

# **STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C**

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

**For reporting on  
FFY 2019**

**Washington**



**PART C DUE  
February 1, 2021**

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

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

The Department Children, Youth, and Families (DCYF) is a new cabinet level agency focused on the well-being of children. Our vision is to ensure that "Washington state's children and youth grow up safe and healthy—thriving physically, emotionally and academically, nurtured by family and community." (House Bill 1661)

DCYF serves as the State Lead Agency for the Individuals with Disabilities Education Act (IDEA) Part C program for Washington State. Within DCYF, the Part C programmatic home is the Early Support for Infants and Toddlers (ESIT) Program, within the Family Support Programs Division.

During Federal Fiscal Year (FFY) 2019, the ESIT program held contracts with twenty-four (24) Local Lead Agencies (LLAs) statewide in order to ensure that all families have equitable access to a locally coordinated system of early intervention services. As a result, 19,647 eligible infants, toddlers and their families received early intervention services during the past year. The types of organizations that administered each local early intervention system included:

- \* 1 county regional health district
- \* 4 county human service agencies
- \* 1 combined health and human services agency
- \* 14 nonprofit agencies; and
- \* 4 educational service districts

To ensure services are coordinated and conform to IDEA Part C requirements, each LLA develops and maintains subcontracts or local interagency agreements and local plans with individual early intervention providers or providing organizations within their geographic service area.

This past year, the ESIT Program met the following targets:

- \* Services in natural environments (Indicator 2)
- \* Early Childhood Outcomes (Indicator 3A SS1)
- \* Family Outcomes (Indicator 4A & 4B)
- \* Child Find (Indicators 5 and 6)
- \* Early childhood transition with the development of timely IFSPs 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 (Indicator 8A)
- \* Early childhood transition with timely notifications to 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 (Indicator 8B)

ESIT had no mediations that resulted in mediation agreements.

ESIT was able to substantially increase results of families participating in Part C who report that early intervention services have helped the family (Indicator 4):

- A. Know their rights increased by 10.4%
- B. Effectively communicate their children's needs increased by 6.3%
- C. Help their children develop and learn increased by 2.0%

Although ESIT did not meet targets in all three components for Child Outcomes (Indicator 3), there was an increased percentage of performance for a majority of the outcomes including Outcome A: Positive social-emotional skills for Summary Statement 1, which was a 2.0% increase from last year. This increase was the result of the State Systemic Improvement Plan efforts and activities. Further in Outcome B: Acquisition of Knowledge and Skills for Summary Statement 1 had an increase of 1.2 % and Outcome C: Use of Appropriate Behaviors Summary Statement 1 had an increase of 2.0%.

#### 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.**

General Supervision System:

The Early Support for Infants and Toddlers (ESIT) program continues to direct its general supervision and monitoring efforts through the following:

- \* Aligning and integrating activities with the Annual Performance Report (APR);
- \* Meeting federal requirements for states to monitor implementation of IDEA, both APR indicators and related requirements;
- \* Focusing on compliance and quality practices, especially those closely aligned with results for children and families; and
- \* Directing state technical assistance resources to those local lead agencies in greatest need.

Monitoring Local Lead Agencies (LLAs) on APR Indicators

ESIT Data Management System (DMS): All APR indicator data, with the exception of Indicator 4 - Family Outcomes, is retrieved from the DMS. The DMS creates an electronic Individualized Family Service Plan (IFSP) record that documents essential child and family information from initial contacts through transition. All child and family information must be entered into the DMS. This includes initial evaluation/assessment results, medical information, eligibility determination, and the child outcome summary (which incorporates a description of functional performance), family statement, individual child and family outcomes and services information. All this information is required to be entered into the DMS before an IFSP can be issued as completed.

Child level data is retrieved from IFSPs entered into the DMS and used for APR reporting. DMS business rules and calendar tools ensure either required information is entered into the system or a reason for not entering the information is supplied. When required information is not entered into the DMS in a

timely manner, the system creates red alerts on the family resources coordinator's (FRC) calendar. The calendar is monitored by local lead agency (LLA) staff (i.e. FRCs, program managers, agency administrators) and ESIT staff. Red alerts are reviewed and technical assistance is provided by the ESIT staff.

Results Indicators: APR Indicators 2, 5, and 6 results data is obtained from all IFSPs entered into the DMS on December 1 of the contract year as reported in 618 data submissions gathered throughout the Federal Fiscal Year. Indicator 4 data is collected from hard copy, electronic, and phone surveys completed by families and submitted to ESIT annually.

Compliance Indicators: APR Indicators 1, 7, 8, 8A, 8B, and 8C compliance data is retrieved from all IFSPs over a three (3) month period. DMS data is reviewed and verified for accuracy.

Identification and Correction of Non-Compliance: ESIT staff review and analyze compliance data to assess the "reasons" for any noncompliance (delayed services). When necessary, ESIT staff request and obtain clarification regarding reasons for late services, IFSP meeting, transition plan, and transition notification or transition conference to determine the root cause of noncompliance. If late services were due to exceptional family circumstances, findings of noncompliance are not made. If late services were due to reasons other than exceptional family circumstances, child specific noncompliance is identified and findings are issued. If it was determined that the noncompliance was already corrected, a finding is still issued, but a corrective action plan is not required. Even though correction occurred (the service provided though late), ESIT staff still assesses the level of noncompliance, identifies the contributing factors, if any, and determines if the noncompliance was isolated or systemic.

Within three (3) months from when compliance-monitoring data is retrieved from the DMS, each LLA receives a written notice of findings of noncompliance and the need to make timely correction. Upon receipt of written notice, each LLA administrator is directed to begin implementing required improvement activities to ensure correction is made, as soon as possible, but no later than one year from notification. Once correction of findings of noncompliance is achieved, the LLA receives a written notice that correction of noncompliance was attained.

When required, corrective action plans (CAPs) outline the resources needed to be accessed and timelines to follow in order to achieve compliance and/or improve performance. CAPs are required of all LLAs that do not fully correct identified noncompliance by the time annual determinations are issued.

#### Annual Determination Process

ESIT makes an annual determination of LLA efforts in implementing the requirements and purposes of IDEA, Part C. Each LLA APR data is aggregated by ESIT for annual reporting purposes. This aggregated data is used by the federal Office of Special Education Programs (OSEP) to make ESIT's annual determination.

ESIT staff disaggregates and evaluates this data to make LLA annual determinations. LLA determination status is based on the following:

1. Compliance Data
2. Timely correction of noncompliance
3. All Indicators must be timely, valid and reliable
4. Citizen's complaints filed and/or due process hearing or mediations held

A compliance indicator summary worksheet and determination evaluation scoring rubric is used to make LLA determinations. ESIT uses the four (4) OSEP determination categories to make LLA determinations. The enforcement actions and sanctions applied to ESIT are applied to LLAs. Before LLA's status determinations are made, ESIT notifies the LLA of any findings of noncompliance. ESIT reports to the public the performance of each LLA, a review of each program's performance against targets in the State's SPP/APR within 120 days from when ESIT submits the APR to OSEP.

#### Dispute Resolution Options

The timely administrative resolution of complaints occurs through established mediation, complaint, and due process hearing procedures. Monitoring the use of these dispute resolution options assists ESIT in identifying noncompliance and other systemic issues. By following each procedure's required steps and timelines, the resolution of any dispute will occur in a timely manner. Families are made aware of their dispute resolution options throughout their participation in the early intervention program. ESIT has a system in place to track and monitor complaint, mediation and due process dispute resolution activities. Parent identified issues are typically resolved through informal procedures rather than the formal dispute resolution options that are available to them.

#### Biennial Local Team Self-Assessment Process

Each LLA self-assessment team is required to complete the self-assessment biennially through a review of children's records. In addition, each LLA is now required to complete a portion of the Local Child Outcomes Measurement System Self-Assessment (LCOMS-SA). Each LLA submits a Local System Improvement Plan with a minimum of one improvement activity related to the local team self-assessment results and one activity related to the LCOMS-SA. The LLA implements improvement strategies throughout the following contract year.

The self-assessment tool and process is designed to gather data from each LLA on state selected data that is not available through the DMS. These data are used to substantiate compliance with IDEA and related requirements associated with each APR indicator, and to encourage the use of best practices associated with improved results for children and families.

#### Technical Assistance System:

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to early intervention service (EIS) programs.**

##### On-site Targeted Technical Assistance

Targeted technical assistance is provided to individual LLAs, a selected group of LLAs, or statewide as needs are identified. Through the State Systemic Improvement Plan (SSIP), LLAs that are implementation sites receive targeted training and technical assistance as described in Indicator 11. Monitoring, complaints, mediation, and due process data may be used to identify and provide technical assistance. On-site targeted technical assistance is provided more frequently when ESIT or an LLA has identified an issue or set of issues that require focused attention. The technical assistance visit may center on the exploration of factors that might contribute to the present performance or system concern/issue. Information, resources, and supports are provided based on the contributing factors or identified concerns and issues.

##### 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.**

Through contracts with the Early Support for Infants and Toddlers (ESIT) program, local lead agencies (LLAs) are required to ensure all early intervention programs employ qualified personnel. This contract requirement pertains to employing service coordinators or family resources coordinators

(FRCs). ESIT guidance on minimum education and state licensure/certification/registration requirements are posted on the ESIT website. This guidance information is accessible by going to [https://www.dcyf.wa.gov/sites/default/files/pdf/esit/Qualified\\_Personnel\\_Guidelines.pdf](https://www.dcyf.wa.gov/sites/default/files/pdf/esit/Qualified_Personnel_Guidelines.pdf).

The Office of Superintendent of Public Instruction and Department of Health license or certify most providers. ESIT provides a statewide training and registration system for FRCs. Maintaining current FRC registration status requires meeting annual training requirements.

ESIT offers three basic Part C online training modules, quarterly professional learning community (PLC) seminars, and various training opportunities on current topics throughout the year. Training occurs through webinars, conference calls or local onsite workshops. Two curricula, developed by and for parents explaining Part C and transition are posted on the website. Training efforts are in place statewide and in local implementation sites as part of ESIT's State Systemic Improvement Plan.

ESIT is a major sponsor and active participant on the planning committee for the statewide Infant and Early Childhood Conference that occurs each year. This important conference draws professionals and interested stakeholders from across the state's many early childhood programs. State and national experts from diverse early childhood backgrounds continue to be key conference and workshop presenters. The conference scheduled for May 2020 was cancelled due to COVID-19. This year's conference scheduled for May 2021 is being held virtually and continues to serve as the state's key early childhood professional development event.

#### **Stakeholder Involvement:**

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

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including; early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

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

YES

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

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

The Early Support for Infants and Toddlers Program made the following items available to the public on the program website at <https://www.dcyf.wa.gov/practice/oiaa/reports>.

- Annual Performance Report (APR)
- Local Lead Agency APR Data
- Local Lead Agency Determination Status Reports
- 618 Data Tables

Information on how these reports could be accessed was emailed to our SICC, LLAs, and other stakeholders.

On June 23, 2020, the Office of Special Education Programs (OSEP) FFY 2020 Determination Letter notified the director of the Washington State Department of Children, Youth, and Families (DCYF), the State Lead Agency for Part C, that the Washington State Part C program met requirements of Part C of the IDEA.

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

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

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

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

### **Intro - OSEP Response**

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

### **Intro - Required Actions**

OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 11 attachments included in the State's FFY 2019 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

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

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

### Data Source

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

### Measurement

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

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

### Instructions

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

Targets must be 100%.

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

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

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

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

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

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	87.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	98.16%	96.57%	97.93%	96.90%	97.34%

### Targets

FFY	2019
Target	100%

### FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
12,158	12,848	97.34%	100%	98.22%	Did Not Meet Target	No Slippage

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

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

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**Include your State's criteria for "timely" receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).**

Washington State's criteria for timely receipt of early intervention services requires the provider agency to conduct an initial evaluation and assessments and the initial IFSP within 45 days from the date the provider agency received the referral. The early interventions services listed on the initial IFSP must start within 30 days from the initial IFSP date or have a planned start date set in the future (beyond 30 days from the IFSP date). When a future planned start date is set, the actual service must start on or before that date.

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

State database

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

Data were collected from January 1 through March 31, 2020, third quarter, selection from the full reporting period and was obtained from all IFSPs entered into the ESIT Data Management System (DMS) during this period.

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

The annual compliance period in the state of Washington is from January 1 through March 31, 2020, third quarter of the respective reporting year. During this time, the state confirms the timeliness of all IFSPs entered in the data management system. The three months of data collected from all IFSPs during this period contain the full range of variability exhibited by the population served by ESIT throughout the year. The data is from all programs across the state making it representative of the entire state.

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

In FFY 2019, 1.78% of IFSPs entered in the state database during the compliance monitoring period were late. After analysis of the late reasons that were identified as "late, other" three categories of late reasons were identified. The three categories are provider shortages, late due to circumstances related to the COVID-19 pandemic, and late due to administrative and provider agency scheduling errors.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
121	121	0	0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The ESIT program verified that it corrected all findings of noncompliance identified in FFY 2018, consistent with the requirements in OSEP Memo 09-02. ESIT staff, Local Lead Agency (LLA) administrators, Family Resources Coordinators (FRCs), and providers used the ESIT Data Management System (DMS) IFSP Compliance Report to review data.

From the date the LLA received a finding letter for noncompliance, the LLA had one year to correct identified non-compliance for each indicator not meeting 100%. Each LLA reviewed compliance reports from the DMS to ensure data was entered accurately into the system and that the regulatory requirements regarding timely service provision were being met.

To verify that noncompliance was correctly addressing the regulatory requirements, each LLA reviewed and identified a minimum of two weeks of DMS data. If data demonstrated compliance for each indicator where findings were issued, compliance was considered achieved. The LLA then submitted the DMS data to ESIT staff for reverification. After ESIT staff verified the data submitted, (and verified correction of individual child noncompliance, ESIT staff sent a letter documenting that noncompliance was fully corrected.

If correction of non-compliance has not been verified within one-year of the findings, ESIT staff notifies the LLA that they must develop a CAP. During FFY18, no LLA met the criteria for needing a CAP.

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

ESIT staff verified correction of each individual incidence of non-compliance through the ESIT data management system (DMS). The DMS provides a start date and an actual start date for every new service initiated in an IFSP. If a service is late, the DMS requires the user to enter a reason for the delay.

Late Exceptional Family Circumstance (EFC): extraordinary events that prevent the family from participating in required events on time.

Late Other: events identified by the early intervention program or provider and not the family that prevent required events from being completed on time. ESIT staff reviewed compliance reports from the DMS during the annual compliance monitoring period and subsequent intervals as needed to verify each individual instance of noncompliance is corrected unless the child is no longer within the jurisdiction of the local lead agency, the family declined services, or the local lead agency was unable to make contact with the family.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**1 - Prior FFY Required Actions**

If the State uses data from a State database to report on this indicator in its FFY 2019 SPP/APR, and the State does not use data from the full reporting period (July 1, 2019-June 30, 2020), the State must describe, in the FFY 2019 SPP/APR, how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

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

**1 - OSEP Response**

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

**1 - Required Actions**

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

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



## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	48.00%

FFY	2014	2015	2016	2017	2018
Target>=	92.50%	92.75%	93.00%	93.25%	93.50%
Data	94.49%	95.34%	95.54%	96.21%	95.71%

**Targets**

FFY	2019
Target>=	95.00%

**Targets: Description of Stakeholder Input**

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including: early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	9,601
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	10,002

**FFY 2019 SPP/APR Data**

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
9,601	10,002	95.71%	95.00%	95.99%	Met Target	No Slippage

Provide additional information about this indicator (optional)

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

**2 - Required Actions**

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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

### 3 - Indicator Data

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

NO

#### Targets: Description of Stakeholder Input

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including; early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

#### Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2013	Target>=	56.25%	56.50%	56.70%	56.80%	58.25%
A1	56.21%	Data	56.38%	56.63%	55.69%	56.74%	59.06%
A2	2013	Target>=	55.00%	55.25%	55.50%	55.75%	56.00%
A2	54.77%	Data	56.14%	56.25%	53.71%	53.54%	55.40%
B1	2013	Target>=	65.11%	65.11%	65.50%	65.75%	66.00%
B1	65.11%	Data	63.71%	64.12%	64.96%	65.22%	66.32%
B2	2013	Target>=	57.00%	57.20%	57.40%	57.60%	57.80%
B2	56.79%	Data	52.54%	51.95%	50.43%	51.96%	52.27%
C1	2013	Target>=	68.50%	68.75%	69.00%	69.25%	69.50%
C1	68.26%	Data	66.86%	66.04%	66.04%	66.29%	67.25%
C2	2013	Target>=	58.25%	58.50%	58.75%	59.00%	59.35%
C2	58.17%	Data	56.73%	54.67%	53.71%	55.04%	55.51%

#### Targets

FFY	2019
Target A1>=	58.50%
Target A2>=	56.00%
Target B1>=	66.25%
Target B2>=	57.80%
Target C1>=	69.50%
Target C2>=	59.35%

#### FFY 2019 SPP/APR Data

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

7,266

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	57	0.78%

<b>Outcome A Progress Category</b>	<b>Number of children</b>	<b>Percentage of Total</b>
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,956	26.92%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,241	17.08%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,922	26.45%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2,090	28.76%

<b>Outcome A</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2018 Data</b>	<b>FFY 2019 Target</b>	<b>FFY 2019 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	3,163	5,176	59.06%	58.50%	61.11%	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	4,012	7,266	55.40%	56.00%	55.22%	Did Not Meet Target	No Slippage

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

<b>Outcome B Progress Category</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	54	0.74%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,837	25.28%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,653	22.75%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,289	31.50%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,433	19.72%

<b>Outcome B</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2018 Data</b>	<b>FFY 2019 Target</b>	<b>FFY 2019 Data</b>	<b>Status</b>	<b>Slippage</b>
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	3,942	5,833	66.32%	66.25%	67.58%	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	3,722	7,266	52.27%	57.80%	51.22%	Did Not Meet Target	Slippage

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

While maintaining a level of compliance that compares to the previous year, slippage occurred, resulting in a slight decrease in performance of 1.05% from FFY18 to FFY19.

Upon further data analysis, several reasons were determined as the possible cause for this decrease. We believe that slippage may have occurred as a result of the continued implementation of the State's Systemic Improvement Plan (SSIP). The goal of the SSIP work is to increase the accuracy of COS ratings through additional COS training on engaging the family, and the training on and use of the COS decision tree. The ratings entered by the FRC may be more accurate, which in turn lead to a change in progress categories and then SS2.

The slippage could also be a result of the updated guidance for children entering Part C services with a qualifying diagnosis. We have revised the list of qualifying diagnosis and added several new diagnosis to our list. The change in our data could be the result of more children with severe diagnosis entering services and the fact that they do not meet expectations in Outcome B by the time they turn three years old.

We will be following up with our local provider agencies in each of our regions to further identify reasons for the decrease 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.

**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	49	0.67%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,730	23.81%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,502	20.67%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,501	34.42%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,484	20.42%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	4,003	5,782	67.25%	69.50%	69.23%	Did Not Meet Target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	3,985	7,266	55.51%	59.35%	54.84%	Did Not Meet 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	10,195
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.	2,929

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.**

**Outcome Measurement Policies and Procedures**

Washington State's outcome measurement policies and procedures require all eligible infants and toddlers who have received at least six months of early intervention services to have child outcome data collected at entry and exit.

Child outcome entry data is gathered prior to completing each initial IFSP, with an exception when a child entered early intervention at 30 months of age or later. Under this circumstance, the child is not required to have an entry COS rating because s/he would not have been in service for the required six-month period. All infants and toddlers, who had an entry COS and received at least six months of consecutive services, had an exit COS completed prior to leaving early intervention.

Washington State's IFSP process integrates the child outcome summary into the initial evaluation and assessment process. Training and technical assistance continue to focus on gathering functional information about the child to inform the child outcome summary rating process. Because of the integrated child outcome summary and IFSP process, evaluation and assessment data are used in a more consistent way to determine child outcome summary ratings.

**Measurement Strategies and Data Collection**

The child's IFSP team, which includes the child's parent, used a variety of data sources to determine the child's level of functioning in each child

outcome area. IFSP teams made assessment tool selections based on the needs of the child and family. The child's functional performance was rated following the ECO child outcome summary process. The data sources used by the team included standardized tools, curriculum-based measures, parent/caregiver report, professional observations, and other relevant assessment information.

When standardized tools or curriculum-based instruments were administered, the instruments or measures most frequently used included:

- Assessment, Evaluation, and Programming System for Infants and Children (AEPS) -- Birth to three Battelle Developmental Inventory
- Developmental Assessment of Young Children (DAYC) Bayley Scales of Infant and Toddler Development

Early Intervention Program Agency staff enter child outcome summary data into the data management system on an ongoing basis.

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

### **3 - Prior FFY Required Actions**

None

### **3 - OSEP Response**

### **3 - Required Actions**

## Indicator 4: Family Involvement

### Instructions and Measurement

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

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2019	Target>=	82.50%	82.75%	83.00%	83.25%	83.50%
A	89.87%	Data	81.55%	81.78%	75.72%	79.17%	79.53%
B	2019	Target>=	90.50%	90.75%	91.00%	91.25%	91.50%
B	92.16%	Data	88.54%	88.39%	81.86%	85.60%	85.87%
C	2019	Target>=	86.50%	86.75%	87.00%	87.25%	87.50%
C	86.89%	Data	85.98%	87.65%	80.07%	85.10%	84.90%

### Targets

FFY	2019
Target A>=	83.50%
Target B>=	91.50%
Target C>=	87.50%

### Targets: Description of Stakeholder Input

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including; early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing



data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

#### FFY 2019 SPP/APR Data

The number of families to whom surveys were distributed	4,216
Number of respondent families participating in Part C	1,915
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,562
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,738
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	1,727
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,874
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	1,418
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,632

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	79.53%	83.50%	89.87%	Met Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	85.87%	91.50%	92.16%	Met Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	84.90%	87.50%	86.89%	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?	YES
If your collection tool has changed, upload it here	Family Survey Tool FFY19 & 508 Compliance Verification
The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.	YES

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

FFY 2019 family outcome data was collected and reported using a new Family Outcomes Survey. The survey was developed by Washington State University (WSU) in collaboration with the Parent Institute for Engagement (PIE) Family Outcomes Survey Workgroup. The State Interagency Coordinating Council (SICC) reviewed the new tool and provided feedback prior to the finalization and implementation of the questionnaire.

The re-design of the Family Outcomes Survey focused on simplified text and friendlier tone, fewer response options and a shorter survey. The child's name and the provider agency were pre-populated on the personalized survey and the cover letter was signed by ESIT's Family Engagement Coordinator.

WSU mailed a cover letter and the printed surveys to families whose child exited the program in the last 6 months, who received services for at least 6 months and/or who had an Annual IFSP. Families whose children deceased did not receive a survey. The letter stated the purpose of the survey and how the data is used. Surveys were available in twelve languages. WSU followed up with a postcard reminder as well as an email reminder in the month of November. Telephone surveys were conducted from December 2020 to January of 2021. This allowed ESIT the ability to distribute surveys targeting underrepresented groups with follow-up communication as needed.

The representativeness (geographic area, region, race/ethnicity, age of the child, length of program participation, and socio-economic status) of survey respondents was assessed by comparing survey response data with the data of all survey recipients. Race and Ethnicity data was also compared to the December 1, 2020 Child County Data. Demographic data was obtained from all geographic areas of the state. The metric selected to measure representativeness is that data with +/- 3% discrepancy in the proportion of responders in comparison to the target group is considered to be representative.

When considering age of child, the largest difference in representation was observed for children age 13-24 months old. We observed no significant over-representation (2% difference) for children age 13-24 months and children older than 37 months (2% difference).

Age of Child a) Survey Responses b) December 1, 2017 Child Count

Birth – 12 months

a)1%  
b)1%

13 – 24 months

a)19%  
b)17%

25 – 36 months

a)35%  
b)34%

Older than 36 months

a)45%  
b)47%

The race/ethnicity data of our survey respondents is representative of the data of our recipient population as well as the data of our general population as seen in the December 1, 2020 Child Count Data.

Race/Ethnicity a) Survey Responses b) December 1, 2020 c) Survey Recipient Count

White a) 56% b) 56% c) 54%  
Hispanic a) 21% b) 22% c) 23%  
Asian a) 9% b) 7% c) 7%  
Native Hawaiian/ a) 1% b) 1% c) 1%  
Pacific Islander  
Black or a) 4% b) 5% c) 5%  
African American  
Two or More Races a) 8% b) 8% c) 8%  
American Indian or a) 1% b) 1% c) 1%  
Alaska Native

When considering the gender of the children receiving services, the data of the survey respondents was representative of the data of our survey recipient population (less than 1% difference). This is also true for data pertaining to the primary language spoken by the families who received the survey compared to the data of families who responded to the survey (largest difference is 0.3% for families speaking Russian and Punjabi).

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

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

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

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

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

#### **4 - Required Actions**

OSEP notes that the State submitted verification that the attachment complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the attachments included in the State's FFY 2019 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

## Indicator 5: Child Find (Birth to One)

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	0.51%

FFY	2014	2015	2016	2017	2018
Target >=	0.82%	0.85%	0.89%	0.92%	0.96%
Data	1.27%	1.47%	1.44%	1.63%	1.95%

### Targets

FFY	2019
Target >=	1.21%

### Targets: Description of Stakeholder Input

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including; early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	1,799
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	88,095

### FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
1,799	88,095	1.95%	1.21%	2.04%	Met Target	No Slippage

**Compare your results to the national data**

(Sources: Grads360; the number and percent of infants and toddlers receiving early intervention services under IDEA, Part C, by age and state; Institution: U.S. Department of Education; Publication Year: 20XX <https://osep.grads360.org/#communities/pdc/documents/9795>)

When comparing Washington State data with national data for Indicator 5, Washington was above the national average. Washington's data for this indicator was 2.04%, and the national average for this indicator was 1.37%.

This reflects state and local efforts to better identify eligible infants under the age of 12 months. ESIT collected data for this indicator in the statewide data management system. Local lead agencies have access to a report in state's data management system (DMS) that provides the percent of children from birth to one year old with IFSPs compared the state total population of children from birth to one year old at a point-in-time.

We anticipate an increase number of children served with Washington States continued efforts to support universal developmental screenings for all children. Statewide Parent/Caregiver Outreach and Public Awareness Parent/caregiver awareness about the importance of developmental screening increased over the past year through Washington's WithinReach and Parent Help 123/Help Me

Grow websites: <http://www.withinreachwa.org/> and <http://www.parenthelp123.org/child-development/help-me-grow-washington>.

WithinReach Family Health Hotline continued to serve as ESIT's central directory contractor and provided statewide information and referral to ESIT Family Resources Coordinators (FRCs). WithinReach Family Health Hotline continued to be the 1-800 number families call if they have concerns or questions about their child's development or need to find out how to access public health insurance, immunizations for their child, food or housing assistance, etc.

CHILD Profile continued to serve as an effective ESIT public awareness resource to families. CHILD Profile is a program of the Department of Health (DOH) that provided immunization tracking and continued to distribute free child development and health information for Washington families that have children ages birth to six years of age. CHILD Profile continued to serve as Washington State's Health Promotion and Immunization Registry system. ESIT continued to contract with CHILD Profile to distribute three specific targeted mailings to families statewide with information on how children grow and develop. This information also included the WithinReach Family Health Hotline phone number, should families have a concern about their child's development. Parents of all children born in Washington State get these free materials. Children and families who move into the state could also be added to the system by their health care provider. Parents were also able to sign up directly to receive the materials. For more information about CHILD Profile, go to <https://www.doh.wa.gov/YouandYourFamily/Immunization/ChildProfileHealthPromotion/ForParents>

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

**5 - Prior FFY Required Actions**

None

**5 - OSEP Response**

**5 - Required Actions**

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

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 6 - Indicator Data

Baseline Year	Baseline Data
2005	1.79%

FFY	2014	2015	2016	2017	2018
Target >=	2.32%	2.38%	2.43%	2.49%	2.55%
Data	2.44%	2.69%	2.77%	2.99%	3.43%

#### Targets

FFY	2019
Target >=	2.80%

#### Targets: Description of Stakeholder Input

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including; early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

#### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	10,002
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	268,540

#### FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
10,002	268,540	3.43%	2.80%	3.72%	Met Target	No Slippage

**Compare your results to the national data**

(Sources: Grads360; the number and percent of infants and toddlers receiving early intervention services under IDEA, Part C, by age and state; Institution: U.S. Department of Education; Publication Year: 20XX <https://osep.grads360.org/#communities/pdc/documents/9795>)

When comparing Washington State data with national data for Indicator 6, Washington represents the national average. Washington's data for this indicator was 3.72%, and the national average for this indicator was 3.7%. Washington continues to increase the percentage of children served each year and exceeding the state's target. Stakeholders noted that this improvement over the prior year reflects the effort that has been made at both the state and local level to reach out and identify more infants and toddlers that are eligible for early intervention services.

Local lead agencies have access to a report in state's data management system (DMS) that provides the percent of children from birth to three year old with IFSPs compared the state total population of children from birth to one year old at a point-in-time.

We anticipate a continuous increase number of children served with the Washington States continued efforts to support universal developmental screenings for all children. Statewide Parent/Caregiver Outreach and Public Awareness Parent/caregiver awareness about the importance of developmental screening increased over the past year through Washington's WithinReach and Parent Help 123/Help Me Grow websites: <http://www.withinreachwa.org/> and <http://www.parenthelp123.org/child-development/help-me-grow-washington>. WithinReach Family Health Hotline continued to serve as ESIT's central directory contractor and provided statewide information and referral to ESIT Family Resources Coordinators (FRCs). WithinReach Family Health Hotline continued to be the 1-800 number families call if they have concerns or questions about their child's development or need to find out how to access public health insurance, immunizations for their child, food or housing assistance, etc.

CHILD Profile continued to serve as an effective ESIT public awareness resource to families. CHILD Profile is a program of the Department of Health (DOH) that provided immunization tracking and continued to distribute free child development and health information for Washington families that have children ages birth to six years of age. CHILD Profile continued to serve as Washington State's Health Promotion and Immunization Registry system. ESIT continued to contract with CHILD Profile to distribute three specific targeted mailings to families statewide with information on how

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

**6 - Prior FFY Required Actions**

None

**6 - OSEP Response**

**6 - Required Actions**

## Indicator 7: 45-Day Timeline

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

## 7 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	85.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	92.21%	93.67%	91.90%	91.43%	90.77%

### Targets

FFY	2019
Target	100%

### FFY 2019 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,021	5,437	90.77%	100%	94.78%	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.

1,132

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



State database

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

Data were collected from January 1 through March 31, 2020, third quarter, selection from the full reporting period and was obtained from all IFSPs entered into the ESIT Data Management System (DMS) during this period.

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

The annual compliance period in the state of Washington is from January 1 through March 31, 2020, third quarter of the respective reporting year. During this time, the state confirms the timeliness of all IFSPs entered in the data management system. The three months of data collected from all IFSPs during this period contain the full range of variability exhibited by the population served by ESIT throughout the year. The data is from all programs across the state making it representative of the entire state.

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

In FFY 2019, 5.82% of services entered in the state database during the compliance monitoring period were late. After analysis of the late reasons that were identified as "late, other" three categories of late reasons were identified. The three categories are provider shortages, late due to circumstances related to the COVID-19 pandemic, and late due to administrative and provider agency scheduling errors.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
195	195		0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The ESIT program verified that it corrected all findings of noncompliance identified in FFY 2018, consistent with the requirements in OSEP Memo 09-02. ESIT staff, Local Lead Agency (LLA) administrators, Family Resources Coordinators (FRCs), and providers used the ESIT Data Management System (DMS) IFSP Compliance Report to review data.

From the date the LLA received a finding letter for noncompliance, the LLA had one year to correct identified non-compliance for each indicator not meeting 100%. Each LLA reviewed compliance reports from the DMS to ensure data was entered accurately into the system and that the regulatory requirements regarding timely service provision were being met

To verify that noncompliance was correctly addressing the regulatory requirements, each LLA reviewed and identified a minimum of two weeks of DMS data. If data demonstrated compliance for each indicator where findings were issued, compliance was considered achieved. The LLA then submitted the DMS data to ESIT staff for reverification. After ESIT staff verified the data submitted, (and verified correction of individual child noncompliance, ESIT staff sent a letter documenting that noncompliance was fully corrected.

If correction of non-compliance has not been verified within one-year of the findings, ESIT staff notifies the LLA that they must develop a CAP. During FFY18, no LLA met the criteria for needing a CAP.

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

ESIT staff verified correction of each individual incidence of non-compliance through the ESIT data management system (DMS). The DMS provides a referral date, an Initial IFSP due date and the actual date the Initial IFSP was issued for every new IFSP. If an Initial IFSP was late, the DMS requires the user to enter a reason for the delay.

Late Exceptional Family Circumstance (EFC): extraordinary events that prevent the family from participating in required events on time.

Late Other: events identified by the early intervention program or provider and not the family that prevent required events from being completed on time.

ESIT staff reviewed compliance reports from the DMS during the annual compliance monitoring period and subsequent intervals as needed to verify each individual instance of noncompliance is corrected unless the child is no longer within the jurisdiction of the local lead agency, the family declined services, or the local lead agency was unable to make contact with the family.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**7 - Prior FFY Required Actions**

If the State uses data from a State database to report on this indicator in its FFY 2019 SPP/APR, and the State does not use data from the full reporting period (July 1, 2019-June 30, 2020), the State must describe, in the FFY 2019 SPP/APR, how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

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

**7 - OSEP Response**

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

## 7 - Required Actions

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

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

## Indicator 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:

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	76.00%

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

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
5,816	5,816	100.00%	100%	100.00%	Met Target	No Slippage

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

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

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

State database

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

Data were collected from January 1 through March 31, 2020, third quarter, selection from the full reporting period and was obtained from all IFSPs entered into the ESIT Data Management System (DMS) during this period

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

The annual compliance period in the state of Washington is from January 1 through March 31, 2020, third quarter of the respective reporting year. During this time, the state confirms the timeliness of all IFSPs entered in the data management system. The three months of data collected from all IFSPs during this period contain the full range of variability exhibited by the population served by ESIT throughout the year. The data is from all programs across the state making it representative of the entire state.

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

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

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**8A - Prior FFY Required Actions**

If the State uses data from a State database to report on this indicator in its FFY 2019 SPP/APR, and the State does not use data from the full reporting period (July 1, 2019-June 30, 2020), the State must describe, in the FFY 2019 SPP/APR, how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

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

**8A - OSEP Response**

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

## 8A - Required Actions

## Indicator 8B: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

- A. Percent =  $\left[ \frac{\text{\# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday}}{\text{\# of toddlers with disabilities exiting Part C}} \right] \times 100$ .
- 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 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	95.00%

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

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,788	5,544	100.00%	100%	100.00%	Met Target	No Slippage

**Number of parents who opted out**

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

756

**Describe the method used to collect these data**

The ESIT Data Management System (DMS) business rules requires local lead agencies (LLA) administrators, family resources coordinators (FRCs), and service providers to document in the DMS if a child was potentially eligible for Part B. ESIT, the state lead agency (SLA), generates notifications from the DMS to the state education agency(SEA) and local education agency (LEA).

LEA Notification. Potential eligibility for Part B special education documentation resulted in the DMS generating notifications. The DMS sent an automated electronic notification to all LEAs informing them of potentially eligible toddlers that would soon be transitioning from early intervention.

SEA Notification. ESIT staff manually sent the required notification to the SEA data manager. SEA and LEA notifications occur monthly. Because of the structure of the DMS, individual instances of noncompliance could not occur regarding this indicator.

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

NO

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

State database

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

Data were collected from January 1 through March 31, 2020, third quarter, selection from the full reporting period and was obtained from all IFSPs entered into the ESIT Data Management System (DMS) during this period

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

The annual compliance period in the state of Washington is from January 1 through March 31, 2020, third quarter of the respective reporting year. During this time, the state confirms the timeliness of all IFSPs entered in the data management system. The three months of data collected from all IFSPs during this period contain the full range of variability exhibited by the population served by ESIT throughout the year. The data is from all programs across the state making it representative of the entire state.

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

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

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**8B - Prior FFY Required Actions**

If the State uses data from a State database to report on this indicator in its FFY 2019 SPP/APR, and the State does not use data from the full reporting period (July 1, 2019-June 30, 2020), the State must describe, in the FFY 2019 SPP/APR, how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

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

**8B - OSEP Response**

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

**8B - Required Actions**



## Indicator 8C: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8C - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	80.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.92%	95.48%	98.52%	96.96%	97.20%

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,216	5,544	97.20%	100%	95.15%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

While maintaining a relatively high level of compliance, slippage occurred, resulting in a 2.05% decrease between FFY18 (97.20%) and FFY19 (95.15%).

Upon further analysis of our data, it was determined that the slippage is a result of the global COVID-19 pandemic that caused many school districts to either close entirely, or work with limited staff. Transition conferences did not take place as planned or were delayed as a result. Family Resources Coordinators entered the late transition conferences as "Other".

ESIT staff is in the process of creating training and technical assistance guidance for FRCs and school districts on data entry of transition conferences that are delayed or cancelled due to COVID-19 related challenges and appropriate documentation of the late reasons (late other and exceptional family circumstances).

Other efforts to ensure timely transition conference meetings is the implementation of virtual conferences in partnership with the school districts.

**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.

406

**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.

673

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

State database

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

Data were collected from January 1 through March 31, 2020, third quarter, selection from the full reporting period and was obtained from all IFSPs entered into the ESIT Data Management System (DMS) during this period.

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

The annual compliance period in the state of Washington is from January 1 through March 31, 2020, third quarter of the respective reporting year. During this time, the state confirms the timeliness of all IFSPs entered in the data management system. The three months of data collected from all IFSPs during this period contain the full range of variability exhibited by the population served by ESIT throughout the year. The data is from all programs across the state making it representative of the entire state.

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

In FFY 2019, 4.85% of transition conferences entered in the state database during the compliance monitoring period were late. After analysis of the late reasons that were identified as "late, other" three categories of late reasons were identified. The three categories are provider shortages, late due to circumstances related to the COVID-19 pandemic, specifically school district closures, and late due to administrative and provider agency scheduling errors.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
31	31	0	0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The ESIT program verified that it corrected all findings of noncompliance identified in FFY 2018, consistent with the requirements in OSEP Memo 09-02. ESIT staff, Local Lead Agency (LLA) administrators, Family Resources Coordinators (FRCs), and providers used the ESIT Data Management System (DMS) IFSP Compliance Report to review data.

From the date the LLA received a finding letter for noncompliance, the LLA had one year to correct identified non-compliance for each indicator not meeting 100%. Each LLA reviewed compliance reports from the DMS to ensure data was entered accurately into the system and that the regulatory requirements regarding timely service provision were being met.

To verify that noncompliance was correctly addressing the regulatory requirements, each LLA reviewed and identified a minimum of two weeks of DMS data. If data demonstrated compliance for each indicator where findings were issued, compliance was considered achieved. The LLA then submitted the DMS data to ESIT staff for reverification. After ESIT staff verified the data submitted, (and verified correction of individual child noncompliance, ESIT staff sent a letter documenting that noncompliance was fully corrected.

If correction of non-compliance has not been verified within one-year of the findings, ESIT staff notifies the LLA that they must develop a CAP. During FFY18, no LLA met the criteria for needing a CAP.

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

ESIT staff verified correction of each individual incidence of non-compliance through the ESIT data management system (DMS). The DMS provides a transition conference due date and an actual date when the transition conference occurred for each child record required to have a transition conference. If a transition conference was late, the DMS requires the user to enter a reason for the delay.

Late Exceptional Family Circumstance (EFC): extraordinary events that prevent the family from participating in required events on time.

Late Other: events identified by the early intervention program or provider and not the family that prevent required events from being completed on time.

ESIT staff reviewed compliance reports from the DMS during the annual compliance monitoring period and subsequent intervals as needed to verify each individual instance of noncompliance is corrected unless the child is no longer within the jurisdiction of the local lead agency, the family declined services, or the local lead agency was unable to make contact with the family.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**8C - Prior FFY Required Actions**

If the State uses data from a State database to report on this indicator in its FFY 2019 SPP/APR, and the State does not use data from the full reporting period (July 1, 2019-June 30, 2020), the State must describe, in the FFY 2019 SPP/APR, how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

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

**8C - OSEP Response**

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

**8C - Required Actions**

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

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

## Indicator 9: Resolution Sessions

### Instructions and Measurement

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

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

#### Data Source

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the 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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/04/2020	3.1 Number of resolution sessions	0
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/04/2020	3.1(a) Number resolution sessions resolved through settlement agreements	0

### Targets: Description of Stakeholder Input

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including; early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

SICC Special Meeting -- Annual Performance Report (APR) Review

January 20, 2021, the State Interagency Coordinating Council (SICC) met to review the Washington State's Part C State Annual Performance Report. The SICC provided input and requested additional clarification. Some Indicators were discussed in more detail with SICC input integrated into indicator sections as appropriate. The SICC did not directly recommend changes to any targets that were previously set, rather referred a review of the targets to the Data Committee as part of its ongoing data analysis. The Data Committee intends to integrate a racial equity mindset into each of its work plan components throughout FFY 2020.

### Historical Data

Baseline Year	Baseline Data
0	0.00%

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

**Targets**

FFY	2019
Target>=	0.00%

**FFY 2019 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
0	0		0.00%		N/A	N/A

Provide additional information about this indicator (optional)

**9 - Prior FFY Required Actions**

None

**9 - OSEP Response**

OSEP notes that this indicator is not applicable.

**9 - Required Actions**

## Indicator 10: Mediation

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

### 10 - Indicator Data

#### Select yes to use target ranges

Target Range not used

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

NO

#### Prepopulated Data

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

#### Targets: Description of Stakeholder Input

Stakeholder meetings were convened in November 2014 to discuss APR target setting. A broad range of stakeholders participated including; early intervention service providers, agency administrators, local lead agency (LLA) staff and school district staff. The group was given the task of reviewing data and making recommendations to ESIT on targets covering the next six years for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6.

An overview of the indicators and parameters of target setting were presented. Participants were divided into small groups and given a data packet for reference in their discussions. The data packet showed state trends for each results indicator over the past several years. After discussion and analysis, individuals from the groups generated a recommendation for each target for the next six years. ESIT staff were present to answer any questions.

Results were compiled and the mean, median, and modes were calculated for each indicator for each year. The groups' input was consolidated into one set of indicators for each year and presented at a special APR review meeting of the State Interagency Coordinating Council (SICC) in January 2015.

January 16, 2020, the State Interagency Coordinating Council (SICC) met to review all target setting for Indicators 2, 3a,b,c, 4a,b,c, 5 and 6 as a part of the annual performance review process. The Council did not recommend changes to any targets that were previously set.

For FFY 2019, as a result of diverse stakeholder input and with SICC vetting, the instrument and the methodology for collecting data on Family Outcomes Indicator 4 was changed. The instrument was completely revised and the methodology was modified. January 20, 2021 the SICC met to review all targets; no changes were recommended. However, the SICC did recommend using the FFY 2019 data as new baseline data for Family Outcomes Indicator 4 in the upcoming SPP/APR FFY 2021 - FFY 2025 performance cycle.

#### SICC Special Meeting -- Annual Performance Report (APR) Review

January 20, 2021, the State Interagency Coordinating Council (SICC) met to review the Washington State's Part C State Annual Performance Report. The SICC provided input and requested additional clarification. Some Indicators were discussed in more detail with SICC input integrated into indicator sections as appropriate. The SICC did not directly recommend changes to any targets that were previously set, rather referred a review of the targets to the Data Committee as part of its ongoing data analysis. The Data Committee intends to integrate a racial equity mindset into each of its work plan components throughout FFY 2020.

#### Historical Data

Baseline Year	Baseline Data
2005	

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

**Targets**

FFY	2019
Target>=	

**FFY 2019 SPP/APR Data**

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

Provide additional information about this indicator (optional)

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

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

**10 - Required Actions**

## **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:**

Judy King

**Title:**

Director, Family Support Programs

**Email:**

judy.king@dcyf.wa.gov

**Phone:**

360-464-0272

**Submitted on:**

04/23/21 6:12:19 PM