

**State Performance Plan / Annual Performance Report:
Part C**

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

**For reporting on
FFY18**



PART C DUE February 3, 2020

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

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 March 2019, 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 prenatally through age six to 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 are able to achieve their full potential.

Vermont's Part C Early Intervention services are known as CIS Early Intervention services. The State of Vermont contracts with 12 regional non-profit, community-based organizations to deliver CIS services. Early Intervention services are most often provided by regionally based parent-child centers under those contracts. Vermont CIS Early Intervention provides some form of service to approximately 2,100 children annually (up from 1,600 in FY '13).

Vermont's CIS Early Intervention services are delivered as part of the broader CIS multidisciplinary service array. CIS Services are provided to:

1. Pregnant/Postpartum women who desire to stay healthy, promote the health and development of their child, and/or have questions or concerns about a situation impacting 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 Child Abuse Prevention and Treatment Act (CAPTA);
3. multidisciplinary assessment as needed or upon the request of a family;
4. identification of a primary service coordinator who works with families 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 multi-disciplinary team 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 outcomes are successfully met, for children at age 3 who have a disability needing Part B services, or for families whose children have aged out of CIS services but who may benefit from other community supports).

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 include the use of 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. They include Parents as Teachers, and the Maternal Early Childhood Sustained Home Visiting model paired with the Family Partnership Model. CIS Early Intervention practitioners use a variety of evidence-based screening and assessment tools to support the identification of developmental delays, development of appropriate outcomes and delivery of strategies to support developmental gains. CIS Early Intervention practitioners may use the Brazelton Touchpoints method, Ages and Stages Learning Activities, and the Early Start Denver Model to support the development of infants and toddlers receiving Part C services.

CIS services, including CIS Early Intervention, are available year-round. Service delivery occurs in the natural environments of the family 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 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 an emphasis on: infrastructure; outreach; referral and intake; multidisciplinary screening and assessment; integrated services planning; service delivery; and transition; and
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 that includes: The CIS Director, Data Manager, and Program Coordinators for home visiting (both nursing and family support), early intervention, early childhood and family mental health, and specialized child care services. Data are collected and monitored by this team. This team is responsible for the quality of service provision and general supervision for adherence to Part C of the Individuals with Disabilities Education Act federal regulations and State rules.

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 a foundation for ongoing improvement. The Vermont Early Intervention Program adopted the following data statement to define the value of data to our ongoing improvement efforts:

Data illuminates' 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.

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 a child's public or private insurance is obtained from a child's family/guardian and a copy given to all service providers named in the child's individualized family services plan (IFSP) known as the One Plan. A copy of this consent is also kept in the child's file. Families with private insurance can request additional financial assistance to help cover co-pays or deductibles in order to ensure entitled services are provided at no cost to the family.

Supervision and Monitoring:

CIS contract monitoring includes client file reviews for adherence to contractual requirements and federal IDEA Part C timelines. Regions receive a monitoring summary including identified areas of strength and areas in need of improvement and 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 and that CIS Early Intervention services are delivered in accordance with IDEA Part C Regulations, and Vermont Special Education Rules.

CIS Early Intervention agencies must have copies on site 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. As co-leads, CIS Early Intervention and Vermont's Part B (delivered by the Agency of Education) collaborate and review current rules, policies and procedures to ensure compliance with the Part C federal regulations and the State of Vermont Special Education Rules, and provide training and technical assistance to CIS Early Intervention Programs.

The State CIS Early Intervention program posts for the public the Vermont Part C Early Intervention State Performance Plan and Annual Performance Report (http://dcf.vermont.gov/cdd/reports/IDEA_Part_C). The State and CIS programs use these data for continuous quality assurance. All Monitoring Reports, letters of findings of noncompliance, determination letters, Quality Improvement Plans, and Regional Interagency Agreements are kept on file by the State CIS Early Intervention program. The CIS State administrative team and key partners review the publicly reported data, contract monitoring reports to ensure compliance with IDEA. Quality Improvement Plans created by the CIS Early Intervention agencies, including activities and evaluation measures, are reviewed to ensure all activities are carried out as planned.

The State CIS Data Manager ensures all monthly data submitted by the CIS Early Intervention agencies is complete, valid and reliable. The CIS Data Manager monitors these data to ensure any non-compliance is corrected within one year of identification. All data are submitted manually by CIS Early Intervention agencies by the 8th of each month and manually entered by State CIS Early Intervention Staff into the State's database. The State CIS Early Intervention data management system and process enables Vermont to review and verify each data element required 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 validate their data or correct their interpretation of federal regulations to ensure compliance in the delivery of Part C services.

Child and family outcomes are reviewed annually 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 programs who have identified instances 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 and input prior to submission. The State CIS Early Intervention program reviews the APR data with the VICC annually for their input, advice and assistance to consider root causes of non-compliance, set targets when required, and identify activities to support continuous quality improvement.

The VICC co-hosts, with the State CIS Early Intervention team, the annual determinations meeting with the 12 Regional CIS Early Intervention host agencies. VICC members support the CIS Early Intervention agency staff, CIS Coordinators, and other stakeholders who attend, to review their annual data, determinations and any findings of non-compliance, and develop strategies for quality improvement to address any non-compliance and ensure adherence to federal Part C regulations.

At this meeting, and afterwards, 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

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. This process is posted on the web at: <https://education.vermont.gov/student-support/special-education/family-resources>. 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. 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.

Finally, families are informed by CIS Early Intervention host agency staff about and have access to information about Procedural Safeguards online from Vermont Family Network (VFN), Vermont's Parent Training Information Center (<https://www.vermontfamilynetwork.org/resources/archived-webinars/special-education-webinars-archived/>). In addition to written information, VFN has produced a video to support parents' understanding on how to file an administrative complaint: <https://www.youtube.com/watch?v=10Lzcfg3Uil&feature=youtu.be>

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 program staff as follows:

1. The State CIS Early Intervention hosts monthly teleconferences with the regional CIS Early Intervention host agencies. The teleconferences are 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 provides monthly technical assistance calls with each regional CIS Early Intervention program. The calls are 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 practitioners to support understand of federal regulations, State Rules, or State policies. Technical assistance includes the use of materials, trainings and technical assistance from the Early Childhood Technical Assistance center (ECTA), the Center for IDEA Early Childhood Data Systems (DaSy), IDEA Data Center (IDC), and the National Center for Systemic Improvement (NCSI).
4. The State CIS Early Intervention staff provides technical assistance to regions based on results of Family Outcomes and Child Outcomes. This includes the following steps:
 - i. Inclusion of the regional CIS Early Intervention practitioners in a review of the Outcomes results, so that all practitioners and service coordinators are aware of their region's performance on child and family outcomes and can participate in quality improvement plan development.
 - ii. Analysis of the data and identification of contributing factors with the regional CIS Early Intervention staff, using ECTA Contributing Factors tool (<http://ectacenter.org/topics/gensup/interactive/step3/consider2.asp>) and the Relationship of Quality Practices to Child and Family Outcome Measurement (https://ectacenter.org/~pdfs/eco/QualityPracticesOutcomes_2012-04-17.pdf).
 - iii. Facilitated discussions with regional CIS Early Intervention practitioners during monthly teleconferences around techniques used by CIS Early Intervention practitioners across the state for improving child and family outcomes.

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, at the OSEP Leadership Institute and the DaSy Improving Data, Improving Outcomes conference 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.
3. the IDEA Data Center to support the State in identifying and implementing strategies to improve compliance with providing timely transition plans, notification to lead education agencies (LEAs) and transition conferences for children may be potentially eligible for Part B services.
4. 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.
5. the National Center for Systemic Improvement through technical assistance and as a member of the Cross-State Learning Collaborative to improve Family Outcomes.

Professional Development System:

The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.

The 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 access the CDD CIS Website (<https://cispartners.vermont.gov/>), 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, 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..."

CIS Early Intervention host agencies are required to submit proof of the staff qualifications the State to assure that all Early Intervention staff meet the Vermont Part C requirement of holding a bachelor's degree in early childhood or a related field. CIS maintains a list of all CIS practitioners who have attained and maintain a Vermont CIS Early Intervention Certificate.

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. The State contracts with the Community College of Vermont to provide training in the State-approved, evidence-based five-domain assessment tools. 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. The State partners with the Vermont Department of Health to provide training for the evidence-based home visiting models used by CIS. Trainings are provided in person or via webinars.

The State supports the University of Vermont (UVM), Vermont's University Center for Excellence in Developmental Disabilities (UCEDD), to pursue grants that support students attaining special education degrees. The most recent award, which began in 2019, supports master's-level inter-professional education across speech language pathology and early intervention/early childhood special education. Students receiving tuition assistance through this grant will have a service obligation following graduation to work in the field. It is hoped that this will support a much-needed gap in capacity for both speech and early intervention. The State Part C Coordinator also presents at UVM to bachelor's and master's students on understanding the documentation requirements for Part C. The State provides a contract to the UVM Center for Disability and Community Inclusion (CDCI) to provide training and consultation to regional early intervention teams, including families, to support the development of medically complex infants and toddlers.

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. The Vermont Higher Education Collaborative and Castleton Summer Institute
3. Early Multi-Tiered System of Supports, in collaboration with Part B/619
4. VT LEND (Leadership Education in Neurodevelopmental and Related Disabilities) program, which provides long-term, graduate level interdisciplinary training and interdisciplinary services and care.

The State CIS program collaborates with the Child Development Division's Statewide Systems and Community Collaboration unit, Northern Lights Career Development Center, and the Agency of Education, with technical assistance from the Early Childhood Personnel Center (ECPC), to optimize Vermont's Comprehensive System of Personnel Development (CSPD). A significant activity of Vermont's CSPD is an annual recruitment and retention survey, which is compared against national benchmarks. This survey helps Vermont gain understanding of the demographics, needs, and pressures of regional practitioners to support professional development and ongoing strategies for the recruitment and retention of the workforce.

This State hosts a CIS Institute annually. The topic(s) of the institute and follow-up supports for incorporation of information into practice are selected with significant input from CIS practitioners. The State seeks to be responsive to the needs of practitioners while providing a high-quality learning opportunity that incorporates best practices in adult learning modalities. The institute focuses on building practitioner skills to effectively engage families. Practitioners share that with increasingly complex family constellations and needs, having the skills to effectively engage families is critical to improving outcomes for children and families.

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 developed a renewal process for this certification, which is being implemented in 2020. The renewal requirements are intended to align with opportunities for professional growth and ongoing supervision. The renewal process approach was informed by evidence-based effective personnel recruitment and retention practices learned from technical assistance provided by the Early Childhood Personnel Center.

Stakeholder Involvement:

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

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

The VICC hosts a meeting with representatives from each of the state's 12 regional Early Intervention Programs annually each November. The purpose of this meeting is to discuss regional Early Intervention Program data and determinations made using data collected between July 1st the previous year through June 30th of the current year. These are the data that Vermont prepares for the Annual Performance Report due to OSEP in February. These data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.

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 an updated outreach rack card, VICC Orientation Manual, and publicly reports VICC information on a new VICC web site (<http://cispartners.vermont.gov/vicc>). In addition, in 2018, the VICC engaged with regional CIS Early Intervention programs to host two VICC meetings at a regional level and intentionally outreached to engage parents to participate in these meetings. The meetings were facilitated in a family-friendly manner in order to successfully engage those parents who attended as full participants with the regular VICC members. The success of these meetings was evaluated by the VICC and will inform next steps for future regional meeting strategies. In FFY 2019 the VICC will be examining additional ways to involve families or get their input into CIS services and initiatives, such as the annual CIS Institute.

In addition to leading the VICC and CIS family engagement efforts, Vermont's CIS Family Engagement Coordinator works with Vermont's Building Bright Futures (BBF) Early Childhood Advisory Council on activities that seek to engage families around early childhood issues statewide. CIS, the VICC, and BBF Council are coordinating their family engagement activities to ensure alignment across these systems and maximize the effectiveness of strategies that are implemented.

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 practitioners 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 Vermont Family Network, Vermont's Parent Training and Information Center, 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; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

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

YES

Reporting to the Public:

How and where the State reported to the public on the FFY 2017 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2017 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2017 APR in 2019, is available.

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. 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: https://dcf.vermont.gov/cdd/reports/part_c#Public_Reporting. This Public Reporting contains data from each regional CIS Early Intervention (EI) Program related to compliance and results indicators contained in the State Performance Plan. The State is in the process up updating the reporting format so it is more readable for the public to follow regional and statewide trends across indicators. Currently, 2014-2018 APR data are updated using the new format by clicking on "Vermont Part C Data". The older data are still presented using the State's previous format on this page by clicking "Public Reporting contains data from each regional CIS Early Intervention (EI) Program related to compliance and results indicators contained in the State Performance Plan". The State intends to update all historical publicly reported data to this new format by the end of this year.
4. August/September: Regional Early Intervention Programs are provided with statewide and regional data results from the annual family survey conducted between March and June of the present year.
5. November: The Vermont Interagency Coordinating Council and representatives from each of the state's 12 regional Early Intervention Programs meet together. The purpose of this meeting is to discuss progress on the State Performance Plan including statewide and regional Early Intervention Program data collected between July 1st the previous year through June 30th of the current year. These are the data that Vermont prepares for the Annual Performance Report due to OSEP in February. These data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.
6. 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.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

The State's determinations for both 2018 and 2019 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 18, 2019 determination letter informed the State that it must report with its FFY 2018 SPP/APR submission, due February 3, 2020, 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 Four, of the State Systemic Improvement Plan (SSIP), indicator C-11, by April 1, 2020. The State provided the required information. The State provided a target for FFY 2019 for this indicator, and OSEP accepts the target.

Intro - Required Actions

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

The State's IDEA Part C determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

Baseline	2005	86.40%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	97.36%	97.14%	93.00%	88.08%	89.51%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1,305	1,465	89.51%	100%	96.66%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of 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.

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).

Timely receipt of services is calculated from the date a parent/guardian signs their consent for services to begin and the actual first date each service from the One Plan (IFSP) is provided.

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

State database

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

July 1, 2018 through June 30, 2019.

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

In calculating this indicator, the State conducts a desk audit of all services for every enrolled child for which a parent/caregiver has provided their consent for services on a One Plan (IFSP). The State reports a client case as 'compliant' for this indicator if all services on the child's One Plan (IFSP) 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 conducts a desk audit to determine that those services were delivered as planned and consented to by the family. The timeliness of these services is also a factor in determining compliance within this indicator.

In cases where a service was not delivered timely, the State gathers data on the reason for delay from the service coordinator of each case. If the reason is attributable to the family (ex. family illness or other family cancellation), these are designated as exceptional family circumstances, and therefore compliant, as long as the service was ultimately delivered. If the reason is attributable to the provider (ex. provider scheduling or availability) or no explanation is given to the State by the service coordinator, these are designated as non-compliant for this indicator.

If needed, provide additional information about this indicator here.

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
154	154	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that “Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures.” As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont’s corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

Vermont has begun to implement the formal findings procedure. However, since this was not implemented until the fall of 2019, Vermont has not yet been able to verify that the source of noncompliance is correctly implementing the regulatory requirements associated with timely delivery of services for 100% of the children enrolled in early intervention based on a review of updated data. Vermont will be able to report this verification in the state’s the FFY 19 APR once we have fully implemented the new procedure in accordance with OSEP Memo 09-02. This procedure, including timelines, is described below.

The State reviewed each instance of non-compliance and analyzed each reason for delay in the delivery of a service in accordance with required timelines. Each case where a delay was due to a circumstance where the provider failed to meet the timeline, the State identified that the reason was due to issues beyond the practitioner’s control: typically, this was due to provider capacity. Vermont, like much of the nation, has a significant lack of early intervention and pediatric therapy providers.

Analysis of the data shows that delays due to providers typically occur with early intervention developmental educators and speech language pathologists. These are the two most common services provided to infants and toddlers receiving Part C services in Vermont. Vermont’s annual CIS Recruitment and Retention survey data indicate that the state experiences a high degree of turnover of developmental educators. Regional CIS-EI programs also describe an insufficient number of speech pathologists in the state willing to serve pediatric patients, especially when that means serving them in the natural environment for the child and family.

In many regions of the State, our small population of infants and toddlers enrolled in Part C services impacts the retention of therapy providers. When there are too few Part C children to make up a full-time caseload for a therapist, they are unable to prioritize serving this clientele. Therefore, therapist will enter into contracts with public schools or have a clinic-based or adult caseload and not have availability to serve additional infants or toddlers as needed. Rurality also impacts therapist’s ability to serve some children. Many times, children who need services may require travel of greater than 50 miles one way. Therefore, traveling to provide home/community-based services is time consuming, with reimbursement being insufficient to cover the actual time the provider puts into serving infants and toddlers.

Due to several years of level funding, salaries for early intervention developmental educators and service coordinators are not able to compete with salaries in other related fields, such as school-based special educators. This makes retaining providers difficult. It also makes it challenging to recruit new providers into the field. Many CIS-EI programs experience perpetual staff vacancies (they may fill a vacancy and simultaneously experience turnover for another staff), or it make take them up to a year to find qualified staff to fill vacancies.

In each instance of non-compliance, services were not provided timely due to providers having an insufficient capacity within their schedules to provide the required service to the infant/toddler within 30 days of the parent’s signed consent. Providers clearly identify when a delay is due to their capacity to provide the service within the timelines required by Part C regulations, indicating they understand the requirements. The State ensures providers understand these requirements by providing technical assistance, written guidance, and by documenting the timeline requirements clearly on all data submission forms, which regions use monthly to submit their CIS-EI data.

However, there are simply too few providers to meet the needs of the increasing numbers of infants and toddlers being found eligible for Part C Early Intervention services. In order for some regions to comply with the requirement that services be provided within 30 days of a parent/guardian’s signed

consent, they have had to rely on using clinic or hospital-based services in order to support a child's need for developmental therapies. This is evident by Vermont's performance on Indicator 2, as more and more services are delivered in non-natural environments.

One reason for the lack of providers serving pediatric populations are that many speech, physical and occupational therapists are in private practice. The difficulty in billing insurance, and the lower caseloads associated with providing home-based services (because travel time takes time away from client service time) has caused many private providers to limit the number of pediatric patients they see, or to provide services only to schools or through clinic-based settings. The State works with insurance companies and the Department of Vermont Health Access, which oversees Vermont's public insurance, to address billing challenges encountered by service providers. Additionally, as stated in the introduction, Vermont supported a recent OSEP Grant application by UVM to provide tuition reimbursement for masters-level students to earn a degree in Early Childhood Special Education and Speech Pathology in order to support provider capacity in these areas.

Finally, as a result of continued non-compliance with one regional CIS early intervention program, the State began providing intensive technical assistance to that program. Data analysis showed that much of the non-compliance was due to developmental educators, whom that program employed. While there was turnover among the staff similar to the rest of the state, the State provided ongoing, on-site monitoring and technical assistance to that region between February 2018 and June 2019. Through this technical assistance and monitoring, the region identified some root causes, clarified that all staff understood the federal requirements, and implemented improvement strategies. This has resulted in an improvement of in this indicator. The State continues to provide ongoing, intensive technical assistance to this region in order to support continued improvement in the delivery of early intervention services that are compliant with federal regulations and State rules.

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

The State identified 154 findings of noncompliance in FFY 2017. During this reporting year, these findings were made based on a desk-audit of the State's database for all child files for the full reporting year. This process has since been revised and an updated process developed and approved by OSEP. This updated process, described below, was not implemented until FFY 2019. Therefore, in order to verify that each individual case of noncompliance was corrected for FFY 2017, the State conducted another desk-audit of the State's database for all child files for the full FFY 2017 reporting year. This desk-audit verified that the planned services, though late, were ultimately delivered to the child in accordance with child's One Plan (IFSP), or that the child exited Part C services before those services could be delivered. Through the desk-audit, the State was able to verify that, for each finding of non-compliance, the service was either ultimately provided to the child in accordance with the child's One Plan, or that the child had exited the program. The State verified that each of the 154 findings of non-compliance were corrected.

The State followed the same process as described above for findings identified in FFY 2016. The State identified 151 findings of noncompliance in FFY2016. The State verified that each of the 151 findings of non-compliance were corrected or the child had exited the program.

Through a desk audit of the State's database, the State verified that there were no remaining uncorrected findings from FFY 2015 or from FFY 2014 as the children who were the subjects of those findings have subsequently exited the program.

In accordance with guidance from the Office of Special Education Programs' memo 09-02, the State reviewed all instances where services were delivered later than 30 days from the date the parent signed on consent for the service to begin. Regional early intervention practitioners are required to provide copies of all service grids to the State monthly which document the date of the parent/guardian's signed consent for the start of services. Once services have begun, the actual date that each service was first delivered is documented on the service grid. A copy of that updated service grid is provided to the State. The State enters these data into the State's database and verifies that each service was delivered within 30 days.

If a service is not initially delivered within 30 days of a parent/guardian's signed consent, the State follows up with inquiries to the region until the service is verified as having been delivered and a service grid documenting the initial start date is provided to the State. The State then enters the actual date that the service was first delivered into the State's database, indicates that the service was not compliant and the reason for the non-compliance as documented by the regional CIS Early Intervention practitioner.

In order to verify correction of all findings of non-compliance, the State reviewed the State's database, examining each service on each child's service grid for the reporting period comparing actual start dates of service to the date of signed parental consent. The State reviewed all instances where services were delivered later than 30 days from the date the parent signed on consent for the service to begin. These data were analyzed by the State to verify that every instance of non-compliance was corrected within one year from the date the State made the findings of non-compliance.

In May 2019 Vermont received an on-site visit from the Office of Special Education Programs (OSEP) as part of their ongoing differentiated monitoring and support. During this visit, OSEP noted that Vermont's Findings process did not comply with federal requirements as outlined in OSEP memo 09-02 dated October 17, 2008. In response to this, Vermont developed a formal findings process which OSEP accepted as compliant with federal requirements. This process was implemented in November of 2019 and will be reported upon during the FFY'19 APR. Vermont's findings process is as follows:

Identification of Findings of Noncompliance

First week in November: The State queries the State's database for the full data set from July 1 – August 31 of the present Federal Fiscal Year related to the above indicators in order to account for all instances of noncompliance. From these queries, the State identifies all instances of non-compliance. The State formally notifies each region in writing of all instances of non-compliance requiring:

1. Each instance of non-compliance must be corrected within 90 days of the date of the State's letter providing the formal written notification. Verification of correction must be submitted in writing, using appropriate State documentation tools, via secure data transmission to the State by February 8th. These findings of non-compliance will be used to support the State's determinations along with the APR data compiled for the period of July 1-June 30 of the preceding Federal Fiscal Year.

2. For each region where findings have been identified, those regions must submit an updated Quality Improvement Plan (QIP) by January 15th. The QIP is a document developed to respond to the root causes that have contributed to the region's non-compliance (as identified in the preceding APR period and the State's formal Findings period). The regional QIP update must contain:

- a) a description of the root cause analysis of the noncompliance;
- b) progress made on the implementation of previously planned strategies, any adjustments to any strategies, or new strategies introduced to address root causes to improve compliance with the indicators in which any findings were made in the areas of the Contributing Factors Tool:
 - a. Policy and Procedures
 - b. Infrastructure
 - c. Data
 - d. Training and Technical Assistance

- e. Supervision
- f. Provider Practices
- c) implementation timelines, interim evaluation measures, and data from previous measures.

Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State's data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100% compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

None

1 - OSEP Response

OSEP's response to the State's FFY 2017 SPP/APR required the State to include in the FFY 2018 SPP/APR, that the findings identified in FFY 2016, the two remaining findings identified in FFY 2015, and one remaining finding identified in FFY 2014 were corrected, consistent with the requirements in OSEP Memo 09-02. The State did not provide the required information. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2016, FFY 2015, and and FFY 2014 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017 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.

The State must demonstrate, in the FFY 2019 SPP/APR, that the 154 findings of noncompliance identified in FFY 2017, the 151 findings identified in FFY 2016, the two findings identified in FFY 2015 and one remaining finding identified in FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017, FFY 2016, FFY 2015 and FFY 2014 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.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

1 - Required Actions

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline	2005	98.00%			
FFY	2013	2014	2015	2016	2017
Target>=	96.40%	96.60%	96.80%	97.00%	97.20%
Data	98.88%	97.38%	96.54%	97.18%	97.88%

Targets

FFY	2018	2019
Target>=	97.30%	97.30%

Targets: Description of Stakeholder Input

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

The VICC hosts a meeting with representatives from each of the state's 12 regional Early Intervention Programs annually each November. The purpose of this meeting is to discuss regional Early Intervention Program data and determinations made using data collected between July 1st the previous year through June 30th of the current year. These are the data that Vermont prepares for the Annual Performance Report due to OSEP in February. These data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.

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 an 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 engaged with regional CIS Early Intervention programs to host two VICC meetings at a regional level and intentionally outreached to engage parents to participate in these meetings. The meetings were facilitated in a family-friendly manner in order to successfully engage those parents who attended as full participants with the regular VICC members. The success of these meetings was evaluated by the VICC and will inform next steps for future regional meeting strategies. In FFY 2019 the VICC will be examining additional ways to involve families or get their input into CIS services and initiatives, such as the annual CIS Institute.

In addition to leading the VICC and CIS family engagement efforts, Vermont's CIS Family Engagement Coordinator works with Vermont's Building Bright Futures (BBF) Early Childhood Advisory Council on activities that seek to engage families around early childhood issues statewide. CIS, the VICC, and BBF Council are coordinating their family engagement activities to ensure alignment across these systems and maximize the effectiveness of strategies that are implemented.

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 practitioners 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 Vermont Family Network, Vermont's Parent Training and Information Center, 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; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

The VICC set FFY 2019 targets during the January 2020 meeting based on the guidance provided by the Office of Special Education Services earlier in the month. The VICC agreed that technical assistance was needed to review the state's data trends and strategic areas of focus related to ongoing data improvement, data literacy among early intervention providers, training and technical assistance to understand IDEA requirements, the SSIP and Vermont's demographics in order to set targets for early intervention indicators and outcomes. The VICC is intending to include technical assistance from DaSy and ECTA for the March 2020 VICC meeting, and to invite a broader group of CIS-EI providers to support the target-setting process. It was acknowledged that there were no individuals within State leadership or the VICC who were involved the last time Vermont set its targets, and therefore receiving technical assistance would be critical to set targets that would most effectively support ongoing program improvement for Vermont's early intervention services. Therefore, the VICC concluded that current targets for FFY 2018 would be maintained for FFY 2019. The VICC is committed to developing, documenting and engaging in a replicable process for updating targets following the March 2020 meeting for FFY 2020 and beyond.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,022
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Total number of infants and toddlers with IFSPs	1,063

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1,022	1,063	97.88%	97.30%	96.14%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

As a rural state, with a high cost of living and a small population, Vermont has an insufficient number of providers to deliver home-based early intervention therapies to infants and toddlers eligible for Part C Early Intervention Services. In order to comply with IDEA requirements for the timely delivery of early intervention services, the State has supported increased reliance on clinic-based services for families who chose it. When there is a choice between the delay to the start of services in the child's natural environment or services being provided timely in a service provider location or clinic, families are able to decide which they would prefer. While this has led to improvement with Indicator 1, as families choose to have services begin right away, Vermont has experienced an increased number of services occurring in service provider locations.

Additionally, as Vermont's services continue to remain level-funded or experience reduced funding due to Medicaid payment reform activities, providers are more reluctant to provide home-based services. Home-based services are more costly due to travel time, which limits the numbers of families providers can serve each day. Cancellations further reduce provider's revenue. Vermont is working together with our State partners and Medicaid services to determine ways to address the provider shortage. The State is also exploring the use of telemedicine to support home-based service delivery.

Anecdotal data provided by regional EI program representatives on the VICC indicate that more families are asking providers to not come into their homes, preferring instead to receive clinic-based services. Factors that contribute to these requests include hoarding, animals in the home, cleanliness, homelessness, etc. Providers try to find places to meet families in community settings that could provide a more natural environment outside the home, such as a local library. However, many rural towns do not have resources or facilities that can accommodate a therapeutic visit with families. Providers work diligently with families to accommodate their needs. However, more and more frequently, providers are finding they need to prioritize services starting timely over services being delivered in the natural environment of the child and family.

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

The VICC hosts a meeting with representatives from each of the state's 12 regional Early Intervention Programs annually each November. The purpose of this meeting is to discuss regional Early Intervention Program data and determinations made using data collected between July 1st the previous year through June 30th of the current year. These are the data that Vermont prepares for the Annual Performance Report due to OSEP in February. These data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.

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 an 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 engaged with regional CIS Early Intervention programs to host two VICC meetings at a regional level and intentionally outreached to engage parents to participate in these meetings. The meetings were facilitated in a family-friendly manner in order to successfully engage those parents who attended as full participants with the regular VICC members. The success of these meetings was evaluated by the VICC and will inform next steps for future regional meeting strategies. In FFY 2019 the VICC will be examining additional ways to involve families or get their input into CIS services and initiatives, such as the annual CIS Institute.

In addition to leading the VICC and CIS family engagement efforts, Vermont's CIS Family Engagement Coordinator works with Vermont's Building Bright Futures (BBF) Early Childhood Advisory Council on activities that seek to engage families around early childhood issues statewide. CIS, the VICC, and BBF Council are coordinating their family engagement activities to ensure alignment across these systems and maximize the effectiveness of strategies that are implemented.

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The VICC set FFY 2019 targets during the January 2020 meeting based on the guidance provided by the Office of Special Education Services earlier in the month. The VICC agreed that technical assistance was needed to review the state's data trends and strategic areas of focus related to ongoing data improvement, data literacy among early intervention providers, training and technical assistance to understand IDEA requirements, the SSIP and Vermont's demographics in order to set targets for early intervention indicators and outcomes. The VICC is intending to include technical assistance from DaSy and ECTA for the March 2020 VICC meeting, and to invite a broader group of CIS-EI providers to support the target-setting process. It was acknowledged that there were no individuals within State leadership or the VICC who were involved the last time Vermont set its targets, and therefore receiving technical assistance would be critical to set targets that would most effectively support ongoing program improvement for Vermont's early intervention services. Therefore, the VICC concluded that current targets for FFY 2018 would be maintained for FFY 2019. The VICC is committed to developing, documenting and engaging in a replicable process for updating targets following the March 2020 meeting for FFY 2020 and beyond.

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A1	2009	Target>=	61.60%	61.60%	61.60%	61.60%	61.60%
A1	60.80%	Data	66.67%	66.88%	65.13%	60.06%	63.66%
A2	2009	Target>=	60.00%	60.00%	60.00%	60.00%	60.00%
A2	59.40%	Data	61.54%	62.13%	60.90%	57.43%	64.92%
B1	2009	Target>=	68.70%	68.90%	69.10%	69.30%	69.50%
B1	67.90%	Data	71.57%	74.56%	66.07%	65.45%	71.95%
B2	2009	Target>=	54.20%	54.20%	54.20%	54.20%	54.20%
B2	53.40%	Data	54.05%	55.20%	49.21%	46.42%	53.90%
C1	2009	Target>=	73.50%	73.50%	73.50%	73.50%	73.50%

C1	72.90%	Data	74.31%	75.84%	72.98%	69.15%	71.95%
C2	2009	Target>=	61.40%	61.40%	61.40%	61.40%	61.40%
C2	60.60%	Data	60.12%	60.21%	64.01%	66.61%	67.80%

Targets

FFY	2018	2019
Target A1>=	61.60%	61.60%
Target A2>=	60.00%	60.00%
Target B1>=	69.70%	69.70%
Target B2>=	54.20%	54.20%
Target C1>=	73.50%	73.50%
Target C2>=	61.40%	61.40%

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

657

Outcome A: Positive social-emotional skills (including social relationships)

	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	144	21.92%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	89	13.55%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	171	26.03%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	253	38.51%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	260	404	63.66%	61.60%	64.36%	Met Target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	424	657	64.92%	60.00%	64.54%	Met Target	No Slippage

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

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	1	0.15%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	152	23.14%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	169	25.72%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	199	30.29%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	136	20.70%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	368	521	71.95%	69.70%	70.63%	Met Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	335	657	53.90%	54.20%	50.99%	Did Not Meet Target	Slippage

Provide reasons for B2 slippage, if applicable

The VICC with CIS-EI providers has examined available data to determine the root cause for slippage with this indicator. In fact, the VICC noted that Vermont has not made significant improvement in this indicator over the past four years. A review of the data showed that only four of the twelve regional CIS-EI programs exceeded the State target for this indicator. Of the regions that did not meet the State target, five were more than five percentage points below the target. Data examined to determine possible root causes were:

1. Reason for eligibility for Part C services: Vermont has experienced an increase in infants and toddlers suspected of having autism or being diagnosed with autism. As a result, Vermont engaged in a pilot project with the Vermont Department of Health to assess children suspected of having autism in a more timely manner. Children exposed to substances in utero or diagnosed with neo-natal abstinence syndrome. 14.6 percent of mothers report using alcohol during pregnancy, which is more than 5 percentage points higher than the national average. Opioid use in Vermont has plateaued in spite of continued efforts to reduce this epidemic. Vermont's CIS Institute will focus on the impacts of substance use in families on children's development.

2. As mentioned with Indicator 2, Vermont's shortage of providers leads, in some cases, to families receiving a reduced number of services per month. This means providers will focus on the most concerning issues impacting children's development during their visits, such as issues associated with family stability, parenting challenges, and social determinants of health that may be impacting families abilities to be available to help their child develop and learn, rather than specific child development activities.

3. Vermont has experienced a 28% increase in children substantiated as victims of abuse or neglect since 2013. Children under the age of six comprise the largest percentage of these cases. These children often experience a delay in the start of services or disruptions in services due to foster care placements or family reunifications, reducing the overall amount of services that are able to actually be delivered to these children. Additionally, since most foster parents in Vermont work full time, children in foster care predominately receive services in their child care settings, limiting provider's ability to do parent education.

4. Vermont has seen a steady increase in the number of children needing mental health supports since 2012 of more than 14%. Social and emotional challenges can significantly impact a child's ability to access learning opportunities or interact successfully with adult caregivers or typically developing peers, hampering their ability to develop and learn functional skills. As a result, Vermont's State Systemic Improvement plan focuses on improving children's social and emotional development. The VICC selected this focus with the belief that, by addressing this area of children's development, they would be more able to develop and learn. However, this has yet to demonstrate results in this indicator.

The VICC intends to engage DaSy and ECTA for additional technical assistance at the meeting in March, 2020 to continue to examine root causes for Vermont's lack of progress with this indicator, and identify strategies to support improvement.

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	1	0.15%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	110	16.74%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	100	15.22%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	214	32.57%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	232	35.31%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	314	425	71.95%	73.50%	73.88%	Met Target	No Slippage

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	446	657	67.80%	61.40%	67.88%	Met Target	No Slippage

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

The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	1,064
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.	341

	Yes / No
Was sampling used?	NO

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)

YES

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

During the FFY '18 reporting period (July 1, 2018 through June 30, 2019), regional CIS Early Intervention contracted providers were required to submit child outcomes summary ratings using the decision tree developed by the Early Childhood Outcomes Center (https://www.google.com/url?q=http://www.ectacenter.org/eco/assets/docs/Decision_Treeonumbers.doc&sa=U&ved=0ahUKEwjE_uUkebfAhWpm-AKHd4LDN4QFggQMAY&client=internal-uds-cse&cx=001354871196560068277:y9vhkvi_rsy&usg=AOvVaw0KljdrPSDziXbe12289f8) and promulgated by Vermont's CIS Early Intervention State technical assistance staff. These data are reported for children who have received at least six (6) months of services within Vermont's CIS Early Intervention Program. The data from all infants and toddlers who exited from Vermont's Early Intervention services after receiving at least six (6) months of services are entered the State's CIS database 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)

3 - Prior FFY Required Actions

None

3 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

4 - Indicator Data

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A	2011	Target>=	78.30%	78.30%	78.40%	78.40%	78.50%
A	78.10%	Data	76.23%	82.63%	85.27%	81.68%	87.19%
B	2011	Target>=	86.10%	86.10%	86.10%	86.10%	86.10%
B	85.90%	Data	83.54%	79.78%	88.96%	87.99%	92.48%
C	2011	Target>=	81.00%	81.00%	81.20%	81.20%	81.20%
C	80.80%	Data	82.64%	75.86%	84.21%	84.98%	87.47%

Targets

FFY	2018	2019
Target A>=	78.50%	78.50%
Target B>=	86.10%	86.10%
Target C>=	81.20%	81.20%

Targets: Description of Stakeholder Input

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

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data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.

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FFY 2018 SPP/APR Data

The number of families to whom surveys were distributed	758
Number of respondent families participating in Part C	427
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	396
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	427
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	404
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	427
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	390
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	427

	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	87.19%	78.50%	92.74%	Met Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	92.48%	86.10%	94.61%	Met Target	No Slippage

	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	87.47%	81.20%	91.33%	Met Target	No Slippage

	Yes / No
Was sampling used?	NO

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

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

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.

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 began to also hand-deliver surveys to families during their Transition from Part C to ensure we receive input from all exiting families as well. This selection criteria ensures that every family who receives early intervention services for at least six months has the opportunity to respond to Vermont's family survey.

The State compared the demographics of the Family Survey responses to the 618 demographic data and found that the family survey's are representative of Vermont's population of children receiving early intervention. The 618 data indicates that 38% of children receiving EI services are female and 62% are male. The Family Survey responses included 35% of families who had a female child in the program and 62% of families with a male child. There were 3% of the surveys that were submitted anonymously with the family choosing to not indicate their child's gender. In addition, the 618 identified the following race/ethnicities: 1% Hispanic, less than 1% American Native or Pacific Islander, 3% Asian, 1% Black or African American, 89% White, and 6% two or more races. Similarly, the Family Survey respondents included: 1% Hispanic, no American Native or Pacific Islander, 1% Asian, 2% Black or African American, 88% White, and 5% two or more races. Due to Vermont's small population, there are no statistically significant differences between the demographics of Vermont's CIS program and those families who responded to the Family Survey. This indicates that the method the state uses to collect these data ensure an equitable opportunity for families to respond, and this bears out in the State receiving responses that are representative of our total population of families served by the program.

The State shared and discussed the Family Survey data results with Early Intervention regional programs in August of 2019. 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 (SSIP). 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.

Provide additional information about this indicator (optional)

4 - Prior FFY Required Actions

None

4 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100.

Instructions

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

Describe the results of the calculations and compare the results to the target and to national data. The data reported in this indicator should be consistent with the State's reported 618 data reported in Table 1. If not, explain why.

5 - Indicator Data

Historical Data

Baseline	2005	1.10%			
FFY	2013	2014	2015	2016	2017
Target >=	0.99%	0.99%	1.11%	1.11%	1.11%
Data	1.51%	1.48%	1.75%	2.07%	2.07%

Targets

FFY	2018	2019
Target >=	1.11%	1.11%

Targets: Description of Stakeholder Input

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

The VICC hosts a meeting with representatives from each of the state's 12 regional Early Intervention Programs annually each November. The purpose of this meeting is to discuss regional Early Intervention Program data and determinations made using data collected between July 1st the previous year through June 30th of the current year. These are the data that Vermont prepares for the Annual Performance Report due to OSEP in February. These data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.

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 an 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 engaged with regional CIS Early Intervention programs to host two VICC meetings at a regional level and intentionally outreached to engage parents to participate in these meetings. The meetings were facilitated in a family-friendly manner in order to successfully engage those parents who attended as full participants with the regular VICC members. The success of these meetings was evaluated by the VICC and will inform next steps for future regional meeting strategies. In FFY 2019 the VICC will be examining additional ways to involve families or get their input into CIS services and initiatives, such as the annual CIS Institute.

In addition to leading the VICC and CIS family engagement efforts, Vermont's CIS Family Engagement Coordinator works with Vermont's Building Bright Futures (BBF) Early Childhood Advisory Council on activities that seek to engage families around early childhood issues statewide. CIS, the VICC, and BBF Council are coordinating their family engagement activities to ensure alignment across these systems and maximize the effectiveness of strategies that are implemented.

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 practitioners 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 Vermont Family Network, Vermont's Parent Training and Information Center, 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; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

The VICC set FFY 2019 targets during the January 2020 meeting based on the guidance provided by the Office of Special Education Services earlier in the month. The VICC agreed that technical assistance was needed to review the state's data trends and strategic areas of focus related to ongoing data improvement, data literacy among early intervention providers, training and technical assistance to understand IDEA requirements, the SSIP and Vermont's demographics in order to set targets for early intervention indicators and outcomes. The VICC is intending to include technical assistance from DaSy and ECTA for the March 2020 VICC meeting, and to invite a broader group of CIS-EI providers to support the target-setting process. It was acknowledged that there were no individuals within State leadership or the VICC who were involved the last time Vermont set its targets, and therefore receiving technical assistance would be critical to set targets that would most effectively support ongoing program improvement for Vermont's early intervention services. Therefore, the VICC concluded that current targets for FFY 2018 would be maintained for FFY 2019. The VICC is committed to developing, documenting and engaging in a replicable process for updating targets following the March 2020 meeting for FFY 2020 and beyond.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 1 with IFSPs	116
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 1	5,632

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
116	5,632	2.07%	1.11%	2.06%	Met Target	No Slippage

Compare your results to the national data

Vermont has historically served a higher percentage of infants per capita than the national average, indicating that Vermont has a successful child-find system. Initiatives in Vermont, both publicly and privately funded, help contribute to this success by ensuring that early childhood issues remain in the media and public eye. This has been especially true with Vermont's Universal Developmental Screening initiative as part of Vermont's Help Me Grow system (<https://helpmegrowvt.org/>). The attached IDEA Infant & Toddler Coordinator's Association Report (<http://www.ideainfanttoddler.org/pdf/2016-Child-Count-Data-Charts.pdf>) demonstrates Vermont's success in this area: the national average is 1.25% and Vermont served 2.06% of infants below the age of one in FFY'18.

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100.

Instructions

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

Describe the results of the calculations and compare the results to the target and to national data. The data reported in this indicator should be consistent with the State's reported 618 data reported in Table 1. If not, explain why.

6 - Indicator Data

Baseline	2005	3.20%			
FFY	2013	2014	2015	2016	2017
Target >=	3.60%	3.60%	3.70%	3.80%	3.90%
Data	4.38%	4.38%	4.96%	5.23%	5.79%

Targets

FFY	2018	2019
Target >=	3.90%	3.90%

Targets: Description of Stakeholder Input

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

The VICC hosts a meeting with representatives from each of the state's 12 regional Early Intervention Programs annually each November. The purpose of this meeting is to discuss regional Early Intervention Program data and determinations made using data collected between July 1st the previous year through June 30th of the current year. These are the data that Vermont prepares for the Annual Performance Report due to OSEP in February. These data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.

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 an 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 engaged with regional CIS Early Intervention programs to host two VICC meetings at a regional level and intentionally outreached to engage parents to participate in these meetings. The meetings were facilitated in a family-friendly manner in order to successfully engage those parents who attended as full participants with the regular VICC members. The success of these meetings was evaluated by the VICC and will inform next steps for future regional meeting strategies. In FFY 2019 the VICC will be examining additional ways to involve families or get their input into CIS services and initiatives, such as the annual CIS Institute.

In addition to leading the VICC and CIS family engagement efforts, Vermont's CIS Family Engagement Coordinator works with Vermont's Building Bright Futures (BBF) Early Childhood Advisory Council on activities that seek to engage families around early childhood issues statewide. CIS, the VICC, and BBF Council are coordinating their family engagement activities to ensure alignment across these systems and maximize the effectiveness of strategies that are implemented.

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 practitioners 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 Vermont Family Network, Vermont's Parent Training and Information Center, 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; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

The VICC set FFY 2019 targets during the January 2020 meeting based on the guidance provided by the Office of Special Education Services earlier in the month. The VICC agreed that technical assistance was needed to review the state's data trends and strategic areas of focus related to ongoing data improvement, data literacy among early intervention providers, training and technical assistance to understand IDEA requirements, the SSIP and Vermont's demographics in order to set targets for early intervention indicators and outcomes. The VICC is intending to include technical assistance from DaSy and ECTA for the March 2020 VICC meeting, and to invite a broader group of CIS-EI providers to support the target-setting process. It was acknowledged that there were no individuals within State leadership or the VICC who were involved the last time Vermont set its targets, and therefore receiving technical assistance would be critical to set targets that would most effectively support ongoing program improvement for Vermont's early intervention services. Therefore, the VICC concluded that current targets for FFY 2018 would be maintained for FFY 2019. The VICC is committed to developing, documenting and engaging in a replicable process for updating targets following the March 2020 meeting for FFY 2020 and beyond.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 3 with IFSPs	1,063
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 3	17,379

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1,063	17,379	5.79%	3.90%	6.12%	Met Target	No Slippage

Compare your results to the national data

Vermont has historically served a higher percentage of infants per capita than the national average, indicating that Vermont has a successful child-find system. Initiatives in Vermont, both publicly and privately funded, help contribute to this success by ensuring that early childhood issues remain in the media and public eye. This has been especially true with Vermont's Universal Developmental Screening initiative as part of Vermont's Help Me Grow system (<https://helpmegrowvt.org/>). The attached IDEA Infant & Toddler Coordinator's Association Report (<http://www.ideainfanttoddler.org/pdf/2016-Child-Count-Data-Charts.pdf>) demonstrates Vermont's success in this area: the national average is 3.48% and Vermont served 6.12% of infants and toddlers below the age of three in FFY'18.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

The State provided target for FFY 2019 for this indicator, and OSEP accepts that target.

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

7 - Indicator Data

Historical Data

Baseline	2005	79.80%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	95.57%	96.62%	90.76%	95.98%	95.10%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
802	1,120	95.10%	100%	95.09%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

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

State database

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

Data for Indicator 7 were collected from July 1, 2018 through June 30, 2019.

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

The State conducted a desk audit of every child for whom a referral was received between July 1, 2018 through June 30, 2018.

In calculating this indicator, the State conducts a desk audit of data on every child referred to early intervention from July 1, 2018 through June 30, 2019, who is found eligible for early intervention services. The State verifies that each child whose families choose to enroll their child in early intervention services receives an initial One Plan (IFSP) meeting within 45 days of referral.

In cases where a service an initial One Plan meeting was not held with 45 days of referral, the State gathers data on the reason for delay from the service coordinator of each case. If the reason is attributable to the family (ex. family illness or other family cancellation), these are designated as exceptional family circumstances, and therefore compliant, as long as the initial One Plan meeting to develop the IFSP was ultimately held. If the reason is attributable to the provider (ex. provider scheduling or availability) or no explanation is given to the State by the service coordinator, these are designated as non-compliant for this indicator.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
54	54	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that “Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures.” As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont’s corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

Vermont has begun to implement the formal findings procedure. However, since this was not implemented until the fall of 2019, Vermont has not yet been able to verify that the source of noncompliance is correctly implementing the regulatory requirements associated with timely delivery of services for 100% of the children enrolled in early intervention based on a review of updated data. Vermont will be able to report this verification in the state’s the FFY 19 APR once we have fully implemented the new procedure in accordance with OSEP Memo 09-02. This procedure, including timelines, is described below.

The State reviewed each instance of non-compliance and analyzed each reason for delay in the timely initial One Plan (Vermont’s IFSP) meeting in accordance with required timelines. Each case where a delay was due to a circumstance where the provider failed to meet the timeline, the State identified that the reason was due to issues beyond the practitioner’s control: typically, this was due to provider capacity. Vermont, like much of the nation, has a high degree of turnover among early intervention providers.

In each instance of non-compliance, services were not provided timely due to providers not having sufficient capacity within their schedules to conduct evaluations and hold initial meetings with families due to high caseloads (more than 28 children per provider in some regions). Providers clearly identify when a delay is due to their capacity to provide the service within the timelines required by Part C regulations, indicating they understand the requirements.

The State discussed the federal regulations and State Rules around the initial One Plan (IFSP) meeting timelines during a monthly teleconference with regional CIS Early Intervention Programs. The purpose of this discussion was to ensure that providers understood the requirements of an initial meeting. This timeline is part of the State’s ongoing monthly data monitoring with regions to ensure providers remain attentive to the requirements in this area and the State is able to improve compliance with this indicator.

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

The State identified 54 findings of noncompliance in FFY 2017. During this reporting year, these findings were made based on a desk-audit of the State’s database for all child files for the full reporting year. This process has since been revised and an updated process developed and approved by OSEP. This updated process, described below, was not implemented until FFY 2019. Therefore, in order to verify that each individual case of noncompliance was corrected for FFY 2017, the State conducted another desk-audit of the State’s database for all child files for the full FFY 2017 reporting year. This desk-audit verified that the initial evaluation and One Plan (IFSP) meeting, thought late was ultimately held for each child who was the subject to the 54 findings of non-compliance, causing those findings to be verified as corrected.

The State followed the same process as described above for findings identified in FFY 2016. The State identified 56 findings of noncompliance in FFY2016. The State verified that each of the 56 findings of non-compliance were corrected.

In accordance with guidance from the Office of Special Education Programs’ memo 09-02, the State reviewed all instances where initial One Plan (IFSP) meetings occurred later than 45 days from the date a child was referred to CIS Early Intervention. Regional early intervention programs report data to the State monthly on all children enrolled in the program, including all timeline data associated with this indicator: referral date, evaluation date, and initial meeting date. If a timeline is not met, the State follows up with inquiries to the region until the region verifies that the evaluation has been conducted and the initial meeting has occurred. The State then enters these dates into the State’s database, indicates that the timelines were not compliant and the reason for the non-compliance as provided by the regional CIS Early Intervention practitioner.

In order to verify correction of all findings of non-compliance, the State reviewed the State’s database, examining each required date associated with this indicator in each child’s record for the reporting period. The State reviewed all instances where evaluations and initial meetings occurred later than 45 days from the date of a child’s referral. These data were analyzed by the State to verify that every instance of non-compliance was corrected within one year from the date the State made the findings of non-compliance.

In May 2019 Vermont received an on-site visit from the Office of Special Education Programs (OSEP) as part of their ongoing differentiated monitoring and support. During this visit, OSEP noted that Vermont’s Findings process did not comply with federal requirements as outlined in OSEP memo 09-02 dated October 17, 2008. In response to this, Vermont developed a formal findings process which OSEP accepted as compliant with federal

requirements. This process was implemented in November of 2019 and will be reported upon during the FFY'19 APR. Vermont's findings process is as follows:

Identification of Findings of Noncompliance

First week in November: The State queries the State's database for the full data set from July 1 – August 31 of the present Federal Fiscal Year related to the above indicators in order to account for all instances of noncompliance. From these queries, the State identifies all instances of non-compliance. The State formally notifies each region in writing of all instances of non-compliance requiring:

1. Each instance of non-compliance must be corrected within 90 days of the date of the State's letter providing the formal written notification. Verification of correction must be submitted in writing, using appropriate State documentation tools, via secure data transmission to the State by February 8th. These findings of non-compliance will be used to support the State's determinations along with the APR data compiled for the period of July 1-June 30 of the preceding Federal Fiscal Year.
2. For each region where findings have been identified, those regions must submit an updated Quality Improvement Plan (QIP) by January 15th. The QIP is a document developed to respond to the root causes that have contributed to the region's non-compliance (as identified in the preceding APR period and the State's formal Findings period). The regional QIP update must contain:
 - a) a description of the root cause analysis of the noncompliance;
 - b) progress made on the implementation of previously planned strategies, any adjustments to any strategies, or new strategies introduced to address root causes to improve compliance with the indicators in which any findings were made in the areas of the Contributing Factors Tool:
 - a. Policy and Procedures
 - b. Infrastructure
 - c. Data
 - d. Training and Technical Assistance
 - e. Supervision
 - f. Provider Practices
 - c) implementation timelines, interim evaluation measures, and data from previous measures.

Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State's data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100% compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

7 - Prior FFY Required Actions

None

7 - OSEP Response

OSEP's response to the State's FFY 2017 SPP/APR required the State to include in the FFY 2018 SPP/APR that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016, consistent with the requirements in OSEP Memo 09-02. The State did not provide the required information. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2016 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017 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.

The State must demonstrate, in the FFY 2019 SPP/APR, that the 54 findings of noncompliance identified in FFY 2017, and the 56 findings identified in FFY 2016 were corrected. When reporting on the correction of noncompliance, the State must report that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2017 and FFY 2016 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.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

7 - Required Actions

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

Baseline	2005	92.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	98.88%	100.00%	100.00%	91.24%	87.29%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
430	620	87.29%	100%	89.03%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

122

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

State database

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

Data were collected from July 1, 2018 through June 30, 2019.

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

The State performed a desk audit of entire FFY 2018 Part C State Database, July 1, 2018 through June 30, 2019. 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.

The State receives data monthly from regional contracted service agencies for every child they serve in the program. The State monitors all data monthly to ensure data validity, accuracy and completeness.

In cases where a service was not delivered timely, the State gathers data on the reason for delay from the service coordinator of each case. If the reason is attributable to the family (ex. family illness or other family cancellation), these are designated as exceptional family circumstances, and therefore compliant, as long as the service was ultimately delivered. If the reason is attributable to the provider (ex. provider scheduling or availability) or no explanation is given to the State by the service coordinator, these are designated as non-compliant for this indicator.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
75	75	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that "Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures." As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont's corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

Vermont has begun to implement the formal findings procedure. However, since this was not implemented until the fall of 2019, Vermont has not yet been able to verify that the source of noncompliance is correctly implementing the regulatory requirements associated with timely delivery of services for 100% of the children enrolled in early intervention based on a review of updated data. Vermont will be able to report this verification in the state's the FFY 19 APR once we have fully implemented the new procedure in accordance with OSEP Memo 09-02. This procedure, including timelines, is described below.

Through an analysis of the data and discussions with regional CIS-EI providers, the State determined that some regional CIS Early Intervention practitioners were not correctly implementing the regulatory requirements for developing timely transition plans for toddlers exiting Part C services with a disability. The State has provided technical assistance and written guidance around this indicator to regions to ensure all practitioners understand and comply with the federal requirements. The State monitors regional data around this indicator monthly and holds technical assistance calls with each region to address any areas of non-compliance.

To further address this non-compliance, in the March of 2018 the State provided a data submission form in Microsoft Excel that included date calculators so that regions could see timelines and their degree of compliance upon entering their data for submission to the State. The regions who are using the spreadsheets with fidelity have seen a significant improvement in their compliance with early intervention timelines. The State is continuing to work with regions to fully implement use of this data submission tool.

The State's monitors compliance on a regular basis and addresses further issues of non-compliance by providing regions with their own data monthly so they can monitor and self-correct, even if late. These strategies have led to improvement in this indicator. The State expects this indicator to continue to improve in FFY' 19.

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

The State identified 75 findings of noncompliance in FFY 2017. During this reporting year, these findings were made based on a desk-audit of the State's database for all child files for the full reporting year. This process has since been revised and an updated process developed and approved by OSEP. This updated process, described below, was not implemented until FFY 2019. Therefore, in order to verify that each individual case of noncompliance was corrected for FFY 2017, the State conducted another desk-audit of the State's database for all child files for the full FFY 2017 reporting year. Through the desk-audit, the State was able to verify that, for each of the 75 findings of non-compliance, a Transition Plan was ultimately provided to the child, or that the child had exited the program causing there to no longer be a finding.

The State followed the same process as described above for findings identified in FFY 2016. The State identified 157 findings of noncompliance in FFY2016. The State verified that each of the 157 findings of non-compliance were corrected or the child had exited the program.

In accordance with guidance from the Office of Special Education Programs' memo 09-02, the State reviewed all instances where Transition Plans were either not developed or completed less than 90 days from the child's third birthday. Regional early intervention programs report data to the State monthly on all children enrolled in the program, including transition plan dates for children who exit the program with a disability, or data indicating a parent/guardian has declined to have a transition plan developed for their toddler. If a timeline is not met, the State follows up with inquiries to the region until the region verifies that the transition plan has been developed, or the family has declined this service. The State then enters these dates/data into the State's database, indicates that the timeline was not compliant and the reason for the non-compliance as provided by the regional CIS Early Intervention practitioner.

In order to verify correction of all findings of non-compliance, the State reviewed the State's database, examining the required date associated with this indicator in each child's record for the reporting period. The State reviewed all instances where transition plans were developed less than 90 days from the child's third birthday. These data were analyzed by the State to verify that every instance of non-compliance was corrected within one year from the date the State made the findings of non-compliance.

In May 2019 Vermont received an on-site visit from the Office of Special Education Programs (OSEP) as part of their ongoing differentiated monitoring and support. During this visit, OSEP noted that Vermont's Findings process did not comply with federal requirements as outlined in OSEP memo 09-02 dated October 17, 2008. In response to this, Vermont developed a formal findings process which OSEP accepted as compliant with federal requirements. This process was implemented in November of 2019 and will be reported upon during the FFY'19 APR. Vermont's findings process is as follows:

Identification of Findings of Noncompliance

First week in November: The State queries the State's database for the full data set from July 1 – August 31 of the present Federal Fiscal Year related to the above indicators in order to account for all instances of noncompliance. From these queries, the State identifies all instances of non-compliance. The State formally notifies each region in writing of all instances of non-compliance requiring:

1. Each instance of non-compliance must be corrected within 90 days of the date of the State's letter providing the formal written notification. Verification of correction must be submitted in writing, using appropriate State documentation tools, via secure data transmission to the State by February 8th. These findings of non-compliance will be used to support the State's determinations along with the APR data compiled for the period of July 1-June 30 of the preceding Federal Fiscal Year.
2. For each region where findings have been identified, those regions must submit an updated Quality Improvement Plan (QIP) by January 15th. The QIP is a document developed to respond to the root causes that have contributed to the region's non-compliance (as identified in the preceding APR period and the State's formal Findings period). The regional QIP update must contain:
 - a) a description of the root cause analysis of the noncompliance;
 - b) progress made on the implementation of previously planned strategies, any adjustments to any strategies, or new strategies introduced to address root causes to improve compliance with the indicators in which any findings were made in the areas of the Contributing Factors Tool:
 - a. Policy and Procedures
 - b. Infrastructure
 - c. Data
 - d. Training and Technical Assistance
 - e. Supervision
 - f. Provider Practices
 - c) implementation timelines, interim evaluation measures, and data from previous measures.

Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State's data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100% compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY Required Actions

None

8A - OSEP Response

OSEP's response to the State's FFY 2017 SPP/APR required the State to demonstrate in the FFY 2018 SPP/APR that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016, consistent with the requirements in OSEP Memo 09-02. The State did not provide the required information. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2016 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017 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.

The State must demonstrate, in the FFY 2019 SPP/APR, that the 75 findings of noncompliance identified in FFY 2017, and the 157 findings identified in FFY 2016 were corrected. When reporting on the correction of noncompliance, the State must report that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017, and FFY 2016 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.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

The State did not provide the reasons for delay, as required by the measurement table.

8A - Required Actions

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8B - Indicator Data

Historical Data

Baseline	2005	79.50%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	89.47%	86.71%	88.31%	90.58%	84.80%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
452	525	84.80%	100%	86.10%	Did Not Meet Target	No Slippage

Number of parents who opted out

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

0

Describe the method used to collect these data

Regional CIS Early Intervention programs are required to send copies of all LEA Notifications to State Education Agency. The State records the data on these notifications and transfers those data electronically to the Agency of Education. Regional CIS Early Intervention programs also send data each month identifying all toddlers who are found potentially eligible for Part B services and the date that the determination of potential eligibility was made.

In cases where a service was not delivered timely, the State gathers data on the reason for delay from the service coordinator of each case. In Vermont, LEA notification does not require parental consent, and therefore delays in LEA notification are not allowed to be attributed to family circumstances. If notification is sent more than 180 days from the child's third birthday at the request of the family due to the child's medical complexity or some other family factor, the LEA notification is considered compliant. If the notice is sent more than 180 days or fewer than 90 days from the child's birthday and the reason is attributable to the provider (ex. provider scheduling or availability) or no explanation is given to the State by the service coordinator, these are designated as non-compliant for this indicator.

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

NO

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

State database

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

Data were collected for the period of July 1, 2018 through June 30, 2019.

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

The State performed a desk audit of entire FFY 2018 Part C State Database, July 1, 2018 through June 30, 2019. 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.

The State receives data monthly from regional contracted service agencies for every child they serve in the program. The State monitors all data monthly to ensure data validity, accuracy and completeness.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
78	78	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that "Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures." As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont's corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

Vermont has begun to implement the formal findings procedure. However, since this was not implemented until the fall of 2019, Vermont has not yet been able to verify that the source of noncompliance is correctly implementing the regulatory requirements associated with timely delivery of services for 100% of the children enrolled in early intervention based on a review of updated data. Vermont will be able to report this verification in the state's the FFY 19 APR once we have fully implemented the new procedure in accordance with OSEP Memo 09-02. This procedure, including timelines, is described below.

The State, with the VICC and regional CIS Early Intervention providers reviewed the data for this indicator and determined that the root cause for non-compliance for this indicator was due to CIS Early Intervention practitioners failing to accurately calculate dates related to timelines for this indicator. This

was addressed, as discussed above, by the State requiring practitioners to use date calculators rather than calendars, and the implementation of a Microsoft Excel reporting form, which enables regional CIS Early Intervention programs to see their degree of compliance upon submission of their data.

Technical assistance provided by the State also reinforced for CIS Early Intervention programs that the use of ongoing assessment documentation as well as the annual evaluations, specialty evaluations, combined with family input, and informed clinical opinion form the basis for determining potential eligibility. Root cause analysis identified that delays in determining potential eligibility most often occur when CIS-EI providers schedule five-domain evaluations and other specialty evaluations strictly to determine potential eligibility. It was determined that when CIS-EI providers comply with Part C regulations performing ongoing assessments to track a child's developmental progress and five-domain evaluations annually to determine continued eligibility for early intervention services, they have the necessary data to effectively determine a child's potential eligibility for Part B services. As such, there should be no delay in determining potential eligibility and notifying the LEA. As a result of this ongoing technical assistance, Vermont realized improvement in this indicator and expects this upward trend to continue.

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

The State identified 78 findings of noncompliance in FFY 2017. During this reporting year, these findings were made based on a desk-audit of the State's database for all child files for the full reporting year. This process has since been revised and an updated process developed and approved by OSEP. This updated process, described below, was not implemented until FFY 2019. Therefore, in order to verify that each individual case of noncompliance was corrected for FFY 2017, the State conducted another desk-audit of the State's database for all child files for the full FFY 2017 reporting year. Through the desk-audit, the State was able to verify that, for each of the 78 findings of non-compliance, a LEA notice was ultimately sent to the school, or that the child had exited the program causing there to no longer be a finding.

The State followed the same process as described above for findings identified in FFY 2016. The State identified the 5 remaining findings of noncompliance in FFY2016. The State verified that an LEA notification was ultimately sent, though late, for each child who was the subject in each of the 5 findings of non-compliance.

In accordance with guidance from the Office of Special Education Programs' memo 09-02, the State reviewed all instances where LEA Notifications were either not sent or were sent less than 90 days from the child's third birthday. Regional early intervention programs report data to the State monthly on all children enrolled in the program, including dates children were determined potentially eligible for Part B services as well as copies of all LEA Notifications. If a timeline is not met, the State follows up with inquiries to the region until the region verifies that the LEA Notification has been sent, provides a copy to the State and provides documentation of the date the child was determined potentially eligible for Part B services. The State then enters these dates/data into the State's database, indicates that the timeline was not compliant and the reason for the non-compliance as provided by the regional CIS Early Intervention practitioner.

In order to verify correction of all findings of non-compliance, the State reviewed the State's database, examining the required dates (determination of potential eligibility and LEA Notification) associated with this indicator in each child's record for the reporting period. The State reviewed all instances where LEA Notifications were sent less than 90 days from the child's third birthday. These data were analyzed by the State to verify that every instance of non-compliance was corrected within one year from the date the State made the findings of non-compliance.

In May 2019 Vermont received an on-site visit from the Office of Special Education Programs (OSEP) as part of their ongoing differentiated monitoring and support. During this visit, OSEP noted that Vermont's Findings process did not comply with federal requirements as outlined in OSEP memo 09-02 dated October 17, 2008. In response to this, Vermont developed a formal findings process which OSEP accepted as compliant with federal requirements. This process was implemented in November of 2019 and will be reported upon during the FFY'19 APR. Vermont's findings process is as follows:

Identification of Findings of Noncompliance

First week in November: The State queries the State's database for the full data set from July 1 – August 31 of the present Federal Fiscal Year related to the above indicators in order to account for all instances of noncompliance. From these queries, the State identifies all instances of non-compliance. The State formally notifies each region in writing of all instances of non-compliance requiring:

1. Each instance of non-compliance must be corrected within 90 days of the date of the State's letter providing the formal written notification. Verification of correction must be submitted in writing, using appropriate State documentation tools, via secure data transmission to the State by February 8th. These findings of non-compliance will be used to support the State's determinations along with the APR data compiled for the period of July 1-June 30 of the preceding Federal Fiscal Year.
2. For each region where findings have been identified, those regions must submit an updated Quality Improvement Plan (QIP) by January 15th. The QIP is a document developed to respond to the root causes that have contributed to the region's non-compliance (as identified in the preceding APR period and the State's formal Findings period). The regional QIP update must contain:
 - a) a description of the root cause analysis of the noncompliance;
 - b) progress made on the implementation of previously planned strategies, any adjustments to any strategies, or new strategies introduced to address root causes to improve compliance with the indicators in which any findings were made in the areas of the Contributing Factors Tool:
 - a. Policy and Procedures
 - b. Infrastructure
 - c. Data
 - d. Training and Technical Assistance
 - e. Supervision
 - f. Provider Practices
 - c) implementation timelines, interim evaluation measures, and data from previous measures.

Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State's data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State

will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100% compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2015	1	1	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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that "Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures." As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont's corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

Vermont has begun to implement the formal findings procedure. However, since this was not implemented until the fall of 2019, Vermont has not yet been able to verify that the source of noncompliance is correctly implementing the regulatory requirements associated with timely delivery of services for 100% of the children enrolled in early intervention based on a review of updated data. Vermont will be able to report this verification in the state's the FFY 19 APR once we have fully implemented the new procedure in accordance with OSEP Memo 09-02. This procedure, including timelines, is described below.

Technical assistance provided by the State also reinforced for CIS Early Intervention programs that the use of ongoing assessment documentation as well as the annual evaluations, specialty evaluations, combined with family input, and informed clinical opinion form the basis for determining potential eligibility. Root cause analysis identified that delays in determining potential eligibility most often occur when CIS-EI providers schedule five-domain evaluations and other specialty evaluations strictly to determine potential eligibility. It was determined that when CIS-EI providers comply with Part C regulations performing ongoing assessments to track a child's developmental progress and five-domain evaluations annually to determine continued eligibility for early intervention services, they have the necessary data to effectively determine a child's potential eligibility for Part B services. As such, there should be no delay in determining potential eligibility and notifying the LEA.

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

Through a desk audit of the State's database, the State verified that this individual findings from FFY 2015 was corrected as a LEA notification was ultimately sent to the LEA, though late.

In May 2019 Vermont received an on-site visit from the Office of Special Education Programs (OSEP) as part of their ongoing differentiated monitoring and support. During this visit, OSEP noted that Vermont's Findings process did not comply with federal requirements as outlined in OSEP memo 09-02 dated October 17, 2008. In response to this, Vermont developed a formal findings process which OSEP accepted as compliant with federal requirements. This process was implemented in November of 2019 and will be reported upon during the FFY'19 APR. Vermont's findings process is as follows:

Identification of Findings of Noncompliance

First week in November: The State queries the State's database for the full data set from July 1 – August 31 of the present Federal Fiscal Year related to the above indicators in order to account for all instances of noncompliance. From these queries, the State identifies all instances of non-compliance. The State formally notifies each region in writing of all instances of non-compliance requiring:

1. Each instance of non-compliance must be corrected within 90 days of the date of the State's letter providing the formal written notification. Verification of correction must be submitted in writing, using appropriate State documentation tools, via secure data transmission to the State by February 8th. These findings of non-compliance will be used to support the State's determinations along with the APR data compiled for the period of July 1-June 30 of the preceding Federal Fiscal Year.

2. For each region where findings have been identified, those regions must submit an updated Quality Improvement Plan (QIP) by January 15th. The QIP is a document developed to respond to the root causes that have contributed to the region's non-compliance (as identified in the preceding APR period and the State's formal Findings period). The regional QIP update must contain:

- a) a description of the root cause analysis of the noncompliance;
- b) progress made on the implementation of previously planned strategies, any adjustments to any strategies, or new strategies introduced to address root causes to improve compliance with the indicators in which any findings were made in the areas of the Contributing Factors Tool:
 - a. Policy and Procedures
 - b. Infrastructure
 - c. Data
 - d. Training and Technical Assistance
 - e. Supervision
 - f. Provider Practices
- c) implementation timelines, interim evaluation measures, and data from previous measures.

Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State's data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100% compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

8B - Prior FFY Required Actions

None

8B - OSEP Response

OSEP's response to the State's FFY 2017 SPP/APR required the State to demonstrate in the FFY 2018 SPP/APR that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016 and FFY 2015, consistent with the requirements in OSEP Memo 09-02. The State did not provide the required information. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2016 and FFY 2015 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017 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.

The State must demonstrate, in the FFY 2019 SPP/APR, that the 78 findings of noncompliance identified in FFY 2017, the 5 findings identified in FFY 2016, and the one finding from FFY 2015, were corrected. When reporting on the correction of noncompliance, the State must report that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017, FFY 2016, and FFY 2015 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.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

The State did not provide the reasons for delay, as required by the measurement table.

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8C - Indicator Data

Historical Data

Baseline	2005	83.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	95.76%	96.91%	92.08%	87.94%	89.80%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
351	525	89.80%	100%	89.71%	Did Not Meet Target	No Slippage

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

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

0

Number of documented delays attributable to exceptional family circumstances

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

120

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

State database

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

Data were collected from July 1, 2018 through June 30, 2019.

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

The State performed a desk audit of entire FFY 2018 Part C State Database, July 1, 2018 through June 30, 2019. 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.

The State receives data monthly from regional contracted service agencies for every child they serve in the program. The State monitors all data monthly to ensure data validity, accuracy and completeness.

In cases where a service was not delivered timely, the State gathers data on the reason for delay from the service coordinator of each case. If the reason is attributable to the family (ex. family illness or other family cancellation), these are designated as exceptional family circumstances, and therefore compliant, as long as the service was ultimately delivered. If the reason is attributable to the provider (ex. provider scheduling or availability) or no explanation is given to the State by the service coordinator, these are designated as non-compliant for this indicator.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
52	52	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that "Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures." As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont's corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

Vermont has begun to implement the formal findings procedure. However, since this was not implemented until the fall of 2019, Vermont has not yet been able to verify that the source of noncompliance is correctly implementing the regulatory requirements associated with timely delivery of services for 100% of the children enrolled in early intervention based on a review of updated data. Vermont will be able to report this verification in the state's the FFY 19 APR once we have fully implemented the new procedure in accordance with OSEP Memo 09-02. This procedure, including timelines, is described below.

The State monitors regional data around this indicator monthly and holds technical assistance calls with each region to address any areas of non-compliance. With the VICC, the State determined that some regional CIS Early Intervention practitioners were not correctly implementing the regulatory

requirements for holding timely transition conferences for toddlers exiting Part C services with a disability who were found to be potentially eligible for Part B services in accordance with State special education rules. The State has provided training, technical assistance and written guidance around this indicator to ensure all practitioners understand and comply with the federal requirements.

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

The State identified 52 findings of noncompliance in FFY 2017. During this reporting year, these findings were made based on a desk-audit of the State's database for all child files for the full reporting year. This process has since been revised and an updated process developed and approved by OSEP. This updated process, described below, was not implemented until FFY 2019. Therefore, in order to verify that each individual case of noncompliance was corrected for FFY 2017, the State conducted another desk-audit of the State's database for all child files for the full FFY 2017 reporting year. Through the desk-audit, the State was able to verify that, for each of the 52 findings of non-compliance, a transition conference was ultimately held, or that the child had exited the program causing there to no longer be a finding.

In accordance with guidance from the Office of Special Education Programs' memo 09-02, The State reviewed all instances where transition conferences were either not held or were held less than 90 days from the child's third birthday. Regional early intervention programs report data to the State monthly on all children enrolled in the program, including dates children were determined potentially eligible for Part B services as well as copies of all LEA Notifications, and dates of transition conferences. If a timeline is not met, the State follows up with inquiries to the region until the region verifies that the date that the transition conference was held, or verification that the child's parent/guardian declined the conference. The State then enters this dates/data into the State's database, indicates that the timeline was not compliant and the reason for the non-compliance as provided by the regional CIS Early Intervention practitioner.

In order to verify correction of all findings of non-compliance, the State reviewed the State's database, examining the required transition conference date or family declination of a conference in each child's record for the reporting period. The State reviewed all instances where transition conferences were held less than 90 days from the child's third birthday. These data were analyzed by the State to verify that every instance of non-compliance was corrected within one year from the date the State made the findings of non-compliance.

In May 2019 Vermont received an on-site visit from the Office of Special Education Programs (OSEP) as part of their ongoing differentiated monitoring and support. During this visit, OSEP noted that Vermont's Findings process did not comply with federal requirements as outlined in OSEP memo 09-02 dated October 17, 2008. In response to this, Vermont developed a formal findings process which OSEP accepted as compliant with federal requirements. This process was implemented in November of 2019 and will be reported upon during the FFY'19 APR. Vermont's findings process is as follows:

Identification of Findings of Noncompliance

First week in November: The State queries the State's database for the full data set from July 1 – August 31 of the present Federal Fiscal Year related to the above indicators in order to account for all instances of noncompliance. From these queries, the State identifies all instances of non-compliance. The State formally notifies each region in writing of all instances of non-compliance requiring:

1. Each instance of non-compliance must be corrected within 90 days of the date of the State's letter providing the formal written notification. Verification of correction must be submitted in writing, using appropriate State documentation tools, via secure data transmission to the State by February 8th. These findings of non-compliance will be used to support the State's determinations along with the APR data compiled for the period of July 1-June 30 of the preceding Federal Fiscal Year.

2. For each region where findings have been identified, those regions must submit an updated Quality Improvement Plan (QIP) by January 15th. The QIP is a document developed to respond to the root causes that have contributed to the region's non-compliance (as identified in the preceding APR period and the State's formal Findings period). The regional QIP update must contain:

- a) a description of the root cause analysis of the noncompliance;
- b) progress made on the implementation of previously planned strategies, any adjustments to any strategies, or new strategies introduced to address root causes to improve compliance with the indicators in which any findings were made in the areas of the Contributing Factors Tool:
 - a. Policy and Procedures
 - b. Infrastructure
 - c. Data
 - d. Training and Technical Assistance
 - e. Supervision
 - f. Provider Practices
- c) implementation timelines, interim evaluation measures, and data from previous measures.

Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State's data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100% compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2015	1	1	0
FFY 2014	1	1	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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that “Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures.” As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont’s corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

Vermont has begun to implement the formal findings procedure. However, since this was not implemented until the fall of 2019, Vermont has not yet been able to verify that the source of noncompliance is correctly implementing the regulatory requirements associated with timely delivery of services for 100% of the children enrolled in early intervention based on a review of updated data. Vermont will be able to report this verification in the state’s the FFY 19 APR once we have fully implemented the new procedure in accordance with OSEP Memo 09-02. This procedure, including timelines, is described below.

The State monitors regional data around this indicator monthly and holds technical assistance calls with each region to address any areas of non-compliance. With the VICC, the State determined that some regional CIS Early Intervention practitioners were not correctly implementing the regulatory requirements for holding timely transition conferences for toddlers exiting Part C services with a disability who were found to be potentially eligible for Part B services in accordance with State special education rules. The State has provided training, technical assistance and written guidance around this indicator to regions to ensure all practitioners understand and comply with the federal requirements.

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

In order to verify that the individual finding of noncompliance was corrected for FFY 2015, the State conducted another desk-audit of the State’s database for all child files. Through the desk-audit, the State was able to verify that a transition conference was ultimately held for the subject of this finding verifying that the finding of non-compliance were corrected.

In May 2019 Vermont received an on-site visit from the Office of Special Education Programs (OSEP) as part of their ongoing differentiated monitoring and support. During this visit, OSEP noted that Vermont’s Findings process did not comply with federal requirements as outlined in OSEP memo 09-02 dated October 17, 2008. In response to this, Vermont developed a formal findings process which OSEP accepted as compliant with federal requirements. This process was implemented in November of 2019 and will be reported upon during the FFY’19 APR. Vermont’s findings process is as follows:

Identification of Findings of Noncompliance

First week in November: The State queries the State’s database for the full data set from July 1 – August 31 of the present Federal Fiscal Year related to the above indicators in order to account for all instances of noncompliance. From these queries, the State identifies all instances of non-compliance. The State formally notifies each region in writing of all instances of non-compliance requiring:

1. Each instance of non-compliance must be corrected within 90 days of the date of the State’s letter providing the formal written notification. Verification of correction must be submitted in writing, using appropriate State documentation tools, via secure data transmission to the State by February 8th. These findings of non-compliance will be used to support the State’s determinations along with the APR data compiled for the period of July 1-June 30 of the preceding Federal Fiscal Year.
2. For each region where findings have been identified, those regions must submit an updated Quality Improvement Plan (QIP) by January 15th. The QIP is a document developed to respond to the root causes that have contributed to the region’s non-compliance (as identified in the preceding APR period and the State’s formal Findings period). The regional QIP update must contain:
 - a) a description of the root cause analysis of the noncompliance;
 - b) progress made on the implementation of previously planned strategies, any adjustments to any strategies, or new strategies introduced to address root causes to improve compliance with the indicators in which any findings were made in the areas of the Contributing Factors Tool:
 - a. Policy and Procedures
 - b. Infrastructure
 - c. Data
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 - c) implementation timelines, interim evaluation measures, and data from previous measures.

Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State’s data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100%

compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

FFY 2014

Findings of Noncompliance Verified as Corrected

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

OSEP conducted an on-site monitoring visit to Vermont in May 2019. On August 9, 2019, OSEP notified the State that "Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures." As a result, Vermont was required to develop and implement a general supervision system that verifies correction of noncompliance in accordance with OSEP Memo 09-02. Vermont's corrective action and written procedure for issuing findings of noncompliance, and verifying correction was approved by OSEP in a letter dated December 12, 2019.

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The State monitors regional data around this indicator monthly and holds technical assistance calls with each region to address any areas of non-compliance. With the VICC, the State determined that some regional CIS Early Intervention practitioners were not correctly implementing the regulatory requirements for holding timely transition conferences for toddlers exiting Part C services with a disability who were found to be potentially eligible for Part B services in accordance with State special education rules. The State has provided training, technical assistance and written guidance around this indicator to regions to ensure all practitioners understand and comply with the federal requirements.

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

In order to verify that the individual finding of noncompliance was corrected for FFY 2015, the State conducted another desk-audit of the State's database for all child files. Through the desk-audit, the State was able to verify that a transition conference was ultimately held for the subject of this finding verifying that the finding of non-compliance were corrected.

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Verification of Correction of Noncompliance and Demonstration of Ongoing Compliance

March 31:

Prong 1: The State will perform a desk audit of the State's data system for all regional Early Intervention Programs where there were previously identified Findings of non-compliance. During this desk audit the State will verify that the regional CIS Early Intervention Programs have corrected each instance of previously identified noncompliance for each infant/toddler.

Prong 2: The State will review updated data from January 1 – January 31. The purpose of this data review is to ensure that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements for indicators where there had been demonstrated non-compliance. The State will determine that the regional CIS Early Intervention Programs are correctly implementing regulatory requirements when the data show 100% compliance for each indicator where there was previously identified noncompliance.

In any case where a regional CIS Early Intervention Program is unable to demonstrate 100% compliance, the State will perform data reviews on the first

month of each quarter until both prongs are satisfied with 100% correction of every finding of noncompliance unless the child is no longer enrolled in the program, and demonstration 100% compliance from an updated period.

8C - Prior FFY Required Actions

None

8C - OSEP Response

OSEP's response to the State's FFY 2017 SPP/APR required the State to demonstrate in the FFY 2018 SPP/APR that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016 and the remaining findings of noncompliance from FFY 2015 and FFY 2014, consistent with the requirements in OSEP Memo 09-02. The State did not provide the required information. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2016, 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. Additionally, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2015 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 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.

The State must demonstrate, in the FFY 2019 SPP/APR, that the 52 findings of noncompliance identified in FFY 2017, and the one finding from FFY 2015, were corrected. When reporting on the correction of noncompliance, the State must report that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017, and FFY 2015 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.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2019 SPP/APR, that the remaining uncorrected findings of noncompliance identified in FFY 2016, and FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2018 and each EIS program or provider with remaining noncompliance in FFY 2016 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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

The State did not provide the reasons for delay, as required by the measurement table.

8C - Required Actions

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Select yes to use target ranges.

Target Range not used

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

NO

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1 Number of resolution sessions	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

The VICC hosts a meeting with representatives from each of the state's 12 regional Early Intervention Programs annually each November. The purpose of this meeting is to discuss regional Early Intervention Program data and determinations made using data collected between July 1st the previous year through June 30th of the current year. These are the data that Vermont prepares for the Annual Performance Report due to OSEP in February. These data also inform the regional early intervention program determinations. The VICC and regional early intervention program providers review the data and determine root causes contributing to areas of non-compliance, as well as celebrate areas of strength. Regional early intervention providers, with facilitation and input from members of the VICC, work together to develop continuous quality improvement plans.

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 an 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 engaged with regional CIS Early Intervention programs to host two VICC meetings at a regional level and intentionally outreached to engage parents to participate in these meetings. The meetings were facilitated in a family-friendly manner in order to successfully engage those parents who attended as full participants with the regular VICC members. The success of these meetings was evaluated by the VICC and will inform next steps for future regional meeting strategies. In FFY 2019 the VICC will be examining additional ways to involve families or get their input into CIS services and initiatives, such as the annual CIS Institute.

In addition to leading the VICC and CIS family engagement efforts, Vermont's CIS Family Engagement Coordinator works with Vermont's Building Bright Futures (BBF) Early Childhood Advisory Council on activities that seek to engage families around early childhood issues statewide. CIS, the VICC, and BBF Council are coordinating their family engagement activities to ensure alignment across these systems and maximize the effectiveness of strategies that are implemented.

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 practitioners 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 Vermont Family Network, Vermont's Parent Training and Information Center, 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; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

The VICC set FFY 2019 targets during the January 2020 meeting based on the guidance provided by the Office of Special Education Services earlier in the month. The VICC agreed that technical assistance was needed to review the state's data trends and strategic areas of focus related to ongoing data improvement, data literacy among early intervention providers, training and technical assistance to understand IDEA requirements, the SSIP and Vermont's demographics in order to set targets for early intervention indicators and outcomes. The VICC is intending to include technical assistance from DaSy and ECTA for the March 2020 VICC meeting, and to invite a broader group of CIS-EI providers to support the target-setting process. It was acknowledged that there were no individuals within State leadership or the VICC who were involved the last time Vermont set its targets, and therefore receiving technical assistance would be critical to set targets that would most effectively support ongoing program improvement for Vermont's early intervention services. Therefore, the VICC concluded that current targets for FFY 2018 would be maintained for FFY 2019. The VICC is committed to developing, documenting and engaging in a replicable process for updating targets following the March 2020 meeting for FFY 2020 and beyond.

Historical Data

Baseline					
FFY	2013	2014	2015	2016	2017
Target>=					
Data					

Targets

FFY	2018	2019
Target>=		

FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2018. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1 Mediations held	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.a.i Mediations agreements related to due process complaints	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

The Vermont Interagency Coordinating Council (VICC) advises and assists all of Children's Integrated Services (CIS). This 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, personnel development, outreach activities, and other CIS system or CIS Early Intervention-specific issues.

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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.

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Historical Data

Baseline	2005				
FFY	2013	2014	2015	2016	2017
Target>=					
Data					0.00%

Targets

FFY	2018	2019
Target>=		

FFY 2018 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
		0	0.00%			N/A	N/A

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2018. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Designated Lead Agency Director

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

Name:

Danielle Howes

Title:

Children's Integrated Services, Part C Program Administrator

Email:

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Phone:

802-279-1302

Submitted on:

04/28/20 6:34:43 PM