

# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on  
FFY 2021

Vermont



**PART C DUE**  
**February 1, 2023**

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 the Office of Special Education Programs (OSEP). The updated Agreement can be found here: [https://education.vermont.gov/sites/aoe/files/documents/edu-early-education-state-part-c-interagency-agreement\\_0.pdf](https://education.vermont.gov/sites/aoe/files/documents/edu-early-education-state-part-c-interagency-agreement_0.pdf).

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, and/or who are involved with Vermont's child protection system, are able to access high quality care and supports that support their successful inclusion in classroom activities. Early care and education programs are able to receive resources and specialized trainings to fully meet the needs of all the children in their care and their families. .

Vermont's Part C Early Intervention services are known as CIS Early Intervention services. The State of Vermont contracts with 11 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's CIS Early Intervention services are delivered as part of the broader CIS multidisciplinary service array.

CIS Services are provided to:

1. Pregnant/Postpartum people 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 Credential.

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 people, 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, Part C Administrator, Program Improvement Manager, Data Manager, Program Coordinators for Home Visiting (both nursing and family support), Early Childhood and Family Mental Health, a Specialized Child Care Services

Coordinator, a Personnel Development Coordinator and a Family Engagement Coordinator. 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.

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

##### **General Supervision System**

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

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. You can find more about system of payments here:

<https://outside.vermont.gov/dept/DCF/Shared%20Documents/CDD/Publications/EI-Paying-For-Services.pdf>.

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 (<https://dcf.vermont.gov/cdd/reports/ei>). The State CIS Lead Agency with the Vermont Interagency Coordinating Council hosts an annual Data, Determinations, and Continuous Quality Improvement meeting with all CIS EI providers. The State CIS Lead Agency and Vermont Interagency Coordinating Council reviews all annual data collected between July and the following June, including child and family outcomes, as well as findings data. The purpose of the meeting is to build data literacy among the CIS EI providers, conduct root cause analysis, and to facilitate data-based decision making for the development of regional Quality Improvement Plans.

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 and 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 team ensures all monthly data submitted by the CIS Early Intervention agencies is complete, valid and reliable. The CIS Data team 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. Review the Vermont General Supervision and Monitoring Process here: <https://outside.vermont.gov/dept/DCF/Shared%20Documents/CDD/CIS/SPP-APR/DMS/EI-Supervision-Monitoring-Process.pdf>

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.

##### **Procedural Safeguards, Complaints and Dispute Resolution**

Vermont Part C has an agreement with the Vermont 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/vermont-special-education/resources-for-families/dispute-resolution>. In addition, information on submitting a complaint and due process rights are available at: <https://outside.vermont.gov/dept/DCF/Shared%20Documents/CDD/Publications/EI-Parental-Rights.pdf>. 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, complaints pending, and the timelines 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/what-we-do/family->

support/special-education/. The link under the "Conflict Resolution" section.). 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=10Lzcfz3Uil&feature=youtu.be>.

#### **Technical Assistance System:**

#### **The mechanisms that the State has in place to ensure the timely delivery of high quality, evidence-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 video conferences with the regional CIS Early Intervention host agencies. These meetings 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 video conferences with regional CIS Early Intervention programs as needed. The meetings 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 ongoing technical assistance on site or virtually 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 understanding 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 ([https://ectacenter.org/sysframe/resources\\_results.asp?sfc=AC&sfqi=AC0&sfeq=AC](https://ectacenter.org/sysframe/resources_results.asp?sfc=AC&sfqi=AC0&sfeq=AC)). The link is under "Local Contributing Factor Tool for the SPP/APR Compliance Indicators...." Tools are also available for outcome indicators on this same site) and the Relationship of Quality Practices to Child and Family Outcome Measurement ([https://ectacenter.org/~pdfs/eco/QualityPracticesOutcomes\\_2012-04-17.pdf](https://ectacenter.org/~pdfs/eco/QualityPracticesOutcomes_2012-04-17.pdf)).
  - iii. Facilitated discussions with regional CIS Early Intervention practitioners during monthly video conferences 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 Program's (OSEP) 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 and performance on Child Outcomes.
2. the Early Childhood Technical Assistance Center and the Center for IDEA Early Childhood Data Systems (DaSy) to improve Child and Family Outcomes.
3. the IDEA Data Center to support the State in identifying and implementing strategies to improve compliance with transition timelines, and performing data analysis and representation of Child Outcomes.
4. the Early Childhood Personnel Center through technical assistance to improve recruitment, retention and qualifications of Early Intervention staff.
5. the Center for IDEA Fiscal Reporting to understand fiscal requirements under the federal Part C grant.

#### **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://dcf.vermont.gov/cdd/cis>) and CIS Guidance Manual (<https://dcf.vermont.gov/cdd/partners/cis/tools>) 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: <https://dcf.vermont.gov/cdd/partners/cis/tools> under Training Resources . These include but are not limited to: 1. CIS Orientation (3 modules); 2. One Plan [IFSP] Orientation (5 modules); 3. Mandated Reporter Training; 4. Early Intervention Orientation (8 modules) – Required for Early Intervention providers only; recommended for all other CIS service providers. 5. Basic Specialized Care Training required for Child Care Coordinators; and other modules as they become available. Additionally, CIS contracts require that contractors "Demonstrate competence with and adhere to current best practices by participating in ongoing professional development and regular supervision."

In addition to professional development required by the service provider's specialty, license or certification, and training 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. participation in CIS Community of Practice Calls, which will be identified in advance as professional development by the State and will require attendees to complete an electronic evaluation at the conclusion of each call as requested by the State;
3. attendance at regional trainings provided by the State, with an electronic evaluation completed at the conclusion of the training;
4. completion of relevant on-line CIS training modules as they become available;
5. participation in other training and/or professional development opportunities required by CIS State staff based on contract monitoring activities; and
6. Engagement in other State-sponsored trainings, both core and discipline-specific trainings including, but not limited to:
  - i. Parents as Teachers (PAT);
  - ii. Maternal Early Childhood Sustained Home-visiting (MECSH); and
  - iii. Trainings related to the Early Intervention Certificate and IDEA Part C rules and regulations

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 use of Ages and Stages Questionnaire (ASQ), and Ages and Stages Social Emotional (ASQ-SE) 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 co-lead to address inclusion practices, 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 interprofessional education across speech language pathology and early intervention/early childhood special education. Students receiving tuition assistance through this grant have a service obligation following graduation to work in the early intervention field. It is hoped that this will support a much-needed gap in capacity for both speech and early intervention. 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. This survey helps Vermont gain an 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.

The State hosts a CIS Institute annually. The topic(s) of the institute and follow-up supports to support integration 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.

CIS Early Intervention Credential Certification:

The State CIS Early Intervention program has an Early Intervention Certificate. 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 was implemented in 2020. The renewal requirements 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.

#### **Broad Stakeholder Input:**

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

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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 State Systemic Improvement Plan 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. For example, as the State examined investments of the American Rescue Plan funds awarded to Early Intervention, the State hosted meetings with the VICC for their input, and then held three virtual focus group sessions open to all Early Intervention Program staff to gather input into their needs resulting from the pandemic.

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: Deaf, Hard of Hearing, DeafBlind Council; Autism Workgroup; Early Childhood Multi-Tiered System of Supports; Universal Screening; Building Bright Futures Council and workgroups; Vermont Early Learning Standards development and revisions; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

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

YES

**Number of Parent Members:**

5

**Parent Members Engagement:**

**Describe how the parent members of the Interagency Coordinating Council, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

Over FFY21, the Vermont Interagency Coordinating Council continued to support its five family representatives as they fulfilled their council appointments. Support included regular individual check ins from the Family Engagement Coordinator before and after meetings, as well as family advisor specific group time to offer support, further discuss council agenda items, and to bring forward family advisor topics for full council discussion. Family representatives generated a list of topics that were resonating for them. Over a series of council meetings, family representatives, through sharing about their lived experiences receiving CIS services, supported the council in exploring more fully how to advise and assist around these topic areas. Discussions have helped to further define council processes, priority areas, and facilitated the expansion of council membership. In addition to families leading the Vermont Interagency Coordinating Council in the aforementioned way, family representatives were active members of two council workgroups that stewarded stakeholder engagement around the use of federal Part C ARPA funding. Family representatives not only provided their own direct input but also worked alongside the Administrative team to review, interpret, and further develop ideas into specific projects being rolled out over the next fiscal year. Furthermore, family representatives have been selected to serve on review committees that will score proposals and ultimately select successful bidders on the advertised projects.

Outside of advising on the use of ARPA funding, the VICC Family Engagement Workgroup, a subset of the full council which includes family representatives and providers from Early Intervention teams, as well as staff members from Vermont's Parent Training and Information Center, Vermont Family Network, also provided guidance around updating the Children's Integrated Services Informational Rack Card, the CIS-EI Family Survey letter, supported the CIS System in more clearly outlining the CIS Fostering Family Connections Family Engagement, Partnership, Leadership Continuum, developing an "Advise and Assist" One Pager outlining the role of the Vermont Interagency Coordinating Council, a VICC Membership Document that helped support council members in getting to know one another more, and contributed to the revision of the Facilitation Guide used in the Annual Data and Determinations, Continuous Quality Improvement Planning meeting.

All five family representatives from the council facilitated regional breakout discussions in Vermont's Data, Determinations, and Continuous Quality Improvement Planning meeting. This is Vermont's CIS-EI annual meeting to deliver determinations to regional CIS-EI teams and guide the revision of regional Quality Improvement Plans. With all five family leaders serving in this capacity, it meant that nearly half of the regional teams were lead by a family representative as they interpreted their data and identified areas for improvement.

These contributions from Family Representatives not only lead to meaningful change within the Children's Integrated Services system, but also lead to VICC Family Representatives getting connected to other advising and assisting opportunities. The Family Engagement Coordinator works to ensure that families are continuing to develop their leadership skills and are provided access to additional ways to advise on Vermont's Early Childhood programs.

**Activities to Improve Outcomes for Children with Disabilities:**

**Describe the activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for infants and toddlers with disabilities and their families.**

The State Part C Administrator hosts monthly meetings with the regional early intervention programs to discuss issues affecting the field or service delivery (such as staffing challenges), provide guidance around emerging or ongoing (such as adherence to policies) issues, share program performance data, and review progress on regional Continuous Quality Improvement Plans. Regional early intervention program providers also participate on the Vermont Interagency Coordinating Council and various workgroups to provide input and feedback on current issues facing the field or planned improvement activities related to professional development and service delivery to enrolled children and their families.

The Vermont Interagency Coordinating Council meets virtually each month either for workgroup activities or full Council business associated with the State's Systemic Improvement Plan, reviewing family engagement materials (such as the family survey), and identifying improvement strategies (such as planning future professional development opportunities). The Vermont Interagency Coordinating Council's advice and input is sought around continuous improvement activities, such as how to improve response rates to the family survey, especially among historically marginalized or underrepresented populations, or address staff shortages across the state.

The Family Engagement Coordinator reaches out, as needed, to engage families who are not members of the Council, but who have expressed an interest and desire to provide input into improvement activities. Families give input into outreach and informational materials being developed for families to ensure that the language is understandable and engaging for families.

**Soliciting Public Input:**

**The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

The Vermont Interagency Coordinating Council, with participation from many early intervention providers, met throughout the summer of 2020 to set targets for the next five years. This process was focused on reviewing data trends, discussing values of families and providers, and identifying achievable but aggressive targets to ensure that Vermont provides high quality services that best support children and their families throughout the coming years.

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 Vermont Interagency Coordinating Council co-hosts, with the State CIS Early Intervention team, the annual Data, Determinations, and Continuous Quality Improvement Meeting held at the end of each calendar year. This meeting includes representation from each of the State's eleven Regional CIS Early Intervention host agencies. Throughout the meeting, Council-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. 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 Council 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 Council, work together to develop continuous quality improvement plans.

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 Vermont Interagency Coordinating Council members support the CIS Early Intervention host agencies to think critically about their data, consider root causes, identify concrete areas for improvement, improvement strategies, and interim evaluation measures to track progress.

In addition to this work, the State Part C Administrator hosts monthly meetings with the regional early intervention programs to discuss issues affecting the field or service delivery (such as staffing challenges), provide guidance around emerging issues or ongoing issues (such as adherence to policies, State rules, and federal regulations), share and discuss program performance data, and review progress on regional Continuous Quality Improvement Plans.

#### **Making Results Available to the Public:**

**The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.**

The State CIS Early Intervention publicly publishes data for all indicators, including annual targets and program performance trends annually on the State's website at: <https://dcf.vermont.gov/cdd/reports/ei>. 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 under the Regional CIS – EI Data section. These data tables list the annual targets at the top of each table for each indicator.

#### **Reporting to the Public:**

**How and where the State reported to the public on the FFY 2020 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 2020 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 2020 APR in 2022, is available.**

The State CIS Early Intervention develops all reports and publishes them online 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 Vermont Part C's State Performance Plan and Annual Performance Report to the Agency of Human Services/Child Development Division's website: <https://dcf.vermont.gov/cdd/reports/ei>. This website link is forwarded to the Vermont Agency of Education and Vermont Family Network for posting on their respective websites and newsletters.
3. March/April: The State publishes data for all indicators, including annual targets and program performance trends annually on the State's website at <https://dcf.vermont.gov/cdd/reports/ei>. This Public Reporting contains data from each regional CIS Early Intervention Program related to compliance and results indicators contained in the State Performance Plan under the Regional CIS – EI Data section.
4. August/September: The State provides all regional Early Intervention Programs with statewide and regional data results from the annual family survey conducted between March and June of the current year.
5. December: The Vermont Interagency Coordinating Council, State Lead Agency, and representatives from each of the state's twelve (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 Vermont Interagency Coordinating Council, work together to develop continuous quality improvement plans.
6. April and November: Publicly report Vermont Part C 618/Child Count data on Agency of Human Services/Child Development Division's website: <https://dcf.vermont.gov/cdd/reports/ei>

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

None

## **Intro - OSEP Response**

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

## **Intro - Required Actions**

The State's IDEA Part C determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 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 2022 SPP/APR submission, due February 1, 2024, 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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	86.40%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	88.08%	89.51%	96.66%	96.60%	91.92%

### Targets

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

### FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,244	1,440	91.92%	100%	95.14%	Did not meet target	No Slippage

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

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

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**Provide reasons for delay, if applicable.**

The majority of delays (25 or 12.1%) were attributable to provider scheduling issues and provider availability. Other delays were caused by no provider availability as regions struggled with reduced specialty provider capacity (9 or 4.6%).

Family scheduling difficulties caused some delays (24 or 9.6%), and other delays were a result of family illness or hospitalization (25 or 11.3%) and illness due to COVID (17 or 8.3%).

**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, 2021 through June 30, 2022

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

In calculating this indicator, the State conducted 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) between July 1, 2021 and June 30, 2022. 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 conducted 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 gathered data on the reason for delay from the service coordinator of each case. If the reason was 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 was 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 2020**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
34	34		0

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

A desk audit of the State's data system for all 12 regional providers identified 33 Findings of non-compliance. The root cause of the non-compliance was the provider's failure to indicate actual start dates, exit dates and documentation of services. Vermont requested that each provider give actual start dates, exit dates and documentation of services for these Findings. The State reviewed all 33 Findings and verified that all actual start dates, exit dates and documentation of services had been provided. The State then reviewed updated data (a 30-day segment) to verify compliance. The State verified that all 12 providers had 100% compliance. However, the State discovered 1 additional Finding for 1 provider. This provider failed to indicate the actual start date for services. Vermont requested that provider indicate the actual start date for this service. The State verified that the 1 Finding was corrected by ensuring the actual start date had been provided. Vermont pulled additional updated data (a 30-day segment) for the 1 provider and verified 100% compliance. Vermont verified that all 34 Findings of non-compliance were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal findings documented by the state.

Vermont provided monthly technical assistance meetings with each program with Findings of non-compliance to train staff around data reporting requirements. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that all children received services unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention programs that had identified noncompliance in FFY 2020 are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008

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

The State performed a desk audit of the State's data system for all 12 regional Early Intervention Programs where there were identified Findings of non-compliance. During this desk audit the State verified that each of the 34 Findings of non-compliance had been corrected. In each instance, the service was either delivered late, or the child exited from the program. Vermont requested that each provider give actual start dates, exit dates and documentation of services for these findings. The State reviewed all 34 findings and verified that all information requested had been provided. Each individual child received services unless no longer in the jurisdiction of the program. Actual start dates were used to confirm that 16 Findings of

delayed starts of service were provided to the children for which they were planned within one year of the formal findings documented by the State. Exit dates confirmed that the remaining 18 individual Findings of non-compliance were children that exited and were no longer within the jurisdiction of the program. 5 children exited the program before services began and were therefore no longer in the jurisdiction of the program, 2 children were found to be developmentally appropriate after evaluation and therefore exited out of the jurisdiction of the program, 4 families declined services and exited out of the jurisdiction of the program, 1 child moved to another state, 2 families chose to use private providers outside of Part C and exited out of the jurisdiction of the program, and 4 families failed to respond to repeated attempts to begin services and were subsequently exited out of the jurisdiction of the program. The state reviewed updated data (a 30-day segment) to verify 100% compliance. Each individual child received services unless no longer in the jurisdiction of the program. The State verified that all 34 findings were corrected at 100% and that each individual case of noncompliance was corrected at 100% unless the children were no longer in the jurisdiction of the program. Vermont verified that all services were provided to the children for which they were planned within one year of the formal findings documented by the state.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	52	52	0

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

A desk audit of the State’s data system for all 12 regional providers identified 52 findings of non-compliance. The root cause of the non-compliance was the provider’s failure to indicate actual start dates, exit dates and documentation of services. Vermont requested that each provider give actual start dates, exit dates and documentation of services for these findings. The State reviewed all 52 findings and verified that actual start dates, exit dates and documentation of services had been provided for 50 findings. 1 region had not provided actual start dates for 2 Findings. Vermont made a second request to that provider to give actual start dates for services. The State then verified that start dates had been provided for the 2 Findings. After verifying that all 52 Findings were corrected at 100%, the State then reviewed updated data (a 30-day segment) to verify compliance. The state verified that all 12 providers had 100% compliance. Vermont verified that all 52 findings of non-compliance were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal findings documented by the state. Vermont provided technical assistance to each program with findings of non-compliance. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that all children received services unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention programs that had identified non-compliance in FFY 2019 are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008.

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

The State performed a desk audit of the State’s data system for all 12 regional Early Intervention Programs where there were identified Findings of non-compliance. During this desk audit, the State verified that each of the 52 Findings of non-compliance had been corrected. In each instance, the service was either delivered late, or the child exited from the program. Vermont requested that each provider give actual start dates, exit dates and documentation of services. The State reviewed all 52 Findings and verified that all actual start dates, exit dates and documentation of services had been provided

Each individual child received services unless no longer in the jurisdiction of the program. Actual start dates were used to confirm that 36 instances of delayed starts of service were ultimately provided to the children for which they were planned within one year of the formal findings documented by the State. 3 Findings were ultimately considered corrected as the children exited the program prior to the service being delivered as confirmed by the State receiving all exit documentation and data. 13 Findings were corrected as they were verified as not being accurate Findings due to the regional providers submitting clarifying data as evidence to the State that the documented delays were due to families choosing to have services begin later than thirty days after their signed consent, declining providers or services they had originally consented to on their child’s One Plan, or the family canceling multiple scheduled services. Vermont reviewed updated data (a 30-day segment) to verify 100% compliance. Each individual child received services unless no longer in the jurisdiction of the program. The State verified that all 52 Findings were corrected at 100% and that each individual case of non-compliance was corrected at 100% unless the children were no longer in the jurisdiction of the program. Vermont verified that all services were provided to the children for which they were planned within one year of the formal findings documented by the state.

**1 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the 52 uncorrected findings of noncompliance identified in FFY 2019 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2020 and each EIS program or provider with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2020 SPP/APR**

A formal desk audit of the State’s data system for all 12 regional providers identified 0 Findings of non-compliance. The State then pulled additional data (a 30-day segment) for all 12 regional providers to verify compliance. The State verified that all 12 providers had 100% compliance. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that all children received services for which they were entitled unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention programs are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008. Prior to conducting a formal desk audit, as per OSEP approved monitoring procedure, the State reviewed all data in the State’s database for all 12 regional providers to identify any data anomalies or missing data related to each indicator and sent informal inquiries to the regions where these were

noted. This informal review served to provide an opportunity for regional programs to verify the accuracy of the data or provide clarification before the States formal Findings or Determinations. Vermont pulled updated data to verify that all missing data had been received and all 12 regions had corrected all requests for data.

## **1 - OSEP Response**

### **1 - Required Actions**

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	98.00%

FFY	2016	2017	2018	2019	2020
Target >=	97.00%	97.20%	97.30%	97.30%	97.30%
Data	97.18%	97.88%	96.14%	96.49%	97.11%

### Targets

FFY	2021	2022	2023	2024	2025
Target >=	97.30%	97.30%	97.30%	97.30%	97.30%

### Targets: Description of Stakeholder Input

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially

parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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 State Systemic Improvement Plan 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. For example, as the State examined investments of the American Rescue Plan funds awarded to Early Intervention, the State hosted meetings with the VICC for their input, and then held three virtual focus group sessions open to all Early Intervention Program staff to gather input into their needs resulting from the pandemic.

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: Deaf, Hard of Hearing, DeafBlind Council; Autism Workgroup; Early Childhood Multi-Tiered System of Supports; Universal Screening; Building Bright Futures Council and workgroups; Vermont Early Learning Standards development and revisions; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

**Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	982
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	1,025

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
982	1,025	97.11%	97.30%	95.80%	Did not meet target	Slippage

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

Only two regions out of ten reported less than 100% of infants and toddlers with One Plans (IFSPs) who primarily receive early intervention services in the home or community-based settings. One of these regions is affiliated with a large hospital and most of the specialty providers (SLP, OT, PT) who provide services to infants and toddlers within our program work primarily in the hospital setting. The second region with less than 100% of infants and toddlers receiving services in the home or community indicated more private providers choosing to offer services in their clinical setting rather than travel to homes or community-based settings.

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

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

## 2 - Required Actions

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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



### 3 - Indicator Data

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

NO

#### Targets: Description of Stakeholder Input

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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#### Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2009	Target>=	61.60%	61.60%	61.60%	61.60%	62.00%
A1	60.80%	Data	60.06%	63.66%	64.36%	67.28%	75.96%
A2	2009	Target>=	60.00%	60.00%	60.00%	60.00%	61.00%

<b>A2</b>	59.40%	Data	57.43%	64.92%	64.54%	59.84%	65.11%
<b>B1</b>	2009	Target>=	69.30%	69.50%	69.70%	69.70%	69.70%
<b>B1</b>	67.90%	Data	65.45%	71.95%	70.63%	73.38%	80.57%
<b>B2</b>	2009	Target>=	54.20%	54.20%	54.20%	54.20%	54.50%
<b>B2</b>	53.40%	Data	46.42%	53.90%	50.99%	44.25%	53.63%
<b>C1</b>	2009	Target>=	73.50%	73.50%	73.50%	73.50%	73.50%
<b>C1</b>	72.90%	Data	69.15%	71.95%	73.88%	73.16%	82.26%
<b>C2</b>	2009	Target>=	61.40%	61.40%	61.40%	61.40%	67.00%
<b>C2</b>	60.60%	Data	66.61%	67.80%	67.88%	61.10%	69.14%

**Targets**

<b>FFY</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>	<b>2024</b>	<b>2025</b>
Target A1>=	62.50%	63.00%	63.50%	63.50%	63.50%
Target A2>=	61.50%	62.00%	62.50%	62.50%	62.50%
Target B1>=	70.00%	70.00%	70.00%	70.00%	70.00%
Target B2>=	54.50%	54.50%	54.50%	54.50%	54.50%
Target C1>=	74.00%	74.50%	75.00%	75.00%	75.00%
Target C2>=	67.00%	67.50%	68.00%	68.00%	68.00%

**FFY 2021 SPP/APR Data**

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

737

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

<b>Outcome A Progress Category</b>	<b>Number of children</b>	<b>Percentage of Total</b>
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	115	15.60%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	131	17.77%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	265	35.96%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	226	30.66%

<b>Outcome A</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2020 Data</b>	<b>FFY 2021 Target</b>	<b>FFY 2021 Data</b>	<b>Status</b>	<b>Slippage</b>
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	396	511	75.96%	62.50%	77.50%	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	491	737	65.11%	61.50%	66.62%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	138	18.72%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	213	28.90%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	296	40.16%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	90	12.21%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	509	647	80.57%	70.00%	78.67%	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	386	737	53.63%	54.50%	52.37%	Did not meet target	Slippage

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

Indicator 3, Outcome B, Summary Statement 2 was substantially improved across half of the 12 regional sites, with half showing considerable declines. Regions with decline in this outcome area showed 10 - 15% less percentage of children who substantially increased their rate of growth by the time they turned 3 years of age or exited the program. Root cause analysis shows the regions with declines have relatively new staff and management teams. The State plans to carry out in depth training around Child Outcomes with each region to ensure they understand the Indicator and have consistency in recording.

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

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	107	14.52%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	113	15.33%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	320	43.42%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	197	26.73%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	433	540	82.26%	74.00%	80.19%	Met target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	517	737	69.14%	67.00%	70.15%	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.

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	942
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.	284

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

Regional CIS Early Intervention contracted providers were required to submit child outcomes summary ratings using the decision tree based on the decision tree developed by the Early Childhood Outcomes Center. This rating form and decision tree are available on Vermont's website at: [https://cispartners.vermont.gov/sites/cis/files/Forms/COS\\_Rating\\_Form\\_Decision\\_Tree.doc](https://cispartners.vermont.gov/sites/cis/files/Forms/COS_Rating_Form_Decision_Tree.doc)

These data are reported by regional Early Intervention programs for every infant and toddler who is active in the early intervention program, regardless of the length of time they are served. The State reports data in the Annual Performance Report on those infants and toddlers who have received at least six (6) months of services within Vermont's CIS Early Intervention Program. The data on infants and toddlers in this cohort are taken from a desk audit of the State's CIS database. These data are then 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

### 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 and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

States will be required to compare the current year's response rate to the previous year(s) response rate(s), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of families that received Part C services.

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

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group)

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

**Beginning with the FFY 2022 SPP/APR, due February 1, 2024**, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race and ethnicity in its analysis. In addition, the State's analysis must also include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another demographic category approved through the stakeholder input process.

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2011	Target>=	78.40%	78.50%	78.50%	78.50%	87.00%
A	78.10%	Data	81.68%	87.19%	92.74%	88.70%	83.56%
B	2011	Target>=	86.10%	86.10%	86.10%	86.10%	92.00%
B	###C04BBA SEDA TA###	Data	87.99%	92.48%	94.61%	92.81%	88.74%
C	2011	Target>=	81.20%	81.20%	81.20%	81.20%	90.00%

C	80.80 %	Data	84.98%	87.47%	91.33%	87.67%	82.69%
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**Targets**

FFY	2021	2022	2023	2024	2025
Target A>=	89.00%	81.00%	93.00%	93.00%	93.00%
Target B>=	93.50%	95.00%	96.50%	96.50%	96.50%
Target C>=	90.50%	91.00%	91.50%	91.50%	91.50%

**Targets: Description of Stakeholder Input**

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**FFY 2021 SPP/APR Data**

The number of families to whom surveys were distributed	724
Number of respondent families participating in Part C	463
Survey Response Rate	63.95%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	403
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	459
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	423
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	459
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	403
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	457

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 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)	83.56%	89.00%	87.80%	Did not meet target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	88.74%	93.50%	92.16%	Did not meet target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	82.69%	90.50%	88.18%	Did not meet target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

**Survey Response Rate**

FFY	2020	2021
Survey Response Rate	61.22%	63.95%

**Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.**

While Vermont CIS has made progress in outreaching to and building strong partnerships with families and providers within historically marginalized populations, there is still a lot of work to do. The Family Engagement Coordinator helped facilitate the Vermont Interagency Coordinating Council in achieving its goal of partnering with representatives from organizations connected to Vermont's ethnically, linguistically and racially diverse families. These appointments and/or connections to the council included adding representatives from Vermont's Migrant Education Program, the Vermont New American Advisory Council, a cultural liaison/broker from the Abenaki Tribe, as well as representatives from the Vermont Assistive Technology Program, The Center for Disability and Community Inclusion, and Vermont's Early Hearing and Detection Intervention program. Additionally, the Family Engagement Coordinator worked with national technical assistance resources from the Early Childhood Technical Assistance Center to lead the council through a systematic exploration of its diversity and recruitment processes over the 2021-2022 council year. These partnerships have been extraordinarily helpful in better equipping the council to advise on topics related to equitable access, service delivery, and outcomes for all eligible Vermont families. The council looks forward to continuing this work in the next fiscal year.

**Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of families that received Part C services.**

The statewide response rate for this reporting year is 63.95% which is an increase due to most regions making this part of their Quality Improvement Plans. This more concerted effort to increase response rates throughout the state by providing multiple modalities for completion, providing translated surveys and assisting staff with scripts to engage families in completing the survey proved beneficial and will be continued. Only two regions had less than a 50% response rate (Burlington at 43.84% due to low staffing challenges and Morrisville at 38.46% due to the unexpected death of a provider) while one region, Newport had a 100% response rate. All other regions were in the 60 - 80% range. The two regions with lower response rates will continue to address strategies (such as offering multiple modalities for completion and providing scripts to assist staff with explanations to families) to increase their numbers with the current Quality Improvement Plans. These numbers show a good representation of Vermont families across geographic areas of rural and urban regions. Two translated surveys were requested this period, and both were returned indicating the benefit of offering this service to assist with non response bias. Response rates by ethnicity were as follows: White families 88.98%, families identifying with two or more races 5.4%, Black/African American families 1.73%, Asian families 1.08%, American Indian .65% and Native Hawaiian/Pacific Islander .22%.

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

Analysis comparing reported race representation in survey responses to Vermont's 2021 Child Count data, revealed the following: families identifying as Hispanic/Latino represent .88% of Part C participants and responded to this survey at a rate of 1.94%, families identifying as American Indian are 0.1% of the Part C population and .65% of respondents, families identifying as Asian are 1.37% of Part C and 1.08% of respondents, families identifying as Black/African American are 2.15% of Part C and 1.73% of respondents, families identifying as Hawaiian/Native Islander are .29% of Part C and .22% of respondents, families identifying as White are 88.37% of Part C and 88.98% of respondents and families identifying as two or more races are 6.84% of Part C and 5.4 % of respondents.

This representation analysis shows progress in Vermont's efforts to reach previously underrepresented groups. Using a +/- 3% discrepancy metric shows that each race/ethnicity of survey respondents are representative of the population served by the Part C program.

The State also considered gender of child in analysis of family survey response. 37% of responses were families of female children and 63% responded for families of male children. This compares favorably to the FY 2021 Child Count data of 62.24 % male children and 37.76% female children served by the Part C program.

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy, age of the infant or toddler, and geographic location in the proportion of responders compared to target group).**

Vermont compared race and ethnicity represented in survey responses against FFY 2021 Child Count report. The numbers were compared using a +/- 3% discrepancy rate. This measurement was used to determine representativeness as any other statistical comparison would not yield meaningful results due to the very low numbers that make up some subgroups of Vermont's population.

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

Over the FFY21 survey period (November 2021– June 2022) the state exceeded the CIS-EI Family Survey response target of 61% (set by the council in 2020). 64 % (463) of surveys were received by the state yielding 663 written comments (nearly two hundred more than the last survey period) from families and caregivers about their experience with CIS overall and/or their experience receiving services during the COVID-19 pandemic. In an analysis of these responses, families from all of Vermont's regions were represented, 11% of respondents identify as American Indian or Alaska Native, Asian or Pacific Islander, Black (non-Hispanic), Hispanic or Latinx, or two or more races combined, while 88.98 % of respondents identify as White.

Two of the two requested translated surveys were returned, and a variety of caregivers were reflected including mothers, fathers, adoptive parents, kinship guardians, foster parents, and grandparents, all of whom reported receiving services via a variety of formats (in person, hybrid, in childcare, etc.) These comments provide additional family input into how the CIS system can continue to improve. Families reported positive experiences around their child progressing, family outcomes, and relationships with staff. Families expressed challenges around service coordination, communication, and staff capacity. This family feedback supports the development of well-informed strategies to best meet the needs of Vermont families and children with disabilities and developmental delays.

Of the 463 respondents to the CIS-EI Family Survey, 102 indicated an interest in learning more about ways to get involved with providing input into the CIS and CIS Early Intervention system. Of the 102, 9 families responded to direct follow up from the Family Engagement Coordinator, learned more about the ways CIS and CIS early intervention partners with families in systems improvement work, and shared more about their personal experience receiving CIS Early Intervention services with the Family Engagement Coordinator. An additional 5 families were followed up with by the Family Engagement Coordinator as a result of comments left on their survey.

While the state saw an increase in families checking the box that they would like to learn more about getting involved, the state also saw a decrease in the number of families responding to follow up outreach. As a result, the Family Engagement Coordinator will continue to work with family advisors and the Administrative team to find the most effective ways to outreach to families.

#### **4 - Prior FFY Required Actions**

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

#### **Response to actions required in FFY 2020 SPP/APR**

#### **4 - OSEP Response**

#### **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.

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	1.10%

FFY	2016	2017	2018	2019	2020
Target >=	1.11%	1.11%	1.11%	1.11%	1.15%
Data	2.07%	2.07%	2.06%	2.35%	1.67%

### Targets

FFY	2021	2022	2023	2024	2025
Target >=	1.20%	1.20%	1.20%	1.20%	1.20%

### Targets: Description of Stakeholder Input

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with

additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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 State Systemic Improvement Plan 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. For example, as the State examined investments of the American Rescue Plan funds awarded to Early Intervention, the State hosted meetings with the VICC for their input, and then held three virtual focus group sessions open to all Early Intervention Program staff to gather input into their needs resulting from the pandemic.

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: Deaf, Hard of Hearing, DeafBlind Council; Autism Workgroup; Early Childhood Multi-Tiered System of Supports; Universal Screening; Building Bright Futures Council and workgroups; Vermont Early Learning Standards development and revisions; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

**Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	111
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	5,073

**FFY 2021 SPP/APR Data**

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
111	5,073	1.67%	1.20%	2.19%	Met target	No Slippage

Provide additional information about this indicator (optional)

**5 - Prior FFY Required Actions**

None

**5 - OSEP Response**

**5 - Required Actions**

## Indicator 6: Child Find (Birth to Three)

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs.

(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 ED*Facts* Metadata and Process System (EMAPS)) and Census (for the denominator).

#### Measurement

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

#### Instructions

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

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

## 6 - Indicator Data

Baseline Year	Baseline Data
2005	3.20%

FFY	2016	2017	2018	2019	2020
Target >=	3.80%	3.90%	3.90%	3.90%	4.20%
Data	5.23%	5.79%	6.12%	6.35%	5.49%

#### Targets

FFY	2021	2022	2023	2024	2025
Target >=	4.20%	4.20%	4.20%	4.20%	4.20%

#### Targets: Description of Stakeholder Input

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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 State Systemic Improvement Plan 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. For example, as the State examined investments of the American Rescue Plan funds awarded to Early Intervention, the State hosted meetings with the VICC for their input, and then held three virtual focus group sessions open to all Early Intervention Program staff to gather input into their needs resulting from the pandemic.

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: Deaf, Hard of Hearing, DeafBlind Council; Autism Workgroup; Early Childhood Multi-Tiered System of Supports; Universal Screening; Building Bright Futures Council and workgroups; Vermont Early Learning Standards development and revisions; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

**Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	1,025
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 3	16,374

**FFY 2021 SPP/APR Data**

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,025	16,374	5.49%	4.20%	6.26%	Met target	No Slippage

Provide additional information about this indicator (optional).

**6 - Prior FFY Required Actions**

None

**6 - OSEP Response**

**6 - Required Actions**

## Indicator 7: 45-Day Timeline

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 7 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	79.80%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	95.98%	95.10%	95.09%	92.86%	85.25%

### Targets

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

### FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
832	1,195	85.25%	100%	85.02%	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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Provide reasons for delay, if applicable.

An overwhelming majority of delays were due to provider staffing shortages (171 or 47.1%). Family delays were due to difficulty contacting families (47 or 12.9%), families requesting delays (36 or 9.9%), illness/hospitalization (21 or 5.8%) and illness/covid (13 or 3.6%) as well as families canceling or failing to show up for meetings (25 or 6.9%).

**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, 2021 through June 30, 2022

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

In calculating this indicator, the State conducted a desk audit of data on every child referred to early intervention from July 1, 2021 through June 30, 2022, who is found eligible for early intervention services. The State verified 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 the date of referral.

In cases where an initial One Plan meeting was not held within 45 days of the date of referral, the State gathered data on the reason for delay from the service coordinator of each case. If the reason was 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 2020**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
43	43		0

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

A desk audit of the State’s data system for all regional providers identified 36 Findings of non-compliance. The root cause of the non-compliance was the provider’s failure to indicate actual start dates, exit dates and documentation of services for these Findings. Vermont requested that each provider give actual start dates, exit dates and documentation of services for these Findings. The State reviewed all 36 Findings and verified that all actual start dates, exit dates and documentation of services had been provided. The State then reviewed updated data (a 30-day segment) to verify compliance. The State verified that all 12 providers had 100% compliance. However, the State discovered 7 additional Findings where 4 providers failed to indicate the actual start dates for services. Vermont requested the 4 providers indicate the actual start dates for the 7 Findings. The State verified that the start dates for the additional 7 Findings had been provided. Vermont pulled additional updated data (a 30-day segment) for the 4 providers and verified 100% compliance. Vermont verified that all 43 Findings of non-compliance were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State.

Vermont provided monthly technical assistance meetings with each provider with Findings of non-compliance to train staff around data reporting requirements, Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance, Vermont verified that all children received services unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention providers that had identified noncompliance in FFY 2020 are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008.

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

The State performed a desk audit of the State’s data system for all 12 regional Early Intervention programs where there were identified Findings of non-compliance. During this desk audit, the State verified that each of the 43 Findings of non-compliance had been corrected. In each instance, the service was either delivered late, or the child exited from the program. Vermont requested that each provider give actual start dates, exit dates and documentation of service for these Findings. The State reviewed all 43 Findings and verified that all information requested had been provided. Each individual child received services unless no longer in the jurisdiction of the program. Actual start dates were used to confirm that 34 Findings of delayed starts of service were provided to the children for which they were planned within one year of the formal Findings documented by the State. Exit dates confirmed that 9 children exited the program before services began and were therefore no longer in the jurisdiction of the program. The State reviewed updated data (a 30-day segment) to verify 100% compliance. Each individual child received services unless no longer in the jurisdiction of the program. The State verified that all 43 Findings were corrected at 100% and that each individual case on non-compliance was corrected at 100% unless the children were no longer in the jurisdiction of the program. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	26	26	0

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

A desk audit of the State’s data system for all 12 regional providers identified 24 Findings of non-compliance. The root cause of the non-compliance was the provider’s failure to indicate actual start dates, exit dates and documentation of services. Vermont requested that each provider give actual start dates, exit dates and documentation of services for these Findings. The State reviewed all 24 Findings and verified that all actual start dates, exit dates and documentation of services had been provided. The State then reviewed updated data (a 30-day segment) to verify compliance. The

State verified that all 12 providers had 100% compliance. However, the State discovered 2 additional Findings for 2 providers. These providers failed to indicate the actual start date for services. Vermont requested these providers indicate the actual start dates for these services. The State verified that the 2 Findings were corrected by ensuring the actual start date had been provided. Vermont pulled additional updated data (a 30-day segment) for the 2 providers and verified 100% compliance. Vermont verified that all 26 Findings of non-compliance were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State. Vermont provided monthly technical assistance meetings with each program with Findings of non-compliance to train staff around data reporting requirements. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that all children received services unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention programs that had identified non compliance in FFY 2019 are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008.

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

The State performed a desk audit of the State's data system for all 12 regional Early Intervention programs where there were identified Findings of non-compliance. During this desk audit, the State verified that each of the 26 Findings of non-compliance had been corrected. In each instance, the service was either delivered late, or the child exited from the program. Vermont requested that each provider give actual start dates, exit dates and documentation of services for these Findings. The State reviewed all 26 Findings and verified that all information requested had been provided. Each individual child received services unless no longer in the jurisdiction of the program. Actual start dates were used to confirm that 26 Findings of delayed starts of service were provided to the children for which they were planned within one year of the formal findings documented by the State. The State reviewed updated data (a 30-day segment) to verify 100% compliance. Each individual child received services for which they were planned unless they were no longer under the jurisdiction of the program. The State verified that all 26 Findings were corrected at 100% and that each individual case of non-compliance was corrected at 100% unless the children were no longer in the jurisdiction of the program.

## **7 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 26 uncorrected findings of noncompliance identified in FFY 2019 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2020 and each EIS program or provider with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2020 SPP/APR**

## **7 - OSEP Response**

### **7 - Required Actions**

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 43 uncorrected findings of noncompliance identified in FFY 2020 and 26 uncorrected findings of noncompliance identified in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2021 and each EIS program or provider with remaining noncompliance identified in FFY 2020 and FFY 2019: (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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

## Indicator 8A: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	92.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	91.24%	87.29%	89.03%	94.03%	84.91%



**Targets**

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

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
487	596	84.91%	100%	92.95%	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.

67

**Provide reasons for delay, if applicable.**

The majority of delays were due to family scheduling/vacation (35 or 32%). Also noted was family declined (3 or 3%), family no show/cancellation (6 or 6%), and family request (13 or 12%). Family illness was indicated in 6% (6) of the delays and difficulty contacting family represented 3% (3) of the delays.

Provider scheduling and availability accounted for 17% (18) of the delays, while new staff (1 or 1%) and staff misunderstanding the indicator (6 or 5%) represented some delays.

**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, 2021 - June 30, 2022

**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 Part C State Database, July 1, 2021 through June 30, 2022. 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 2020**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	10		0

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

A desk audit of the State's data system for all 12 regional providers identified 2 providers with a total of 10 Findings of non-compliance. The root cause of the non-compliance was the provider's failure to indicate exit dates for children leaving the program. Vermont requested that each provider give exit dates for these Findings. The State reviewed all 10 Findings and verified that all exit dates had been provided. The State then reviewed updated data (a 30-day segment) to verify compliance. The State verified that all 12 providers had 100% compliance. Vermont verified that all 10 Findings of non-compliance were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State.

Vermont provided monthly technical assistance meetings with each program with Findings of non-compliance to train staff around data reporting requirements. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that all children received services unless no longer in the jurisdiction of the program. Vermont has verified that all local Early Intervention programs that had identified non-compliance in FFY 2020 are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008

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

The State performed a desk audit of the State's data system for all 12 regional Early Intervention programs where there were identified Findings of non-compliance. During this desk audit, the State verified that each of the 10 Findings of noncompliance had been corrected. In each instance, the service was either delivered late or the child exited from the program. Vermont requested that each provider give exit dates for these Findings. The State

reviewed all 10 Findings and verified that all information requested had been provided. Each individual child received services unless no longer in the jurisdiction of the program. Exit dates were used to confirm that for the 10 Findings, the child had exited the program prior to the Transition Plan being developed, and therefore were no longer in the jurisdiction of the program. The State reviewed updated data (a 30-day segment) to verify 100% compliance. Each individual child received services unless no longer in the jurisdiction of the program. The State verified that all 10 Findings were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State unless they were no longer in the jurisdiction of the program.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	16	16	0

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

A desk audit of the State’s data system for all 12 regional providers identified 16 Findings of non-compliance. The root cause of the non-compliance was the provider’s failure to indicate exit dates. Vermont requested that each provider give exit dates for these Findings. The State reviewed all 16 Findings and verified that all exit dates had been provided. The State then reviewed updated data (a 30-day segment) to verify compliance. The State verified that all 12 providers had 100% compliance. Vermont verified that all 16 Findings of non-compliance were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State. Vermont provided monthly technical assistance meetings with each program with findings on non-compliance to train staff around data reporting requirements. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that all children received services unless no longer in the jurisdiction of the program. Vermont verified that all 12 local Early Intervention providers that had identified non-compliance in FFY 2019 are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008.

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

The State performed a desk audit of the States data system for all 12 regional Early Intervention providers where there were identified Findings on non-compliance. During this desk audit, the State verified that each of the 16 Findings of non-compliance had been corrected. In each instance, the service was either delivered late or the child exited from the program. Vermont requested that each provider give exit dates for these Findings. That State reviewed all 16 Findings and verified that all information requested had been provided. Each individual child received services unless no longer in the jurisdiction of the program. Exit dates were used to confirm that 2 instances were compliant once dates were provided for transitions and 5 Findings of delayed transition plans were provided to the children for which they were planned before their exit date. In 9 instances, the children exited the program prior to a Transition Plan being developed, and therefore were no longer in the jurisdiction of the program. The State reviewed updated data (a 30-day segment) to verify 100% compliance. Each individual child received services unless no longer in the jurisdiction of the program. The State verified that all 16 Findings were corrected at 100% and that each individual case of non-compliance was corrected at 100% unless the children were no longer in the jurisdiction of the program. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State.

**8A - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 16 uncorrected findings of noncompliance identified in FFY 2019 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2020 and each EIS program or provider with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2020 SPP/APR**

**8A - OSEP Response**

**8A - Required Actions**

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 10 uncorrected findings of noncompliance identified in FFY 2020 and the remaining 16 uncorrected findings of noncompliance identified in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2021 and each EIS program or provider with remaining noncompliance identified in FFY 2020 and FFY 2019: (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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

## Indicator 8B: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	79.50%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	90.58%	84.80%	86.10%	89.71%	91.73%

**Targets**

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

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
487	527	91.73%	100%	94.38%	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.

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**Provide reasons for delay, if applicable.**

Providers note that 28% (9) of delays in notification to the LEA are due to misunderstanding the indicator. The State will provide intensive technical assistance around this throughout the next fiscal year and on going as needed. Data counter mistakes (a tool to track compliance) accounted for 38% (15) of delays, which will also be addressed in technical assistance and training. Staffing challenges resulted in 10% (4) of the delays.

**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 notification 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).**

July 1, 2021 through June 30, 2022

**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 Part C State Database, July 1, 2021 through June 30, 2022. 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 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**8B - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2020 SPP/APR**

A formal desk audit of the State's data system for all 12 regional providers identified 0 Findings of non-compliance. The State then pulled additional data (a 30-day segment) for all 12 regional providers to verify compliance. The State verified that all 12 providers had 100% compliance. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that each individual child received services for which they were entitled unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention programs are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008. Prior to conducting a formal desk audit, as per OSEP approved monitoring procedure, the State reviewed all data in the State's database for all 12 regional providers to identify any data anomalies or missing data related to each indicator and sent informal inquiries to the regions where these were noted. This informal review served to provide an opportunity for regional programs to verify the accuracy of the data or provide clarification before the States formal Findings or Determinations.

**8B - OSEP Response**

**8B - Required Actions**

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 34 uncorrected instances of noncompliance identified in FFY 2020 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2021 and each EIS program or provider with remaining noncompliance identified in FFY 2020: (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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

## Indicator 8C: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8C - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	83.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	87.94%	89.80%	89.71%	91.91%	90.51%

**Targets**

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

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
414	527	90.51%	100%	93.32%	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.

3

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.

75

Provide reasons for delay, if applicable.

The greatest number of delays were due to family scheduling/vacation (30 or 27%). Also noted were families requesting delay (19 or 17%), family declining meeting (3 or 3%) and families cancelling meetings (11 or 10%). Family illness caused 8% (7) of delays and unable to contact families created 2% (6) of the delays.

Provider delays included misunderstood indicator (7 or 6%), provider date counter error (4 or 4%) and provider availability (11 or 10%). Lastly, 2% (2) of the delays were due to LEA issues.

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, 2021 through June 30, 2022

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 Part C State Database, July 1, 2021 through June 30, 2022. 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).

The State reviews all data entered between July 1 and August 30 to identify any findings of non compliance. Based on this data, the State found 0 instances of non compliance around timeliness of transition conference for toddlers potentially eligible for Part B services.

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	7	7	0



Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

A desk audit of the State's data system for all 12 regional providers identified 5 Findings of non-compliance. The root cause of the non-compliance was the provider's failure to indicate actual exit dates and transition conference dates. Vermont requested that each provider give actual exit dates and transition conference dates for these Findings. The State reviewed all 5 Findings and verified that all exit dates and transition conference dates had been provided. The State then reviewed updated data (a 30-day segment) to verify compliance. The State verified that all 12 providers had 100% compliance. However, the State discovered 2 additional Findings for 2 providers. These providers failed to indicate the exit date for services. Vermont requested these providers indicate the exit dates for these services. The State verified that the 2 Findings were corrected by ensuring the exit dates had been provided. Vermont pulled additional updated data (a 30-day segment) for the 2 providers and verified 100% compliance. Vermont verified that all 7 Findings of non-compliance were corrected at 100%. Vermont verified that all services were provided to the children for which they were planned within one year of the formal Findings documented by the State.

Vermont provided monthly technical assistance meetings with each program with Findings of non-compliance to train staff around data reporting requirements. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that all children received services unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention programs that had identified non-compliance in FFY 2019 are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008.

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

The State performed a desk audit of the State's data system for all 12 regional Early Intervention programs where there were identified Findings of non-compliance. During this desk audit, the State verified that each of the 7 Findings of non-compliance had been corrected. In each instance, the service was either delivered late, or the child exited from the program. Vermont requested that each provider give exit dates and transition conference dates for these Findings. The State reviewed all 7 Findings and verified that all information requested had been provided.

Each individual child received services unless no longer in the jurisdiction of the program. Exit dates and transition conference dates were used to confirm that 7 Findings of delayed starts of service were provided to the children for which they were planned within one year of the formal findings documented by the State. The State reviewed updated data (a 30-day segment) to verify 100% compliance. Each individual child received services for which they were planned unless they were no longer under the jurisdiction of the program. The State verified that all 7 Findings were corrected at 100% and that each individual case of non-compliance was corrected at 100% unless the children were no longer in the jurisdiction of the program.

**8C - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining seven (7) uncorrected findings of noncompliance identified in FFY 2019 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2020 and each EIS program or provider with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2020 SPP/APR**

A formal desk audit of the State's data system for all 12 regional providers identified 0 Findings of non-compliance. The State then pulled additional data (a 30-day segment) for all 12 regional providers to verify compliance. The State verified that all 12 providers had 100% compliance. Vermont reviewed policies and procedures for all 12 providers and found that none needed to be updated as they were in 100% compliance. Vermont verified that each individual child received services for which they were entitled unless no longer in the jurisdiction of the program. Vermont has verified that all 12 local Early Intervention programs are correctly implementing regulatory requirements consistent with OSEP Memorandum 09-02 dated October 17, 2008. Prior to conducting a formal desk audit, as per OSEP approved monitoring procedure, the State reviewed all data in the State's database for all 12 regional providers to identify any data anomalies or missing data related to each indicator and sent informal inquiries to the regions where these were noted. This informal review served to provide an opportunity for regional programs to verify the accuracy of the data or provide clarification before the States formal Findings or Determinations. Vermont pulled updated data to verify all dates had been received and all

**8C - OSEP Response**

**8C - Required Actions**

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 7 uncorrected findings of noncompliance identified in FFY 2020 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2021 and each EIS program or provider with remaining noncompliance identified in FFY 2020: (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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

## Indicator 9: Resolution Sessions

### Instructions and Measurement

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

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

#### Data Source

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the 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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	0

### Targets: Description of Stakeholder Input

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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 State Systemic Improvement Plan 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. For example, as the State examined investments of the American Rescue Plan funds awarded to Early Intervention, the State hosted meetings with the VICC for their input, and then held three virtual focus group sessions open to all Early Intervention Program staff to gather input into their needs resulting from the pandemic.

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: Deaf, Hard of Hearing, DeafBlind Council; Autism Workgroup; Early Childhood Multi-Tiered System of Supports; Universal Screening; Building Bright Futures Council and workgroups; Vermont Early Learning Standards development and revisions; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

**Historical Data**

Baseline Year	Baseline Data

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

**Targets**

FFY	2021	2022	2023	2024	2025
Target>=					

**FFY 2021 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target	FFY 2021 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 2021. 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 ED*Facts* Metadata and Process System (EMAPS)).

#### Measurement

Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

#### Instructions

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

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

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

The consensus among mediation practitioners is that 75-85% is a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data. States may express their targets in a range (e.g., 75-85%).

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

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

## 10 - Indicator Data

### Select yes to use target ranges

Target Range not used

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

NO

### Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	0

### Targets: Description of Stakeholder Input

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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 State Systemic Improvement Plan 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. For example, as the State examined investments of the American Rescue Plan funds awarded to Early Intervention, the State hosted meetings with the VICC for their input, and then held three virtual focus group sessions open to all Early Intervention Program staff to gather input into their needs resulting from the pandemic.

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: Deaf, Hard of Hearing, DeafBlind Council; Autism Workgroup; Early Childhood Multi-Tiered System of Supports; Universal Screening; Building Bright Futures Council and workgroups; Vermont Early Learning Standards development and revisions; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

#### Historical Data

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data		0.00%			

#### Targets

FFY	2021	2022	2023	2024	2025
Target>=					

#### FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

#### 10 - Prior FFY Required Actions

None

#### 10 - OSEP Response

#### 10 - Required Actions

# Indicator 11: State Systemic Improvement Plan

## Instructions and Measurement

**Monitoring Priority:** General Supervision

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

### Measurement

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

### Instructions

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

**Targets:** In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

**Updated Data:** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

### Overview of the Three Phases of the SSIP

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

#### Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

### Specific Content of Each Phase of the SSIP

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

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

#### Phase III: Implementation and Evaluation

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

##### A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

##### B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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

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

**C. Stakeholder Engagement**

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

**Additional Implementation Activities**

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

**11 - Indicator Data**

**Section A: Data Analysis**

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

Families are able to help their infants and toddlers develop functional social and emotional skills (Indicator 4C), so that Infants and toddlers substantially improve their functional social and emotional development (Indicator 3A Summary Statement 1).

**Has the SiMR changed since the last SSIP submission? (yes/no)**

NO

**Is the State using a subset of the population from the indicator (e.g., a sample, cohort model)? (yes/no)**

NO

**Is the State’s theory of action new or revised since the previous submission? (yes/no)**

NO

**Please provide a link to the current theory of action.**

<https://dcf.vermont.gov/cdd/reports/ei> On this page, under State Systemic Improvement Plan, click the link for “Plans from 2015-2021”

**Progress toward the SiMR**

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages).**

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

Baseline Year	Baseline Data
2013	52.10%

**Targets**

FFY	2021	2022	2023	2024	2025
Target>=	64.00%	64.00%	64.00%	64.00%	64.00%

**FFY 2021 SPP/APR Data**

Number of Infants and Toddlers Who Substantially Improved Their Social and Emotional Development	Numbers of Children Exiting in the Reporting Period Who Received at Least Six Months of Services and Had an Entry and Exit COS Rating	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
396	511	75.96%	64.00%	77.50%	Met target	No Slippage

**Provide the data source for the FFY 2021 data.**

Data were collected from a desk audit of the State’s database for all children who exited between July 1, 2021, and June 30, 2022.

**Please describe how data are collected and analyzed for the SiMR.**

Vermont’s SiMR and attendant theory of action is the cornerstone of our continuous quality improvement activities. The State, in a meeting co-facilitated annually by the Vermont Interagency Coordinating Council (VICC), with participation from every CIS Early Intervention Program and many key stakeholders, examines the state’s performance on federal Indicator 3A Summary Statement 1, to determine the percentage of infants and toddlers who substantially improve their social and emotional development. In addition, this group reviews the state’s performance on federal indicator 4C, to determine the percentage of families who report that the Early Intervention Program has helped them to help their child develop and learn.



These data are aggregated at a regional and state level. In addition, these data include data on race and ethnicity. The State, VICC, and Early Intervention Program providers and stakeholders review the performance of each region as well as the state. The VICC and State Lead Agency staff facilitate discussions with participants into root causes behind the regional and state performance on these indicators, contributing factors, and barriers to progress. The SSIP strategies and activities are discussed, as well as regional activities associated with their annual Continuous Quality Improvement Plans (QIPS). During this meeting the State and regions update their QIPS, identifying activities that need to continue to be implemented, due to the results there are showing, or the inability to fully execute the activity, as well as new strategies and activities that need to be pursued.

The analysis for the FFY 2021 data included the following:

State level data demonstrated a small improvement (1.71%) in child outcomes (Indicator 3A Summary Statement 1). Ten out of twelve regions exceeded the state target for this indicator. Two regions did not. Of these two, one region did show significant improvement over FFY 2020. The other region experienced a slight decrease in this outcome. These two regions represented the smallest regions in the state. Overall, the VICC and regional providers determined that improvement efforts over the past year were noteworthy.

The VICC and regional providers also examined the impact of race and ethnicity on children's outcomes. This data showed a relative equality across race and ethnicity for children likely to achieve substantial improvement in their social and emotional skills. Asian, White and those children of two or more races were within three percentage points with Hispanic children scoring higher and Black/African American children scoring lower. American Indian/Native Alaskan scored significantly lower (50%), however only two children made up the group so the score is not indicative of any impact to that group.

Throughout 2021 the State received technical assistance from The Center for IDEA Early childhood Data Systems (DaSy) to better understand how to analyze and represent these data for future root cause analysis. These sessions helped Vermont look at data related to:

- children's diagnosed conditions and involvement with child protection to determine the impact those factors have on children's outcomes.
- referral data to determine the representativeness of race and ethnicity over the past several years in the overall referrals. These data will inform our need for more or different outreach to these populations.
- reason for exit to determine if race and ethnicity are equitably represented in the reasons for exits. These data will inform our need for improvement efforts to better engage families and/or the services delivered to children of different races and ethnicities to ensure they are equitably represented in the numbers that exit at developmentally appropriate levels.

The conclusion drawn throughout this technical assistance, is that Vermont's different ethnic groupings are insufficient in number to produce data that can be reliably used to make program decisions. Our method will be to create a rolling average over several years to increase group numbers and show a better picture of Vermont's race and ethnicity make up and any impacts there may be on child outcomes. It is our hope, that with continued efforts in family outreach, that these numbers will guide program improvement efforts.

**Optional: Has the State collected additional data (i.e., benchmark, CQI, survey) that demonstrates progress toward the SiMR? (yes/no)**

YES

**Describe any additional data collected by the State to assess progress toward the SiMR.**

In addition to tracking and reporting data on Indicator 3A Summary Statement 1 (above), Vermont also tracks data from the family survey, Indicator 4C: the percentage of families who report that Early Intervention helped them help their child develop and learn. These data are important to Vermont since, in our SiMR, we recognize that parents are their child's first and best teacher. Therefore, a significant focus in our SSIP is to implement strategies to help families learn ways that they can support their child's healthy social and emotional development. Vermont had seen a substantial improvement in this area since 2015, when only 84.2% of families reported that they felt early intervention helped them to help their child develop and learn. In FFY 2019, 90.84% of families reported they felt early intervention had helped them. However, it is concerning to note that in FFY 2020, only 82.69% of families reported feeling they had been helped in this way. Quantitative data from the FFY 2020 Family Survey and determined that COVID had a significant impact on families' perceptions. Many families struggled with not being able to meet in-person to have providers model the strategies for supporting their children's development. As a result of this feedback, the State offered training to providers in FFY 2021, as part of the CSPD work, on effective methods for coaching via telehealth.

Family survey reports for FFY 2021 showed an increase in satisfaction regarding service delivery modalities as a result of this training. FFY 2021 data for Indicator 4 C: the percentage of families who report that Early Intervention helped them help their child develop and learn shows an increase to 88.94%.

Other noteworthy data included representativeness of all ethnic groups becoming more evenly distributed across Family survey responses. FFY 2020 concerns around this prompted more awareness and concerted efforts to engage all families in survey response. Several regions adopted goals within their Quality Improvement Plans to increase response and representativeness rates which had a positive impact on this data.

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

NO

**Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)**

NO

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

**Please provide a link to the State's current evaluation plan.**

Vermont's evaluation plan can be reviewed here: <https://outside.vermont.gov/dept/DCF/Shared%20Documents/CDD/CIS/SSIP/SSIP-Eval-Plan.pdf>

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

NO

**Provide a summary of each infrastructure improvement strategy implemented in the reporting period.**

Prior year infrastructure improvement included re envisioning and hiring two key members of the Early Intervention team, a Family Engagement coordinator and a Personnel Development Coordinator. These two positions were integral in moving the State Systemic Improvement Plan forward throughout the 2021 reporting period.

The Personnel Development Coordinator continued training of ASQ-SE and regionally requested trainings around Child Outcomes, and began stakeholder meetings around ARPA funding of statewide Touchpoints training.

The Family Engagement Coordinator continued efforts around family outreach and efforts to increase communication around family survey response rate, increased and diversified ICC membership and facilitated stakeholder groups regarding use of ARPA funding for family engagement initiatives.

**Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.**

Data and Accountability to Improve the System:

Fostering Family Connections strategic activities -

Over the FFY21 survey period (November 2021– June 2022) the state exceeded the CIS-EI Family Survey response target of 61% (set by the council in 2020). 64 % (463) of surveys were received by the state yielding 663 written comments (nearly two hundred more than the last survey period) from families and caregivers about their experience with CIS overall and/or their experience receiving services during the COVID-19 pandemic. In an analysis of these responses, families from all of Vermont's regions were represented, 11% of respondents identify as American Indian or Alaska Native, Asian or Pacific Islander, Black (non-Hispanic), Hispanic or Latinx, or two or more races.

Two of the two requested translated surveys were returned, and a variety of caregivers were reflected including mothers, fathers, adoptive parents, kinship guardians, foster parents, and grandparents, all of whom reported receiving services via a variety of formats (in person, hybrid, in childcare, etc.) These comments provide additional family input into how the CIS system can continue to improve. Families reported positive experiences around their child progressing, family outcomes, and relationships with staff. Families expressed Challenges around Service Coordination, Communication, and Staff Capacity. This family feedback supports the development of well informed strategies to best meet the needs of Vermont families and children with disabilities and developmental delays.

Of the 463 respondents to the CIS-EI Family Survey, one hundred and two (102) indicated an interest in learning more about ways to get involved with providing input into the CIS and CIS Early Intervention system. Of the 102, nine (9) families responded to direct follow up from the Family Engagement Coordinator, learned more about the ways CIS and CIS early intervention partners with families in systems improvement work, and shared more about their personal experience receiving CIS Early Intervention services with the Family Engagement Coordinator. An additional five (5) families were followed up with by the Family Engagement Coordinator as a result of comments left on their survey.

While the state saw an increase in families checking the box that they would like to learn more about getting involved, the state also saw a decrease in the number of families responding to follow up outreach. As a result, the Family Engagement Coordinator will continue to work with family advisors and the Administrative team to find the most effective ways to outreach to families.

Sustainability and Scaling Up:

Fostering Family Connections strategic activities -

Over FFY21, the Vermont Interagency Coordinating Council continued to support its five family representatives as they fulfilled their council appointments. Support included regular individual check ins from the Family Engagement Coordinator before and after meetings, as well as family advisor specific group time to offer support, further discuss council agenda items, and to bring forward family advisor topics for full council discussion. Family representatives generated a list of topics that were resonating for them. Over a series of council meetings, family representatives, through sharing about their lived experiences receiving CIS services, supported the council in exploring more fully how to advise and assist around these topic areas. Discussions have helped to further define council processes, priority areas, and facilitated the expansion of council membership

In addition to families leading the Vermont Interagency Coordinating Council in the aforementioned way, family representatives were active members of two council workgroups that stewarded stakeholder engagement around the use of federal Part C ARPA funding. Family representatives not only provided their own direct input but also worked alongside the Administrative team to review, interpret, and further develop ideas into specific projects being rolled out over the next fiscal year. Furthermore, family representatives have been selected to serve on review committees that will score proposals and ultimately select successful bidders on the advertised projects.

Outside of advising on the use of ARPA funding, the VICC Family Engagement Workgroup, a subset of the full council which includes family representatives and providers from Early Intervention teams, as well as staff members from Vermont's Parent Training and Information Center, Vermont Family Network, also provided guidance around updating the Children's Integrated Services Informational Rack Card, the CIS-EI Family Survey letter, supported the CIS System in more clearly outlining the CIS Fostering Family Connections Family Engagement, Partnership, Leadership Continuum, developing an "Advise and Assist" One Pager outlining the role of the Vermont Interagency Coordinating Council, a VICC Membership Document that helped support council members in getting to know one another more, and contributed to the revision of the Facilitation Guide used in the Annual Data and Determinations, Continuous Quality Improvement Planning meeting.

All five family representatives from the council facilitated regional breakout discussions in Vermont's Data, Determinations, and Continuous Quality Improvement Planning meeting. This is Vermont's CIS-EI annual meeting to deliver determinations to regional CIS-EI teams and guide the revision of regional Quality Improvement Plans. With all five family leaders serving in this capacity, it meant that nearly half of the regional teams were lead by a family representative as they interpreted their data and identified areas for improvement.

These contributions from Family Representatives not only lead to meaningful change within the Children's Integrated Services system, but also lead to VICC Family Representatives getting connected to other advising and assisting opportunities. The Family Engagement Coordinator works to ensure that families are continuing to develop their leadership skills and are provided access to additional ways to advise on Vermont's Early Childhood programs.

Professional development:

The State held several stakeholder meetings for determining best use of ARPA funds. Our proposal to bring the Touchpoints training across the state was favorably supported. We would pair this with expanded use of the ASQ-SE and associated activity book among CIS-EI providers.

Providers are already trained in this screening, but we haven't provided any training into use of the ASQ-SE screener to identify outcomes with the family paired with the activity book to teach strategies to address the outcomes. Touchpoints is an approach to coaching that, when paired with a screening, has a higher likelihood in identified social and emotional outcomes. Providers will have the skills to then coach families using the activity book to support strategies families can use to help their child substantially improve their social and emotional development.

This is a pairing of two of the Targeted Approaches studied to help families identify social and emotional outcomes and receive effective coaching to achieve those outcomes. Preparation for a contract with the Brazelton Touchpoints Institute was begun and we hope to begin statewide trainings in FY 2022.

The State held several regional training sessions with providers regarding Child Outcome Summary data. Particular attention was given to data collection and reporting to increase consistency of accurate rating, increasing provider understanding of COS and increase family participation in the COS rating scales.

**Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)**

NO

**Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.**

Vermont will create a contract to be presented to the Brazelton Touchpoints Institute for delivering statewide training to the CIS providers. The State CIS team will partner with the Vermont Agency of Education to present our application for the SPDG and, when awarded, create a Request for Proposal for an instructor in Early MTSS to begin statewide training of the Early Intervention providers to align with Vermont's Part B practices.

The State will create a Request For Proposal to identify a contractor who shall co-design with the CIS State Team and execute a plan to identify family engagement approaches, practices, and activities in each of the 11 CIS regions; provide family engagement consultation services to each of the regions; and develop a comprehensive report, including recommendations to the CIS State team, to unify and strengthen family engagement across the state-wide CIS system in Vermont.

**List the selected evidence-based practices implemented in the reporting period:**

Increased provider data literacy regarding Child Outcomes Summary  
Fostering Family connections to reach under served populations  
ASQ-SE screening tool training

**Provide a summary of each evidence-based practice.**

The Child Outcomes Summary (COS) provides information on a child's functioning in three outcome areas. Performing COS assessments at both entry to the program and exit from the program provides valuable data regarding effectiveness of services (SiMR Indicator 3C Summary Statement 1) Fostering Family connections includes increased efforts to give each family served by Part C the avenue to share their experiences. Outreach efforts to historically under served populations increased demographic representativeness and produced more credible data for Family Survey response tabulation. (SiMR indicator 4C)

The ASQ-SE screening tool identifies infants and toddlers whose social and emotional development may require further evaluation for determination of Early Intervention services. This screening tool engages caregivers in the process of evaluation

**Provide a summary of how each evidence-based practices and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child/outcomes.**

Focus on increasing providers' understanding of the COS process and ratings will increase consistency and accuracy across State data and increase family participation in the COS rating process. Attention paid to fostering family connections will allow for increased survey response rates, lowered non response bias and more robust data for program improvement initiatives. The ASQ-SE screening tool will give more information for service providers to ensure each child gets the best opportunity to increase social and emotional development. More family input to the screening will give a well rounded picture of the child's strengths and challenges.

**Describe the data collected to monitor fidelity of implementation and to assess practice change.**

Data were collected from a desk audit of the State's database for all children who exited between July 1, 2021, and June 30, 2022. These data are aggregated at a regional and state level. In addition, these data include data on race and ethnicity. The State, VICC, and Early Intervention Program providers and stakeholders review the performance of each region as well as the state. The VICC and State Lead Agency staff facilitate discussions with participants into root causes behind the regional and state performance on these indicators, contributing factors, and barriers to progress. The SSIP strategies and activities are discussed, as well as regional activities associated with their annual Continuous Quality Improvement Plans (QIPS). During this meeting the State and regions update their QIPS, identifying activities that need to continue to be implemented, due to the results there are showing, or the inability to fully execute the activity, as well as new strategies and activities that need to be pursued.

State level data demonstrated a small improvement (1.71%) in child outcomes (Indicator 3A Summary Statement 1). Ten out of twelve regions exceeded the state target for this indicator. Two regions did not. Of these two, one region did show significant improvement over FFY 2020. The other region experienced a slight decrease in this outcome. These two regions represented the smallest regions in the state. Overall, the VICC and regional providers determined that improvement efforts over the past year were noteworthy.

The VICC and regional providers also examined the impact of race and ethnicity on children's outcomes. This data showed a relative equality across race and ethnicity for children likely to achieve substantial improvement in their social and emotional skills. Asian, White and those children of two or more races were within three percentage points with Hispanic children scoring higher and Black/African American children scoring lower. American Indian/Native Alaskan scored significantly lower (50%), however only two children made up the group so the score is not indicative of any impact to that group.

Throughout 2021 the State received technical assistance from The Center for IDEA Early childhood Data Systems (DaSy) to better understand how to analyze and represent these data for future root cause analysis. These sessions helped Vermont look at data related to:

- children's diagnosed conditions and involvement with child protection to determine the impact those factors have on children's outcomes.
- referral data to determine the representativeness of race and ethnicity over the past several years in the overall referrals. These data will inform our need for more or different outreach to these populations.
- reason for exit to determine if race and ethnicity are equitably represented in the reasons for exits. These data will inform our need for improvement efforts to better engage families and/or the services delivered to children of different races and ethnicities to ensure they are equitably represented in the numbers that exit at developmentally appropriate levels.

The conclusion drawn throughout this technical assistance, is that Vermont's different ethnic groupings are insufficient in number to produce data that can be reliably used to make program decisions. Our method will be to create a rolling average over several years to increase group numbers and show a better picture of Vermont's race and ethnicity make up and any impacts there may be on child outcomes. It is our hope, that with continued efforts in family outreach, that these numbers will guide program improvement efforts.

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

**Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.**

During the next reporting period, Vermont will continue to provide technical assistance to each region around COS data to build data literacy and reinforce the importance of consistent and accurate COS rating. The State will begin to implement Touchpoints trainings across regions to be paired with the ASQ-SE. Additionally, ongoing efforts to foster family engagement, specifically among those ethnic groups that are ethnically, racially and linguistically diverse will be implemented in each district through projects that are developed by each region according to its individual needs. These efforts are all geared toward the SiMR to ensure that families are able to help their infants and toddlers develop functional social and emotional skills (Indicator 4C), and that Infants and toddlers substantially improve their functional social and emotional development (Indicator 3A Summary Statement 1).

**Does the State intend to continue implementing the SSIP without modifications? (yes/no)**

YES

**If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.**

State level data demonstrated a small improvement (1.71%) in child outcomes (Indicator 3A Summary Statement 1). Ten out of twelve regions exceeded the state target for this indicator. Two regions did not. Of these two, one region did show significant improvement over FFY 2020. The other region experienced a slight decrease in this outcome. These two regions represented the smallest regions in the state. Overall, the VICC and regional providers determined that improvement efforts over the past year were noteworthy. Family survey reports for FFY 2021 showed an increase in satisfaction regarding service delivery modalities as a result of this training. FFY 2021 data for Indicator 4 C: the percentage of families who report that Early Intervention helped them help their child develop and learn shows an increase to 88.94%.

Other noteworthy data included representativeness of all ethnic groups becoming more evenly distributed across Family survey responses. FFY 2020 concerns around this prompted more awareness and concerted efforts to engage all families in survey response. Several regions adopted goals within their Quality Improvement Plans to increase response and representativeness rates which had a positive impact on this data.

These steady improvements support the decision to implement continued focus on these areas without any modifications to the SSIP.

**Section C: Stakeholder Engagement**

**Description of Stakeholder Input**

The State Children's Integrated Services (CIS) Early Intervention program provides the Vermont Interagency Coordinating Council (VICC) with copies of the State Performance Plan and Annual Performance Report (APR) 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 held at the end of each calendar year. This meeting includes representation from each of the State's eleven 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. 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 the Office of Special Education Programs (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.

At this meeting, and afterwards, CIS Early Intervention host agencies complete and submit a Continuous Quality Improvement Plan 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.

The Vermont Interagency Coordinating Council (VICC) advises and assists all of 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. VICC workgroups meet as needed and focus on advising and assisting the State Systemic Improvement Plan Evidence-based Practices and Fostering Family Connections activities.

The State CIS Early Intervention program has a Family Engagement Coordinator position focused on recruitment and retention of members (especially parents) of the VICC. As a result of this work, the VICC now has met its target of having 20% of the Council comprised of families. The Family Engagement Coordinator and VICC also focus on 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 VICC website (<https://dcf.vermont.gov/contacts/boards/VICC>). Further, with additional financial resources through the American Rescue Plan Act funding, the VICC will be implementing targeted activities, which align with Vermont's State Systemic Improvement Plan Fostering Family Connections activities, which will be discussed in more detail in the Indicator 11 Section of this report.

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. In coordination with BBF, the Family Engagement Coordinator has begun identifying and meeting with cultural brokers to understand how to better serve the needs of families from historically marginalized or underserved populations.

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 State Systemic Improvement Plan 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. For example, as the State examined investments of the American Rescue Plan funds awarded to Early Intervention, the State hosted meetings with the VICC for their input, and then held three virtual focus group sessions open to all Early Intervention Program staff to gather input into their needs resulting from the pandemic.

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: Deaf, Hard of Hearing, DeafBlind Council; Autism Workgroup; Early Childhood Multi-Tiered System of Supports; Universal Screening; Building Bright Futures Council and workgroups; Vermont Early Learning Standards development and revisions; Home Visiting Alliance; and the Vermont Higher Education Collaborative.

**Describe the specific strategies implemented to engage stakeholders in key improvement efforts.**

Over FFY21, the Vermont Interagency Coordinating Council continued to support its five family representatives as they fulfilled their council appointments. Support included regular individual check ins from the Family Engagement Coordinator before and after meetings, as well as family advisor specific group time to offer support, further discuss council agenda items, and to bring forward family advisor topics for full council discussion. Family representatives generated a list of topics that were resonating for them. Over a series of council meetings, family representatives, through sharing about their lived experiences receiving CIS services, supported the council in exploring more fully how to advise and assist around these topic areas. Discussions have helped to further define council processes, priority areas, and facilitated the expansion of council membership. In addition to families leading the Vermont Interagency Coordinating Council in the aforementioned way, family representatives were active members of two council workgroups that stewarded stakeholder engagement around the use of federal Part C ARPA funding. Family representatives not only provided their own direct input but also worked alongside the Administrative team to review, interpret, and further develop ideas into specific projects being rolled out over the next fiscal year. Furthermore, family representatives have been selected to serve on review committees that will score proposals and ultimately select successful bidders on the advertised projects. Outside of advising on the use of ARPA funding, the VICC Family Engagement Workgroup, a subset of the full council which includes family representatives and providers from Early Intervention teams, as well as staff members from Vermont's Parent Training and Information Center, Vermont Family Network, also provided guidance around updating the Children's Integrated Services Informational Rack Card, the CIS-EI Family Survey letter, supported the CIS System in more clearly outlining the CIS Fostering Family Connections Family Engagement, Partnership, Leadership Continuum, developing an "Advise and Assist" One Pager outlining the role of the Vermont Interagency Coordinating Council, a VICC Membership Document that helped support council members in getting to know one another more, and contributed to the revision of the Facilitation Guide used in the Annual Data and Determinations, Continuous Quality Improvement Planning meeting. All five family representatives from the council facilitated regional breakout discussions in Vermont's Data, Determinations, and Continuous Quality Improvement Planning meeting. This is Vermont's CIS-EI annual meeting to deliver determinations to regional CIS-EI teams and guide the revision of regional Quality Improvement Plans. With all five family leaders serving in this capacity, it meant that nearly half of the regional teams were lead by a family representative as they interpreted their data and identified areas for improvement. These contributions from Family Representatives not only lead to meaningful change within the Children's Integrated Services system, but also lead to VICC Family Representatives getting connected to other advising and assisting opportunities. The Family Engagement Coordinator works to ensure that families are continuing to develop their leadership skills and are provided access to additional ways to advise on Vermont's Early Childhood programs. The State Part C Administrator hosts monthly meetings with the regional early intervention programs to discuss issues affecting the field or service delivery (such as staffing challenges), provide guidance around emerging or ongoing (such as adherence to policies) issues, share program performance data, and review progress on regional Continuous Quality Improvement Plans. Regional early intervention program providers also participate on the Vermont Interagency Coordinating Council and various workgroups to provide input and feedback on current issues facing the field or planned improvement activities related to professional development and service delivery to enrolled children and their families.

The Vermont Interagency Coordinating Council meets virtually each month either for workgroup activities or full Council business associated with the State's Systemic Improvement Plan, reviewing family engagement materials (such as the family survey), and identifying improvement strategies (such as planning future professional development opportunities). The Vermont Interagency Coordinating Council's advice and input is sought around continuous improvement activities, such as how to improve response rates to the family survey, especially among historically marginalized or underrepresented populations, or address staff shortages across the state.

The Family Engagement Coordinator reaches out, as needed, to engage families who are not members of the Council, but who have expressed an interest and desire to provide input into improvement activities. Families give input into outreach and informational materials being developed for families to ensure that the language is understandable and engaging for families.

**Were there any concerns expressed by stakeholders during engagement activities? (yes/no)**  
NO

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

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

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

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

**11 - Prior FFY Required Actions**

None

**11 - OSEP Response**

**11 - Required Actions**

## **Certification**

### **Instructions**

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

### **Certify**

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

### **Select the certifier's role**

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:**

Leslie Davis, MSEL

#### **Title:**

Part C Administrator

#### **Email:**

leslie.davis@vermont.gov

#### **Phone:**

802 585-9652

#### **Submitted on:**

04/21/23 3:33:56 PM

## Determination Enclosures

### RDA Matrix

# 2023 Part C Results-Driven Accountability Matrix

#### Results-Driven Accountability Percentage and Determination<sup>1</sup>

Percentage (%)	Determination
73.21%	Needs Assistance

#### Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
<b>Results</b>	8	6	75.00%
<b>Compliance</b>	14	10	71.43%

#### 2023 Part C Results Matrix

##### I. Data Quality

###### (a) Data Completeness: The percent of children included in your State's 2021 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e., outcome data)	737
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	942
Percentage of Children Exiting who are Included in Outcome Data (%)	78.24
<b>Data Completeness Score<sup>2</sup></b>	2

###### (b) Data Anomalies: Anomalies in your State's FFY 2021 Outcomes Data

<b>Data Anomalies Score<sup>3</sup></b>	2
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##### II. Child Performance

###### (a) Data Comparison: Comparing your State's 2021 Outcomes Data to other States' 2021 Outcomes Data

<b>Data Comparison Score<sup>4</sup></b>	1
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###### (b) Performance Change Over Time: Comparing your State's FFY 2021 data to your State's FFY 2020 data

<b>Performance Change Score<sup>5</sup></b>	1
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Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
<b>FFY 2021</b>	77.50%	66.62%	78.67%	52.37%	80.19%	70.15%
<b>FFY 2020</b>	75.96%	65.11%	80.57%	53.63%	82.26%	69.14%

<sup>1</sup> For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part C."

<sup>2</sup> Please see Appendix A for a detailed description of this calculation.

<sup>3</sup> Please see Appendix B for a detailed description of this calculation.

<sup>4</sup> Please see Appendix C for a detailed description of this calculation.

<sup>5</sup> Please see Appendix D for a detailed description of this calculation.



2023 Part C Compliance Matrix

Part C Compliance Indicator <sup>6</sup>	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 1: Timely service provision	95.14%	YES	2
Indicator 7: 45-day timeline	85.02%	NO	1
Indicator 8A: Timely transition plan	92.95%	NO	1
Indicator 8B: Transition notification	94.38%	N/A	2
Indicator 8C: Timely transition conference	93.32%	NO	1
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			1
Specific Conditions	None		
Uncorrected identified noncompliance	Yes, 2 to 4 years		

<sup>6</sup> The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: [https://sites.ed.gov/idea/files/2023\\_Part-C\\_SPP-APR\\_Measurement\\_Table.pdf](https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf)

**Appendix A**

**I. (a) Data Completeness:**

**The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)**

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State's Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State's FFY 2021 IDEA Section 618 Exit Data.

<b>Data Completeness Score</b>	<b>Percent of Part C Children included in Outcomes Data (C3) and 618 Data</b>
<b>0</b>	<b>Lower than 34%</b>
<b>1</b>	<b>34% through 64%</b>
<b>2</b>	<b>65% and above</b>

## Appendix B

### I. (b) Data Quality:

#### Anomalies in Your State's FFY 2021 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e<sup>78</sup>. In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State's data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

<b>Outcome A</b>	<b>Positive Social Relationships</b>
<b>Outcome B</b>	<b>Knowledge and Skills</b>
<b>Outcome C</b>	<b>Actions to Meet Needs</b>

<b>Category a</b>	<b>Percent of infants and toddlers who did not improve functioning</b>
<b>Category b</b>	<b>Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</b>
<b>Category c</b>	<b>Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</b>
<b>Category d</b>	<b>Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers</b>
<b>Category e</b>	<b>Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers</b>

<sup>7</sup> Numbers shown as rounded for display purposes.

<sup>8</sup> Values based on data for States with summary statement denominator greater than 199 exits.

**Expected Range of Responses for Each Outcome and Category, FFY 2021**

<b>Outcome\Category</b>	<b>Mean</b>	<b>StDev</b>	<b>-1SD</b>	<b>+1SD</b>
Outcome A\Category a	1.43	1.62	-0.19	3.05
Outcome B\Category a	1.26	2.27	-1.01	3.53
Outcome C\Category a	1.14	1.59	-0.45	2.73

<b>Outcome\Category</b>	<b>Mean</b>	<b>StDev</b>	<b>-2SD</b>	<b>+2SD</b>
Outcome A\ Category b	23.62	8.94	5.75	41.49
Outcome A\ Category c	20.32	12.69	-5.05	45.69
Outcome A\ Category d	27.33	9.46	8.42	46.24
Outcome A\ Category e	27.3	15.11	-2.92	57.52
Outcome B\ Category b	25.16	9.76	5.65	44.68
Outcome B\ Category c	28.73	12.11	4.5	52.95
Outcome B\ Category d	31.76	8.06	15.64	47.87
Outcome B\ Category e	13.09	8.56	-4.02	30.21
Outcome C\ Category b	20.27	8.49	3.29	37.26
Outcome C\ Category c	23.01	13.08	-3.16	49.17
Outcome C\ Category d	34.09	8.09	17.9	50.28
Outcome C\ Category e	21.49	15.06	-8.62	51.6

<b>Data Anomalies Score</b>	<b>Total Points Received in All Progress Areas</b>
0	0 through 9 points
1	10 through 12 points
2	13 through 15 points

**Anomalies in Your State's Outcomes Data FFY 2021**

<b>Number of Infants and Toddlers with IFSP's Assessed in your State</b>	<b>737</b>
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<b>Outcome A — Positive Social Relationships</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	0	115	131	265	226
<b>Performance (%)</b>	0.00%	15.60%	17.77%	35.96%	30.66%
<b>Scores</b>	1	1	1	1	1

<b>Outcome B — Knowledge and Skills</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	0	138	213	296	90
<b>Performance (%)</b>	0.00%	18.72%	28.90%	40.16%	12.21%
<b>Scores</b>	1	1	1	1	1

<b>Outcome C — Actions to Meet Needs</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	0	107	113	320	197
<b>Performance (%)</b>	0.00%	14.52%	15.33%	43.42%	26.73%
<b>Scores</b>	1	1	1	1	1

	<b>Total Score</b>
<b>Outcome A</b>	5
<b>Outcome B</b>	5
<b>Outcome C</b>	5
<b>Outcomes A-C</b>	15

<b>Data Anomalies Score</b>	<b>2</b>
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Appendix C

II. (a) Data Comparison:

**Comparing Your State's 2021 Outcomes Data to Other States' 2021 Outcome Data**

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement<sup>9</sup>. Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

*Summary Statement 1: Of those infants and toddlers who entered or exited 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.*

*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.*

**Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021**

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	43.42%	36.60%	54.62%	29.02%	55.14%	36.15%
90	82.74%	69.30%	79.34%	55.52%	85.72%	76.15%

Data Comparison Score	Total Points Received Across SS1 and SS2
0	0 through 4 points
1	5 through 8 points
2	9 through 12 points

**Your State's Summary Statement Performance FFY 2021**

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	77.50%	66.62%	78.67%	52.37%	80.19%	70.15%
Points	1	1	1	1	1	1

<b>Total Points Across SS1 and SS2(*)</b>	6
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<b>Your State's Data Comparison Score</b>	1
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<sup>9</sup> Values based on data for States with summary statement denominator greater than 199 exiters.

## Appendix D

### II. (b) Performance Change Over Time:

#### Comparing your State's FFY 2021 data to your State's FFY 2020 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of  $p \leq .05$ . The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of '0', '1', or '2' for each State is based on the total points awarded. Where OSEP has approved a State's reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of 'N/A' for this element.

#### Test of Proportional Difference Calculation Overview

The summary statement percentages from the previous year's reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of  $p \leq .05$ . The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

e.g., C3A FFY2021% - C3A FFY2020% = Difference in proportions

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on<sup>10</sup>

$$\text{Sqrt}[(\text{FFY2021\%} * (1-\text{FFY2021\%}) / \text{FFY2021N}) + ((\text{FFY2022\%} * (1-\text{FFY2022\%}) / \text{FFY2022N})] = \text{Standard Error of Difference in Proportions}$$

Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.

Difference in proportions /standard error of the difference in proportions = z score

Step 4: The statistical significance of the z score is located within a table and the *p* value is determined.

Step 5: The difference in proportions is coded as statistically significant if the *p* value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

Indicator 3 Overall Performance Change Score	Cut Points for Change Over Time in Summary Statements Total Score
0	Lowest score through 3
1	4 through 7
2	8 through highest

<sup>10</sup>Numbers shown as rounded for display purposes.

Summary Statement/ Child Outcome	FFY 2020 N	FFY 2020 Summary Statement (%)	FFY 2021 N	FFY 2021 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	416	75.96%	511	77.50%	1.53	0.0279	0.5490	0.583	NO	1
SS1/Outcome B: Knowledge and Skills	530	80.57%	647	78.67%	-1.90	0.0236	-0.8047	0.421	NO	1
SS1/Outcome C: Actions to meet needs	434	82.26%	540	80.19%	-2.07	0.0251	-0.8255	0.4091	NO	1
SS2/Outcome A: Positive Social Relationships	619	65.11%	737	66.62%	1.52	0.0259	0.5864	0.5576	NO	1
SS2/Outcome B: Knowledge and Skills	619	53.63%	737	52.37%	-1.26	0.0272	-0.4633	0.6432	NO	1
SS2/Outcome C: Actions to meet needs	619	69.14%	737	70.15%	1.01	0.0251	0.4010	0.6884	NO	1

<b>Total Points Across SS1 and SS2</b>	<b>6</b>
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<b>Your State's Performance Change Score</b>	<b>1</b>
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Data Rubric

FFY 2021 APR<sup>11</sup>

	Part C Timely and Accurate Data -- SPP/APR Data	
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	1	1
10	1	1
11	1	1
	<b>Subtotal</b>	13
<b>APR Score Calculation</b>	<b>Timely Submission Points</b> - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	<b>Grand Total</b> - (Sum of Subtotal and Timely Submission Points) =	18

<sup>11</sup> In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

Table	618 Data <sup>12</sup>			Total
	Timely	Complete Data	Passed Edit Check	
Child Count/Settings Due Date: 4/6/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
			<b>Subtotal</b>	9
<b>618 Score Calculation</b>			<b>Grand Total (Subtotal X 2) =</b>	18.00

Indicator Calculation	
A. APR Grand Total	18
B. 618 Grand Total	18.00
C. APR Grand Total (A) + 618 Grand Total (B) =	36.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
<b>Denominator</b>	36.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

\*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.

<sup>12</sup> In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 2 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

## APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

### SPP/APR Data

**1) Valid and Reliable Data** - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

### Part C 618 Data

**1) Timely** – A State will receive one point if it submits counts/ responses for an entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	1 <sup>st</sup> Wednesday in April
Part C Exiting	Part C Exiting Collection in EMAPS	1 <sup>st</sup> Wednesday in November
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	1 <sup>st</sup> Wednesday in November

**2) Complete Data** – A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. State-level data include data from all districts or agencies.

**3) Passed Edit Check** – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).



## How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

<https://sites.ed.gov/idea/how-the-department-made-determinations/>