ages and leaving the program meeting their outcomes at age appropriate levels with less than six months of services. Noticing the trend of fewer children exiting at age-appropriate levels, combined with higher numbers of children exiting with a disability of some degree, regional CIS Early Intervention program staff with the VICC questioned how many of the children receiving services for less than six months entered the program near or within the developmental levels of same-age peers, and how many exited at the level of same-age peers. To answer this question, in November of 2017, Vermont began to require COS ratings to be submitted for all children who enter and who exit the CIS Early Intervention program regardless of length of time in the program. With these data, Vermont expects to have additional information to inform or refute this theory. These data will be reviewed with the VICC and regional stakeholders in the fall of 2018.

### Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	1.00	0.18%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	111.00	20.48%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	69.00	12.73%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	182.00	33.58%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	179.00	33.03%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
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 $(c+d)/(a+b+c+d)$ .	251.00	363.00	72.98%	73.50%	69.15%
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 $(d+e)/(a+b+c+d+e)$ .	361.00	542.00	64.01%	61.40%	66.61%

### Reasons for C1 Slippage

Vermont has been receiving technical assistance from the Early Childhood Technical Assistance Center and the Center for IDEA Early Childhood Data Systems since the September of 2017, to address the needs for improvement in this area as identified in Vermont's Determination of Needs Assistance and Differentiated Monitoring by the Office of Special Education Programs. This technical assistance has helped the State to gain a greater understanding of the Child Outcomes Rating system and progress categories. In addition, Vermont is completing a self-assessment using a tool provided by these Centers to identify areas for improvement.

Some improvement strategies have been implemented: Based on feedback from regional Early Intervention program staff, in October, the State provided training to Early Intervention Service Coordinators and practitioners to support them in understanding the COS rating process and how to report COS data to the State. Also reviewed were how age-anchoring tools, family participation, and decision trees can support the rating process. Over 90% of Vermont's Early Intervention staff attended this meeting. The State provided additional technical assistance to address follow-up questions during the November and December monthly Technical Assistance calls with the regional Early Intervention programs.

During a collaborative meeting with the Vermont Interagency Council and regional Early Intervention Supervisors and Directors, State showed the video: *COS Data to OSEP Progress Categories/Summary Statements* produced by the Early Childhood Technical Assistance Center (ECTA) and the Center for IDEA Early Childhood Data Systems (<http://dasyonline.org/cos-osep-reporting>) to support practitioner's understanding of the developmental trajectories for child outcomes based on the Child Outcomes Progress Categories.

Vermont Early Intervention practitioners have been using the ECTA on-line training modules within their Quality Improvement Plans over FFY'16. It is believed that provider's improved understanding of the child outcomes rating process, especially practitioners learning that ratings need to consider development across settings for an area, caused rating accuracy to improve, and the slippage in this area is less a result of children not making

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

as much progress, but rather ratings to more accurately reflect children's development upon exit. With more accurate rating at entry and exit, Vermont expects to begin to see these data reflect child progress in the coming years.

Vermont Part C and Part B/619 are collaborating in order to continue to support Early Intervention practitioner's ongoing professional development in accurately child outcomes ratings. With technical assistance from Early Childhood Technical Assistance Center (ECTA) and the Center for IDEA Early Childhood Data Systems, Vermont will be exploring hosting the ECTA learning modules on an in-state web site. This will enable Vermont to gather data around utilization of the modules and practitioner test results. These data will help Vermont ensure both new and seasoned practitioners are accessing the modules regularly and are demonstrating a solid knowledge of the content.

In FFY'15, Vermont had 37% of enrolled infants and toddlers exit with less than 6 months of service, with 63% having remained in the program for more than 6 months. In FFY'16, 34% of enrolled infants and toddlers exited with less than 6 months of service, while 66% received remained in the program for more than 6 months. This changing trend reflects what Early Intervention and other Children's Integrated Services practitioners have shared: children are entering the program at younger ages and with more complex needs and remaining in the program for longer.

With the Vermont Interagency Council and representatives from all twelve of Vermont's Early Intervention regional programs examined root causes behind Vermont's slippage in the Child Outcome indicators. It was determined that Vermont has seen an increase in the numbers of infants and toddlers enrolled in Vermont's Early Intervention services who have complex medical needs or are in the custody of the State's child protection system. In a review of the data for this APR, stakeholders found that these two populations exhibited the least improvement in Child Outcomes overall.

Children with complex medical diagnosis's and those in the custody of Vermont's child protection system miss more visits with service providers and experience more adverse childhood events/trauma than their same age peers. Stakeholders discussed the need for Vermont to consider ways in which we can improve our system of service delivery to these two populations to address the identified root causes. Vermont Early Intervention program, along with our stakeholders, will be seeking to identify strategies targeted to these two populations throughout this year.

Vermont's Children's Integrated Services collaborates with the Vermont Child Health Improvement Program and the Center on Disability and Community Inclusion the University of Vermont to address the needs of Vermont's infants and toddlers enrolled in Early Intervention services who have significant medical complexities. This project provides direct case consultation and targeted professional development to Early Intervention practitioners and therapists to support them to improve children's developmental functioning.

During the spring and summer of 2017, Vermont's Children's Integrated Services collaborated with the Agency of Education to improve referrals for children in State child protection custody to the Educational Surrogate program. Root cause analysis from the FFY'15 APR indicated that delays in assigning Educational Surrogates were causing delays in children getting enrolled in Early Intervention and starting to receive services. As a result of this collaborative work, Vermont has seen a significant improvement in the timeliness of assignment of Educational Surrogates, ensuring infants and toddlers in the custody of the State due to abuse or neglect receive timely Early Intervention services.

In the summer of 2017, Vermont's Children's Integrated Services collaborated with the Family Services Division of the Department for Children and Families (the State's child protection Division). This collaboration resulted in data sharing to identify which infants and toddlers enrolled in Early Intervention are also involved with the child protection system whether in custody, or because of significant safety concerns. While still being developed, it is believed that this data sharing will enable the State to identify strategies to improve communication at a regional level, resulting in a reduction of missed Early Intervention services.

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

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	
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.	340

Please note that this data about the number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program is optional in this FFY16 submission. It will be required in the FFY17 submission.

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes

### List the instruments and procedures used to gather data for this indicator.

During the FFY '16 reporting period (July 1, 2016 through June 30, 2017), regional CIS Early Intervention contracted providers were required to submit child outcomes summary ratings using the decision tree developed and promulgated by Vermont's CIS Early Intervention State technical assistance staff in July 2014. These data are reported for children who have received services within Vermont's CIS Early Intervention Program for at least six months. The data from all infants and toddlers who exited from Vermont's Early Intervention services who received more than six months of services are entered the State's CIS data team and compiled within the Early Childhood Outcomes Child Outcomes Rating Calculator tool developed by the Early Childhood Technical Assistance Center. The results of this compilation are used to develop this report, as well as to inform the root cause analysis performed with stakeholders.

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

Vermont received Child Outcome Ratings for 545 infants and toddlers out of 653 infants and toddlers who exited the program who received at least 6 months of services. However, 3 children did not receive a reliable COS score for Indicator 3C. Therefore, the denominator for Indicator 3C is different. Vermont has begun more frequent data quality validation in FFY'17 in order to identify and resolve any such data anomalies from happening again.

Vermont had data reported on 83.5% infants and toddlers for whom Child Outcomes Ratings were required for this reporting period of July 1, 2016 through June 30, 2017. This is an increase from FFY'15, where Vermont had data reported on only 62% of infants and toddlers enrolled in Early Intervention, and only 54% in FFY'14. In late FFY '15, Vermont began quarterly data completeness validation. This validation was continued through FFY '16, which is believed to have led to this improvement. Beginning this year, Vermont intends to increase the frequency of data validation in order to ensure 100% data completeness.

Vermont's Child Count reported on April 1, 2017 was 959 children active in the program on December 1, 2016, an increase of over 11%. However, during the whole of this reporting period (July 1, 2016 through June 30, 2017) Vermont had 993 children active, which is an increase of only 3% over last year.

### Actions required in FFY 2015 response

none

### OSEP Response

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

States must report the following data starting with the FFY 2017 SPP/APR submission, due February 2019: (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.

### Required Actions

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 4: Family Involvement**

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)

**Historical Data**

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2011	Target ≥					80.00%	80.00%	81.00%		78.30%	78.30%	78.30%
		Data			83.00%	80.00%	86.00%	84.30%	79.20%	78.10%	79.43%	76.23%	82.63%
B	2011	Target ≥					85.00%	85.00%	86.00%		86.10%	86.10%	86.10%
		Data			85.00%	85.00%	89.00%	90.70%	87.00%	85.90%	85.11%	83.54%	79.78%
C	2011	Target ≥					85.00%	85.00%	88.10%		81.00%	81.00%	81.00%
		Data			87.00%	89.00%	93.00%	93.40%	78.00%	80.80%	80.43%	82.64%	75.86%

	FFY	2015
A	Target ≥	78.40%
	Data	85.27%
B	Target ≥	86.10%
	Data	88.96%
C	Target ≥	81.20%
	Data	84.21%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target A ≥	78.40%	78.50%	78.50%
Target B ≥	86.10%	86.10%	86.10%
Target C ≥	81.20%	81.20%	81.20%

Key:

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

**FFY 2016 SPP/APR Data**

Number of families to whom surveys were distributed	709.00
Number of respondent families participating in Part C	100% 709.00
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	272.00
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	333.00
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	293.00
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	333.00
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	283.00
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	333.00

	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their	85.27%	78.40%	81.68%

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
rights			
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	88.96%	86.10%	87.99%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	84.21%	81.20%	84.98%

**Was sampling used?** No

**Was a collection tool used?** Yes

**Is it a new or revised collection tool?** No

**The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.**  
Yes

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

The statewide return rate for the FFY 2016 Family Outcome survey was 47.81% which was an increase over last year's rate of 45.36%. Of the 709 surveys distributed, 339 were returned. 3 families only chose to write in narrative comments, rather than answer all of the survey questions. All narrative survey results were analyzed and included into Vermont's consideration of improvement strategies.

The Family Outcome survey is offered annually to all families who have been receiving services for a minimum of 6 months including those families who have exited within the 6-month period prior to the survey. 51 surveys mailed to exited families were returned as undeliverable. Beginning in 2018, Vermont is seeking to reduce this number by hand delivering to families during their transition from Part C.

In FFY 2014, Vermont instituted a new process to hand-deliver the Family Survey to Active families, in the hopes of improving the response rate. In FFY 2015 and again in FFY 2016, with additional Technical Assistance from DaSy and input from the VICC, Vermont saw our survey response significantly increase. Vermont's process has been enhanced and includes the following: prior to the first distribution of the survey, all selected families are mailed a postcard with information about the Family Survey and encouragement to respond when they receive the survey. The local CIS-EI service providers will again hand deliver the first pass survey to families. Local providers are also provided with talking points to assist them in encouraging families to respond. Lastly, the Family Survey packet includes a brochure explaining the results of the previous year's survey and the actions the State has taken based on results of the survey. The belief is that if families understand the value of the survey, they will take the time to respond. A second pass Family Survey was mailed to families who had not responded. These process changes resulted in a significant change to the response rate.

Vermont continues to focus on increasing our overall survey response rate to not only meet, but exceed our target. The increase in response rate in the past two years is very encouraging. By increasing our overall response rate, Vermont continues to believe we will receive a statistically representative sample of our demographic populations.

Vermont's method of selecting a Family Survey cohort is to select all active clients who have received at least 6 months of service and all clients who have exited the program since October 1 of 2016. By surveying all active clients in this method, Vermont assures that the survey responses are representative of the demographics of the state. Beginning January 2018, Vermont will begin to also hand-deliver surveys to families during their Transition from Part C to ensure we receive their input as well.

The State shared and discussed the Family Survey data results with regions in September of 2017. These discussions helped inform regional practice improvement strategies. The value of family engagement and family input into the State early childhood system is a key strategy in Vermont's State Systemic Improvement Plan. Sharing these data in a timely way with regional programs, and discussing how these data can inform improvement efforts confirms Vermont's commitment to this SSIP strategy and makes it relevant to early intervention programs.

**Actions required in FFY 2015 response**

none

**OSEP Response**

**Required Actions**



**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 5: Child Find (Birth to One)**

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)

**Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			0.91%	0.93%	0.94%	0.96%	0.98%	0.99%	0.99%	0.99%	0.99%
Data		1.10%	1.29%	1.36%	1.34%	1.12%	1.01%	1.21%	1.30%	1.51%	1.48%

FFY	2015
Target ≥	1.11%
Data	1.75%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target ≥	1.11%	1.11%	1.11%

Key:

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

**Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups	7/12/2017	<a href="#">Number of infants and toddlers birth to 1 with IFSPs</a>	125	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2016	6/22/2017	<a href="#">Population of infants and toddlers birth to 1</a>	6,051	null
TBD			null	

**FFY 2016 SPP/APR Data**

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
125	6,051	1.75%	1.11%	2.07%

**Compare your results to the national data**

Vermont's Child Find activities are comprehensive and include collaborative efforts among the Lead Education Agencies, Children's Integrated Services regional providers, Vermont Department of Health, physicians, child care and early education providers, Family Services child protection regional offices (beyond just CAPTA referrals), Help Me Grow (211), Vermont's Early Childhood Action Plan, universal screening and referral through Race to the Top Early Learning Challenge Grant-funded initiatives, and an aggressive campaign by "Let's Grow Kids: Focus on the First Years" (<https://www.letsgrowkids.org/>) to educate families about the importance of focusing on the health and development of infants and toddlers to ensure they reach their full potential. As a result, Vermont serves a slightly higher percentage of the overall population of infants and toddlers birth to age 1 than the national average (Vermont is .83 percentage points higher than the national average). Vermont's average age of children when they are found eligible for CIS-EI is 14 months. Due to Vermont's strong public health insurance, most Vermont children (~ 96%) have medical insurance, a medical home and receive required well-child check-ups, regardless of their family's income levels (~ 45% of Vermont's children receive some form of public health insurance).

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

**Actions required in FFY 2015 response**

none

**OSEP Response**

**Required Actions**

# FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 6: Child Find (Birth to Three)

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)

## Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			3.25%	3.28%	3.30%	3.40%	3.50%	3.50%	3.50%	3.60%	3.60%
Data		3.20%	3.45%	4.00%	3.90%	3.93%	4.23%	4.35%	4.22%	4.38%	4.38%

FFY	2015
Target ≥	3.70%
Data	4.96%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

## FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	3.80%	3.90%	3.90%

Key:

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

## Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups	7/12/2017	<a href="#">Number of infants and toddlers birth to 3 with IFSPs</a>	959	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2016	6/22/2017	<a href="#">Population of infants and toddlers birth to 3</a>	18,349	
TBD			null	

## FFY 2016 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
959	18,349	4.96%	3.80%	5.23%

## Compare your results to the national data

Vermont's Child Find activities are comprehensive and include collaborative efforts among the Lead Education Agencies, Children's Integrated Services regional providers, Vermont Department of Health, physicians, child care and early education providers, Family Services child protection regional offices (beyond just CAPTA referrals), Help Me Grow (211), Vermont's Early Childhood Action Plan, universal screening and referral through Race to the Top Early Learning Challenge Grant-funded initiatives, and an aggressive campaign by "Let's Grow Kids: Focus on the First Years" (<https://www.letsgrowkids.org/>) to educate families about the importance of focusing on the health and development of infants and toddlers to ensure they reach their full potential. As a result, Vermont serves a significantly higher percentage of the overall population of infants and toddlers birth to age 3 than the national average (Vermont is 2.11 percentage points higher than the national average). Vermont's average age of children when they are found eligible for CJS-EI is 14 months. Vermont has the smallest population of children birth to age 3 in the country, yet only 5 other states serve a higher percentage of their population in Part C than Vermont.

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

**Actions required in FFY 2015 response**

none

**OSEP Response**

**Required Actions**

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 7: 45-day timeline**

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)

**Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		79.80%	79.20%	93.00%	97.00%	97.00%	96.60%	96.80%	96.00%	95.57%	96.62%

FFY	2015
Target	100%
Data	90.76%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target	100%	100%	100%

**FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
721	1,095	90.76%	100%	95.98%
<b>Number of documented delays attributable to exceptional family circumstances</b> <i>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.</i>				330

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

- State monitoring
- State database

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

The data reported were from the period beginning July 1, 2016 through June 30, 2017.

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

**Data Method/Source:** Desk audit of entire FFY 2016 Part C State Database, July 1, 2016 through June 30, 2017. Vermont reports these data for all infants and toddlers enrolled at any point in Vermont's Children's Integrated Services Early Intervention Program within the reporting period.

**Actions required in FFY 2015 response**

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

### Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	7	0	0

### FFY 2015 Findings of Noncompliance Verified as Corrected

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

Over the past year, Vermont CIS Early Intervention has reviewed data with regions around all timeline indicators. With these reviews, the State identified a common reason for missing timelines, beyond provider capacity issues described in Indicator 1 above, was date calculation errors. This means, many timelines were missed by between one and five days due to regional Early Intervention Service Coordinators counting by months rather than counting actual calendar days. As a result of this discovery, the State provided guidance and technical assistance to regional CIS Early Intervention programs around the necessity to utilize date calculators: whether through database queries/calculators or through using on-line applications developed for this purpose. Many regions have seen improvement in meeting federally regulated timelines because of their implementation and utilization of date calculators. More improvement is expected in the coming year.

The State verified correction of noncompliance from a review of the State's database from July 1, 2015 through June 30, 2016. Through this review, the State was able to verify that all 7 regions achieved 100% compliance for sixty days or more completion of an initial evaluation and initial meeting held to develop the initial One Plan (Vermont's Individualized Family Services Plan - IFSP), demonstrating correction and compliance with the federally regulated timelines for this indicator.

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

The State reviewed the dates for completion of the initial evaluation and initial One Plan (Vermont's Individualized Family Services Plan - IFSP) within the State database. These dates are provided by the regional CIS Early Intervention Programs to verify the date that these activities were completed with families for infants and toddlers referred to the program. The State was able to identify that each infant and toddler ultimately received an initial evaluation and an initial meeting to develop their individualized plan was held in each instance where there was a finding of non-compliance.

### OSEP Response

Because the State reported less than 100% compliance for FFY 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2016 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

### Required Actions

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# FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

## Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

### Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		92.00%	93.00%	100%	99.00%	99.00%	99.00%	99.00%	98.00%	98.88%	100%

FFY	2015
Target	100%
Data	100%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

### FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

### FFY 2016 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

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
442	639	100%	100%	91.24%

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.

141

### Reasons for Slippage

Over the past year, Vermont has increased guidance and technical assistance around Indicator 8 due to a history of findings of non-compliance with Indicators 8B and 8C. In addition to this, as described in Indicator 1 and Indicator 7 above, over the past year, Vermont CIS Early Intervention has reviewed data with regions around all timeline indicators. With these reviews, the State identified a common reason for missing timelines, beyond provider capacity issues described above, was date calculation errors. This means, many timelines were missed by between one and five days due to regional Early Intervention Service Coordinators counting by months rather than counting actual calendar days. As a result of this discovery, the State provided guidance and technical assistance to regional CIS Early Intervention programs around the necessity to utilize date calculators: whether through database queries/calculation or through using on-line applications developed for this purpose. Many regions have seen improvement in meeting federally regulated timelines because of their implementation and utilization of date calculators. More improvement is expected in the coming year.

Along with clarification around timeline calculations, and with technical assistance provided by OSEP during the fall of 2017 based on Vermont's OSEP Determination and Differential Monitoring and Support, the State provided additional guidance to regions around the requirements of all of Indicator 8, including what is required for there to be a transition plan. Through talking with regional Early Intervention Providers, it was discovered that regional providers were interpreting this indicator to be required only for those infants and toddlers exiting Early Intervention services who are determined potentially eligible for Part B. Clarification around this requirement led the State to identify with regions 56 children who did not receive a transition plan, without steps and services who exited with a disability, but were not found to be potentially eligible for Part B (meaning they did not exhibit a delay of at least 25% in at least one domain of development). 40 of these instances of noncompliance were due to one region. This region was designated as 'Needs Intervention' by the State and has subsequently begun receiving intensive technical assistance in FFY'17. The State believes that this level of technical assistance will assist the region in making timely correction of all instances of noncompliance and reduce future noncompliance.

With additional guidance around date calculators and the requirement that all children exiting with a disability receive a transition plan with steps and services, regional CIS Early Intervention Programs have shared that they and staff now fully understand the requirement of this regulation and are implementing this requirement correctly. Indicator 8 data are being reviewed with regions on a regular basis in the current federal fiscal year to ensure ongoing compliance.

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

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

- State monitoring
- State database

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

The data reported were from the period beginning July 1, 2016 through June 30, 2017.

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

**Data Method/Source:** Desk audit of entire FFY 2016 Part C State Database, July 1, 2016 through June 30, 2017. Vermont reports these data for all infants and toddlers enrolled at any point in Vermont's Children's Integrated Services Early Intervention Program within the reporting period.

Provide additional information about this indicator (optional)

During this reporting period, 141 infants and toddlers exited Part C, CIS-Early Intervention Services, without a timely Transition Plan as required due to family circumstances that included: parents did not consent to a transition plan; the child was exited from CIS-EI due to 'loss to contact' - meaning the child's family stopped attending/being home for scheduled CIS-EI services, did not return repeated attempts to contact, and finally did not respond to letters mailed to their last known mailing address; or the family was unable to meet within the time frame required by regulations due to family and/or the child's needs (these included vacations, hospitalizations, or cancellations of scheduled meetings without reason).

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

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

OSEP Response

Because the State reported less than 100% compliance for FFY 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2016 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

Required Actions

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 8B: Early Childhood Transition**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

**Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		79.50%	94.00%	95.00%	99.60%	99.00%	98.00%	99.00%	99.00%	89.47%	86.71%

FFY	2015
Target	100%
Data	88.31%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target	100%	100%	100%

**FFY 2016 SPP/APR Data**

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

- Yes
- No

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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
423	467	88.31%	100%	90.58%

<p><b>Number of parents who opted out</b> 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.</p>	null
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**Describe the method used to collect these data**

Over the past year, Vermont has increased guidance and technical assistance around Indicator 8 due to a history of findings of non-compliance with Indicators 8B and 8C and the State's OSEP Determination and Differentiated Monitoring and Support. In response to these, as described in Indicator 1 and Indicator 7 above, over the past year, Vermont CIS Early Intervention has reviewed data with regions around all timeline indicators. With these reviews, the State identified a common reason for missing timelines, beyond provider capacity issues described above, was date calculation errors. This means, many timelines were missed by between one and five days due to regional Early Intervention Service Coordinators counting by months rather than counting actual calendar days. As a result of this discovery, the State provided guidance and technical assistance to regional CIS Early Intervention programs around the necessity to utilize date calculators: whether through database queries/calculators or through using on-line applications developed for this purpose. Many regions have seen improvement in meeting federally regulated timelines because of their implementation and utilization of date calculators. More improvement is expected in the coming year.

In addition to improvement activities engaged in during the reporting period, on October of 2017, Vermont's Part B and Part C State Coordinators and staff provided training to over 90% of CIS Early Intervention service coordinators and representatives from supervisory union from every region of the state. The State Part C Coordinator provided additional guidance and technical assistance to CIS Early Intervention programs in November and December in person and during the monthly technical assistance call with these programs. The guidance was intended to support ongoing improvement to Indicator 8B and 8C.

Based on these improvement activities, Vermont expects to see continued improvement in the coming federal reporting year.

In addition to all required LEA notifications, 85 children were referred less than 90 days from their third birthday. Of these, 78 had LEA notifications sent with their parent/guardian's consent. This practice enables Vermont to ensure children who may be potentially eligible for Part B receive referrals, even if they did not receive Part C services due to late referrals.

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

Data around LEA notifications are reported to the State monthly by regional CIS Early Intervention Programs. These data are entered into the State's database and reviewed for completeness and compliance. Data anomalies and non-compliance are brought to the attention of the regional programs during monthly calls held with the CIS Data Manager. Data are received for all children exiting the CIS Early Intervention Program. The State reports on this indicator using the data compiled from the State's database.

Do you have a written opt-out policy? No

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

- State monitoring
- State database

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

The data reported were from the period beginning July 1, 2016 through June 30, 2017.

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

**Data Method/Source:** Desk audit of entire FFY 2016 Part C State Database, July 1, 2016 through June 30, 2017. Vermont reports these data for all infants and toddlers enrolled at any point in Vermont's Children's Integrated Services Early Intervention Program within the reporting period.

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

**Correction of Findings of Noncompliance Identified in FFY 2015**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	8	0	1

**FFY 2015 Findings of Noncompliance Verified as Corrected**

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

The State verified correction of noncompliance from a review of the State's database from July 1, 2015 through June 30, 2016. Through this review, the State was able to verify that 8 of the 9 regions achieved 100% compliance for sixty days or more for whom the Lead Education Agency and State Education Agency were notified that the child may be potentially eligible for Part B services, demonstrating correction and compliance with the federally regulated timelines for this indicator and in accordance with the State's potential eligibility rules. The one region for whom compliance was not able to be verified was only able to demonstrate compliance for fifty-nine consecutive days.

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

The State reviewed the dates for notification of potential eligibility being sent to the Lead Education Agency (LEA) and the State Education Agency (SEA). These dates are provided by the regional CIS Early Intervention Programs at the same time as the regional programs send the State Education Agency notification to the State's data team. The State data team enters these dates in the State's database. The State was able to identify that notification of potential eligibility was ultimately sent to the LEA and SEA for each infant and toddler for each instance where there was a finding of non-compliance. An area of non-compliance the State was able to identify was when potential eligibility was not determined timely because the family refused to participate in this activity. Guidance was provided to regions that, since Vermont does not have an 'opt out' policy, potential eligibility needed to be determined for every child with a disability between six months and 90 days of their third birthday regardless of the family's willingness to participate. This has led to improvement with this Indicator.

**FFY 2015 Findings Not Yet Verified as Corrected**

Actions taken if noncompliance not corrected

The regional agency contracted to provide CIS Early Intervention services that was not able to demonstrate compliance is receiving additional technical assistance to understand the regulations related to determination of Potential Eligibility. In addition, the State CIS Data Manager has been conducting calls monthly with the region to support data reporting and timely correction of non-compliance. It is expected that with these interventions, the region will demonstrate improved compliance during the current federal fiscal year.

**OSEP Response**

Because the State reported less than 100% compliance for FFY 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. In addition, the State must demonstrate, in the FFY 2017 SPP/APR, that the remaining uncorrected finding of noncompliance identified in FFY 2015 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2016 and each EIS program or provider with remaining noncompliance identified in FFY 2015: (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 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

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# FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

## Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

### Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		83.00%	91.00%	97.00%	98.00%	98.00%	99.00%	99.00%	99.00%	95.76%	96.91%

FFY	2015
Target	100%
Data	92.08%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

### FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

### FFY 2016 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

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
318	467	92.08%	100%	87.94%

<b>Number of toddlers for whom the parent did not provide approval for the transition conference</b> <i>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.</i>	11
<b>Number of documented delays attributable to exceptional family circumstances</b> <i>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 at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.</i>	83

### Reasons for Slippage

Over the past year, Vermont has increased guidance and technical assistance around Indicator 8 due to a history of findings of non-compliance with Indicators 8B and 8C, as well as OSEP's Determination and Differentiated Monitoring and Support. In addition to this, as described in Indicator 1 and Indicator 7 above, over the past year, Vermont CIS Early Intervention has reviewed data with regions around all timeline indicators. With these reviews, the State identified a common reason for missing timelines, beyond provider capacity issues described above, was date calculation errors. This means, many timelines were missed by between one and five days due to regional Early Intervention Service Coordinators counting by months rather than counting actual calendar days. As a result of this discovery, the State provided guidance and technical assistance to regional CIS Early Intervention programs around the necessity to utilize date calculators: whether through database queries/calculators or through using on-line applications developed for this purpose. Many regions have seen improvement in meeting federally regulated timelines because of their implementation and utilization of date calculators.

Due to continued slippage during this reporting period, on October of 2017, Vermont's Part B and Part C State Coordinators and staff provided training to over 90% of CIS Early Intervention service coordinators and representatives from supervisory union from every region of the state. The training was intended to ensure Part B and Part C providers understood their roles and responsibilities in the transition process in accordance with federal regulations and the State's Interagency Agreement. The State Part C Coordinator provided additional guidance and technical assistance to CIS Early Intervention programs in November and December in person and during the monthly technical assistance call with these programs. The guidance was intended to support ongoing improvement to Indicator 8B and 8C.

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

On January 19, 2018, in preparation for the submission of this APR, the State, with the VICC and stakeholders from each of the 12 regions of the State reviewed the data and considered root causes. It was noted that 12 of 56 instances of non-compliance were attributable to the school in some way. In addition, another 12 instances of non-compliance were attributable to the providers not completing the determinations of potential eligibility on time due to the Service Coordinators pursuing specialty evaluations to make this determination rather than relying on their completion of a means-tested five-domain assessment and informed clinical opinion or updates to specialty evaluations provided by therapists serving the infants and toddlers. 33 were due to other provider administrative reasons.

The State believes that the guidance provided in the fall of 2017, as well as regions fully implementing electronic date calculators will lead to improvement in some of the root causes of non-compliance to this indicator. However, in order to address non-compliance due to the schools, the State Part B and Part C Coordinators are will be updating the State Interagency Agreement by the spring of 2018. The purpose of this update is to clarify the roles and responsibilities of the schools and the Early Intervention Service Coordinators and providers in the provision of timely Transition Conferences.

Once the State Interagency Agreement is updated, it will be shared with the regions and the schools and Part C programs will be required to update their regional Interagency Agreements. This strategy is expected to yield additional improvements in ensuring Vermont Early Intervention providers understand and comply with this federal timeline. However, since changes will not be fully implemented during FFY '17, it is expected that significant improvement may not be evident in Vermont's data until FFY '18.

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

- State monitoring
- State database

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

The data reported were from the period beginning July 1, 2016 through June 30, 2017.

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

**Data Method/Source:** Desk audit of entire FFY 2016 Part C State Database, July 1, 2016 through June 30, 2017. Vermont reports these data for all infants and toddlers enrolled at any point in Vermont's Children's Integrated Services Early Intervention Program within the reporting period.

### Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

### Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	4	0	1

### FFY 2015 Findings of Noncompliance Verified as Corrected

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

The State verified correction of noncompliance from a review of the State's database from July 1, 2015 through June 30, 2016. Through this review, the State was able to verify that 4 of the 5 regions achieved 100% compliance for sixty days or more for whom a transition conference was required for children who were found potentially eligible for Part B services, demonstrating correction and compliance with the federally regulations for this indicator and in accordance with the State's rules.

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

The State reviewed the dates for transition conferences for all children who were determined to be potentially eligible for Part B services. These dates are provided by the regional CIS Early Intervention Programs to the State on a monthly basis. The State data team enters these dates in the State's database. The State was able to identify that in all but one region, transition conferences were held for child for each instance where there was a finding of non-compliance. The State uses data aggregated from the State's database for reporting on this indicator.

### FFY 2015 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The regional agency contracted to provide CIS Early Intervention services that was not able to demonstrate compliance is receiving additional technical assistance to understand the regulations related to their role in ensuring timely transition conferences are held for each child who has been determined potentially eligible and whose family has consented to a conference. In addition, the State CIS Data Manager has been conducting calls monthly with the region to support data reporting and timely correction of non-compliance. It is expected that with these interventions, the region will demonstrate improved compliance during the current federal fiscal year.

### FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The regional agency contracted to provide CIS Early Intervention services that was not able to demonstrate compliance is receiving additional technical assistance to understand the regulations related to their role in ensuring timely transition conferences are held for each child who has been determined potentially eligible and whose family has consented to a conference. The State's Part C Coordinator will be meeting with this region's Early Intervention Providers and schools to further clarify roles and responsibilities of each in the transition process. In addition, the State CIS Data Manager has been conducting calls monthly with the region to support data reporting and timely correction of non-compliance. It is expected that with these interventions, the region will demonstrate improved compliance during the current federal fiscal year.

### OSEP Response

Because the State reported less than 100% compliance for FFY 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. In addition, the State must demonstrate, in the 7/2/2018

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

FFY 2017 SPP/APR, that the remaining uncorrected findings of noncompliance identified in FFY 2015 and FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2016 and each EIS program or provider with remaining noncompliance identified in FFY 2015 and FFY 2014: (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 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

**Required Actions**

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**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 9: Resolution Sessions**

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures under section 615 of the IDEA are adopted).

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

**Historical Data**

Baseline Data:

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥											
Data											

FFY	2015
Target ≥	
Data	

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target ≥			

Key:

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

**Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2016-17 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/1/2017	<a href="#">3.1(a) Number resolution sessions resolved through settlement agreements</a>	n	null
SY 2016-17 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/1/2017	<a href="#">3.1 Number of resolution sessions</a>	n	null

**FFY 2016 SPP/APR Data**

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
0	0			0%

**Actions required in FFY 2015 response**

none

**OSEP Response**

The State reported fewer than ten resolution sessions held in FFY 2016. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

**Required Actions**



**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 10: Mediation**

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)

**Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥											
Data											

FFY	2015
Target ≥	
Data	

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2016 - FFY 2018 Targets**

FFY	2016	2017	2018
Target ≥			

Key:

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

**Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2016-17 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	<a href="#">2.1.a.i Mediations agreements related to due process complaints</a>	n	null
SY 2016-17 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	<a href="#">2.1.b.i Mediations agreements not related to due process complaints</a>	n	null
SY 2016-17 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	<a href="#">2.1 Mediations held</a>	n	null

**FFY 2016 SPP/APR Data**

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
0	0	0			

**Actions required in FFY 2015 response**

none

**OSEP Response**

The State reported fewer than ten mediations held in FFY 2016. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

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**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 11: State Systemic Improvement Plan**

Monitoring Priority: General Supervision

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

**Reported Data**

Baseline Data: 2013

FFY	2013	2014	2015	2016
Target		52.10%	54.00%	57.00%
Data	52.10%	74.14%	76.63%	68.88%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  
Blue – Data Update

**FFY 2017 - FFY 2018 Targets**

FFY	2017	2018
Target	62.00%	68.00%

Key:

**Description of Measure**

Vermont CIS-EI will measure progress on the SIMR by reporting data on the three regions selected to implement targeted supports. The goal of these targeted supports is to help these regions improve results for child outcome 3A, summary statement 1: the percentage of infants and toddlers with One Plans who demonstrate substantially improved positive social and/or emotional skills by the time they exited Part C services.

Vermont's SIMR is: Vermont families are able to help their infants and toddlers develop and learn functional social and/or emotional skills, and infants and toddlers substantially improve their social and/or emotional functional development. Therefore, while only reporting on Child Outcome 3A within the indicator measure, Vermont is monitoring data on both:

*Child Outcome 3A summary statement 1: Increasing the percentage of infants and toddlers who show substantial growth in positive social-emotional skills.*

and,

*Family Outcome 4C: CIS-EI has helped me to help my child develop and learn.*

Therefore, in addition to reporting data for Indicator 3A Summary Statement 1 for those regions implementing evidence-based targeted supports, Vermont also will report data for the Indicator 4C for regions implementing the evidence-based targeted supports.

2015, Indicator 4C: 86.1% of families report that Vermont Part C helped them to help their child develop and learn.

2016, Indicator 4C: 85.8% of families report that Vermont Part C helped them to help their child develop and learn.

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

**Overview**

**Data Analysis**

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., EIS program and/or EIS provider, geographic region, race/ethnicity, socioeconomic status, gender, etc.) As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

**Analysis of State Infrastructure to Support Improvement and Build Capacity**

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, 7/2/2018

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

### State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and Their Families

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and learn)).

Statement

Description

### Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

### Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

**Submitted Theory of Action:** No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

### Infrastructure Development

- Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
- Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

### Support for EIS programs and providers Implementation of Evidence-Based Practices

- Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

## FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

### Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

### Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

**FFY 2016 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Certify and Submit your SPP/APR**

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.

**Selected:** Designated by the Lead Agency Director to certify

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

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Title: CIS Part C Administrator

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