

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2021

Virginia



PART C DUE
February 1, 2023

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

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.

In order to ensure general supervision of Virginia's Part C early intervention system, the State Lead Agency employs a full-time Early Intervention Program Manager; a full-time Early Intervention Team Leader, who is responsible for oversight of the monitoring and supervision team, requirements and timelines; 3 full-time Monitoring Consultants, one of whom is also responsible for dispute resolution; 3 full-time Technical Assistance Consultants; and a full-time Data Manager.

Implementation of federal and state Part C early intervention requirements and evidence-based practices is supported by state regulations that were signed by the Governor in December 2014, a Practice Manual, and an annual contract between the State Lead Agency and each local lead agency. Technical assistance and professional development are in place to ensure local administrators, local system managers and providers are aware of and understand the requirements and expectations.

All local systems are monitored on each State Performance Plan indicator annually. The State Lead Agency has also implemented a topic-focused monitoring process that addresses both quality and compliance and includes both desk review and on-site monitoring with all local lead agencies. The length of each topical monitoring cycle has not yet been determined since this is a relatively new process, and the follow-up phase of the initial cycle was interrupted by the COVID-19 pandemic. Additional monitoring or more extensive monitoring (drill-down) may be triggered through the dispute resolution process, local system performance on an indicator, or the local system's determination status. Ongoing monitoring for compliance on related Part C requirements occurs through all interactions with local systems (technical assistance, self-reporting by local systems, requests for additional funds, etc.).

The State Lead Agency monitors local systems using a variety of data sources, including, but not limited to, the following: data from the statewide early intervention data system; family survey data; on-site monitoring; desk audits; dispute resolution findings; and tracking of timely submission of local data.

Each of the three Monitoring Consultants is assigned to work with local systems in two regions of the state, and each Monitoring Consultant is paired with a Technical Assistance Consultant who works in those same regions. This process allows the Monitoring Consultants to become familiar with local system and regional issues impacting compliance with Part C requirements and/or results for children and families and, therefore, promptly identify and work with their Technical Assistance partner to correct noncompliance and/or improve results. Correction of non-compliance and improved results for children and families are facilitated by individualized improvement planning with the local system, and may include requiring a written improvement plan with prescribed status checks to ensure expected progress.

A system of enforcements is also in place. Enforcements are imposed when noncompliance extends beyond one year. Targeted technical assistance is required for all local systems that do not correct areas of noncompliance in a timely manner. The focus of the targeted technical assistance is on capacity building and overcoming barriers to compliance. Since noncompliance beyond one year affects the local system's annual determination status, additional enforcements may be imposed based on their determination. Enforcement options available to the State Lead Agency include, but are not limited to, the following:

- Conduct on-site activities (training, technical assistance, record reviews, meetings with staff and/or providers, etc.) with the Local System Manager as needed and appropriate;
- Conduct on-site activities that include the Local System Manager's supervisor;
- Conduct on-site activities that include the local lead agency's administration;
- Complete focused monitoring site visit(s) on area(s) of noncompliance;
- Increase frequency of improvement plan status check-ins;
- Require targeted technical assistance and/or training;
- Require development/revision of the local system's annual staff development plan to include professional development related to the area(s) of noncompliance;
- Require the Local System Manager to collect and analyze data and review it with their Technical Assistance and/or Monitoring Consultant at a frequency determined with the State Lead Agency;
- Require the local system to complete additional record reviews at a frequency determined with the State Lead Agency and with verification by the State Lead Agency;
- Link to another local system that demonstrates promising practices in the identified area(s) of noncompliance;
- Require a meeting with the local lead agency administration and the State Part C Program Manager, Technical Assistance and Monitoring Consultants to discuss barriers to compliance, improvement plan strategies, and how the State Lead Agency can further assist the local system;
- Report noncompliance to the administration of the local lead agency explaining that it may be necessary to redirect or withhold funds if timely improvement is not shown;
- Conditionally approve the local contract;
- Require the local lead agency to direct use of Part C funds to areas that will assure correction of noncompliance;
- Withhold a percentage of the local system's funds;
- Recover funds;
- Withhold any further payments to the local lead agency; and
- Terminate the contract with the local lead agency.

In addition to oversight of programmatic requirements, Virginia's General Supervision system includes fiscal monitoring and accountability. Adherence to the Part C fiscal requirements is required through the State Lead Agency contract with the local lead agencies. Compliance with Part C fiscal

requirements is monitored through multiple mechanisms. First, local budgets are required annually and are reviewed by the State Lead Agency. Next, expenditure reports are required from local lead agencies twice a year and must include revenues and expenditures from the local lead agency and all private providers. Finally, the local contract requires local lead agencies to notify the State Lead Agency of anticipated budget shortfalls, including supporting documentation of need, specific reasons for need and efforts to secure other available funding, upon the identification of the potential financial need. Not only does this assist in oversight of federal and state Part C dollars, but it also ensures the State Lead Agency becomes aware of any reduction in other state funding (State Developmental Services dollars, for example) or local funding that occurs at the local system level.

Infrastructure within the State Lead Agency ensures assignment of responsibilities and a process for providing oversight of fiscal requirements. One person reviews contracts as they are submitted; Technical Assistance Consultants and Monitoring Consultants review budgets and budget revisions; and there is both a programmatic (early intervention staff) and fiscal office review of expenditure reports. The Early Intervention Office and Fiscal Office within the State Lead Agency work closely together through review of the expenditure reports to identify any potential fiscal issues and follow-up quickly to address questionable data. In addition, Community Services Board local lead agencies undergo independent single audits annually. Audit reports go to the State Lead Agency's Office of Budget and Finance, which then completes monitoring desk audits. The Part C early intervention office receives a copy of the report if any identified issues are related to Part C.

Technical Assistance System:

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

The primary mechanism for technical assistance and support to local early intervention systems is the technical assistance team. The State Lead Agency employs three full-time Technical Assistance Consultants who work directly with local systems across Virginia. Each Technical Assistance Consultant is assigned to two regions of the state. This allows the Technical Assistance Consultant to get to know the local systems and the region and provides the local system manager with a specific person to contact for support and questions. When working with a local system, the Technical Assistance Consultant may work with the local system manager, local lead agency administrators, service providers, private contractors, local public agencies and/or the local interagency coordinating council. In addition to working individually with local systems to address local issues, each Technical Assistance Consultant holds monthly regional meetings with local system managers to facilitate two-way information sharing, group learning and collaborative problem-solving.

Beyond the direct support provided by the Technical Assistance Consultants, local systems receive technical assistance through the following mechanisms: bi-monthly conference calls with all local system managers and State Lead Agency staff; the Infant & Toddler Connection of Virginia website and the Virginia Early Intervention Professional Development website; a monthly written update from the State Lead Agency that includes answers to frequently asked questions, policy clarification, monitoring information and information on evidence-based practices and child and family outcomes; written information combined with statewide webinars (recorded for those unable to attend) and teleconference calls to ensure all local system managers and/or providers have the opportunity to hear the same information when new policies or practices are introduced and explained; and other written technical assistance and guidance.

Technical assistance and monitoring are closely linked functions in the Infant & Toddler Connection of Virginia system. Each Technical Assistance Consultant partners with one of the state Monitoring Consultants in supporting their assigned local systems. In addition, monitoring activities are one source for identifying statewide technical assistance needs as well as the technical assistance needs of individual local systems and specific regions. In order to facilitate consistent information going to local systems, consistent planning for regional meetings, and team problem-solving, the state technical assistance and monitoring teams meet together twice a month to share information about current local system needs and issues and to identify areas for statewide focus (e.g., child and family outcomes, implementation of evidence-based practices, etc.).

Professional Development System:

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

The State Lead Agency contracts with the Partnership for People with Disabilities at Virginia Commonwealth University for the development and implementation of professional development for the Part C early intervention system. The following mechanisms are in place to ensure service providers have the skills to effectively provide services that improve results for infants and toddlers with disabilities and their families:

- An early intervention certification process that ensures providers are qualified within their discipline and have the basic knowledge and competencies necessary to serve infants and toddlers with disabilities and their families prior to employment in the Virginia early intervention system. In order to receive early intervention certification, providers must complete and pass competency tests for a series of state-required online modules that address child development, family-centered and evidence-based practices, Virginia's early intervention system, and provider responsibilities. In order to maintain their early intervention certification, providers must complete at least 30 hours of professional development applicable to early intervention every three years. Service coordinators also must complete the state-provided service coordination training within twelve (12) months of initial early intervention certification.
- Varied professional development resources that include written documents, videos, webinars, online modules, in-person training, landing pads, laminated quick-reference cards, and "tools of the trade" to support local system managers and providers in delivering evidence-based practices. This variety of mechanisms for delivering professional development is designed to appeal to varied adult learning styles and maximize access to resources.
- A state website dedicated to early intervention professional development with varied and abundant state and national resources on evidence-based practices.
- An Integrated Training Collaborative that coordinates Virginia's Comprehensive System of Personnel Development for early intervention. Its members represent families, local system managers, providers, university faculty, other state initiatives that support young children and families, and staff from the State Lead Agency.
- A blog, *EI Strategies for Success*, maintained by the professional development team. The blog addresses day-to-day issues associated with early intervention services. This can be helpful to individual providers and also can be used at the local level for professional development and team discussion.
- Relationships with two-year and four-year university faculty in early intervention-related fields. There is a web page on the Virginia early intervention professional development website dedicated to faculty and future early interventionists.
- Collaboration with other agencies and initiatives focused on professional development for providers serving young children and families to ensure a broad, community-based focus for training, expanded partnerships and awareness of other community programs and resources among participants, and shared planning and funding.
- Regular communication between the professional development, technical assistance and monitoring teams to ensure planned professional development addresses priority issues identified through monitoring and technical assistance.

Broad Stakeholder Input:

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

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

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

YES

Number of Parent Members:

24

Parent Members Engagement:

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

The State Lead Agency contracts with the Arc of Virginia to employ a New Path Family Support Director for early intervention. This individual participates on workgroups associated with the State Systemic Improvement Plan, helps identify and support other parents to participate on the state ICC and on workgroups, and gathers input from other parents to bring to workgroups and meetings. The State Lead Agency also collaborates with Virginia's Parent Training and Information Center, PEATC, to identify and support parent participants for SSIP workgroups and to gather/report other parent feedback.

Through the ICC, workgroups and leadership teams, twenty-four parents were directly engaged in setting targets, analyzing data, implementing improvement activities and/or evaluating progress in FFY 2021. In some cases, these parents had gathered input from other families and reflected that additional information in their feedback. At each quarterly meeting in FFY 2021, the State ICC engaged in discussions about targets, data, SSIP improvement activities and/or evaluating progress. During a state ICC meeting on December 14, 2022, ICC members reviewed data on each indicator and discussed and approved targets for each performance indicator. The State ICC includes nine parent representatives. The SSIP State Leadership Team includes five parents (one-third of the total membership) who partnered with other team members and the State Lead Agency to oversee implementation of the SSIP, evaluate progress and determine the need for revisions. Parents also participated on workgroups tasked with addressing specific SSIP improvement strategies. The frequency of workgroup meetings varies from monthly to quarterly.

The number of parents actively engaged in this work decreased from last year because a number of last year's participants were engaged in providing one-time input through a survey related to improvement planning but were not interested in ongoing engagement through workgroups. DBHDS is working with PEATC to identify and engage additional families for new workgroups that will begin work in 2023. PEATC is using a mini survey and connections through other groups and committees to identify interested families. In addition, the Part C Coordinator and PEATC will be jointly hosting an information session for families in January 2023 about opportunities to participate in state-level workgroups and available support for that engagement.

Activities to Improve Outcomes for Children with Disabilities:

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

The New Path Family Support Director orients and supports new parent members on the state ICC and workgroups to ensure they have the information and background information necessary to actively and confidently participate. Veteran parent members of the ICC also provide this kind of support to new parent members. For all ICC and workgroup meetings, information is presented in a way that supports all participants in developing a shared understanding of the work, the data, etc. Ample time is allotted for questions and a contact person is identified for group members to reach out to with any questions before or after meetings.

PEATC, Virginia's Parent Training and Information Center, applied for and was accepted to be part of the Family Data Leadership Project that will be led by the Center for IDEA Early Childhood Data Systems (DaSy) and the Center for Parent Information and Resources (CPIR) and assist Parent Centers in recruiting and training families to understand and use data and become vital, involved stakeholders around change that impacts infants and toddlers with disabilities. PEATC is particularly interested in training a diverse group of families to actively engage in SSIP work and is collaborating closely with the State Lead Agency in planning these efforts.

Soliciting Public Input:

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

A previous section of the Introduction identifies the varied methods used to solicit broad stakeholder input. The primary mechanism for soliciting public input for setting targets, analyzing data, developing improvement strategies and evaluating progress is the Infant & Toddler Connection of Virginia website. The Monthly Update is posted there and routinely includes information about SSIP strategies, progress and contact information for questions/input. There is a dedicated SSIP section on the website. This section includes workgroup meeting notes, draft documents and evaluation reports for public review. Annually, following the December meeting of the state ICC, the draft SPP/APR and SSIP are posted to the Infant & Toddler Connection of Virginia website and available for public comment for a minimum of 2 weeks prior to those reports being finalized.

Opportunities for public input also are frequently publicized through the New Path website, Virginia's Parent Training and Information Center, and social media outlets.

Making Results Available to the Public:

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

The draft and final SPP/APR, including the SSIP, are posted on the Infant & Toddler Connection of Virginia website to ensure public access to final decisions about targets, data analysis, improvement strategies and evaluation results.

During development and implementation of the SSIP, summaries of stakeholder input and evaluation results are posted to the SSIP section of the website along with decisions made based on that input and evaluation data.

Meeting notes and handouts for workgroup meetings and state ICC meetings also are posted on the Infant & Toddler Connection of Virginia website.

Reporting to the Public:

How and where the State reported to the public on the FFY 2020 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2020 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

Virginia publicly reported on the performance of each local system by posting the required data in the "About ITCVA" section of the Infant & Toddler Connection of Virginia website and by disseminating that information to and through local systems and participating State agencies. Public reporting of state and local results also included dissemination through the Arc of Virginia - New Path Family Support Network list serve, website and Facebook page and sharing results with various advocacy and stakeholder groups.

Virginia's complete State Performance Plan/Annual Performance Report also is available in the "About ITCVA" section of the Infant & Toddler Connection of Virginia website.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

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

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	72.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	97.24%	96.94%	96.77%	95.73%	99.05%

Targets

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

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
626	871	99.05%	100%	95.29%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Over the past year the State Lead Agency has received an increasing number of anecdotal reports pertaining to provider shortages in multiple disciplines. These reports have come from all regions of the state; the data for FFY 2021 further provides evidence of shortages. These provider shortages are occurring at the same time Virginia is experiencing significant increases in child count. At the time of our annual record review (detailed below), fourteen (14) localities were noncompliant with this indicator. Two localities with significant provider shortages accounted for 45% of the system delays in timely start of services. Correction of noncompliance has since been verified for eleven (11) of the 14 local systems that had noncompliance identified on this indicator in FFY 2021.

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.

204

Provide reasons for delay, if applicable.

Exceptional family circumstances that resulted in untimely services included child/family ill, family scheduling preference, temporarily lost contact, and disaster/severe weather. System reasons for delays included provider unavailability and instances where no reason was documented.

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).

In order to be considered timely, the first date of service must be within 30 days of the date the parent signs the IFSP (providing consent for the services).

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Data for FFY 2021 is based on monitoring data from all forty (40) local Part C early intervention systems in Virginia. The records of children who had an initial, periodic or annual IFSP developed on or after October 1, 2021, but no later than December 31, 2021, were reviewed to determine compliance with the requirement for timely start of services. The State Lead Agency randomly selected the children whose records were to be reviewed by the local system. The number of records to be reviewed was based on the local system's annual child count for the period 12/02/2020 - 12/01/2021:

- Annual count 0-200: 14 records reviewed
- Annual count 201-800: 22 records reviewed
- Annual count 801+: 30 records reviewed

The total number of infants and toddlers in the record review pool with an initial IFSP or an annual or periodic IFSP with new services added was 871.

Provide additional information about this indicator (optional)

Although Virginia reported less than 100% compliance with this indicator in FFY 2020, the state did not identify any findings of noncompliance (see table below). The five (5) local systems that were below 100% compliance at the time of the FFY 2020 annual record review were able to document (and the State verified) their correction of that noncompliance prior to the State issuing a finding of noncompliance. Verification of this pre-finding correction included verification that, based on updated data, the local system was now implementing the regulatory requirement correctly and that each individual case of noncompliance had been corrected.

- The State Lead Agency selected a random sample of either 3 or 5 records (depending on the size of the local system) of children with recent IFSPs and IFSP reviews with new services added, and the local system submitted the documentation from those records showing start of services and the reasons for any delay in meeting the 30-day timeline for timely start of services. State staff members reviewed the documentation in order to verify that these EIS programs are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008; and
- State Part C staff used record review data documenting the actual start date for each service to verify that for each instance of noncompliance at the time of the annual record review, the child did begin receiving the services listed on his/her IFSP, though late. The State Lead Agency has verified that each of these EIS programs initiated services for each child, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

1 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

N/A

1 - OSEP Response

1 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	99.00%

FFY	2016	2017	2018	2019	2020
Target>=	98.00%	98.00%	98.00%	98.00%	98.00%
Data	99.92%	99.96%	93.75%	94.23%	97.07%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	98.00%	98.00%	98.00%	98.00%	98.00%

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	10,438
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	11,133

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
10,438	11,133	97.07%	98.00%	93.76%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

The total count of children reported under Section 618 in Virginia, and listed in the pre-populated data above, includes children under age 3 served under Part B with an IEP. However, Virginia's targets and actual data for each year are based on the count of those children served under Part C with an IFSP. Using that data, the number of infants and toddlers with IFSPs who primarily received early intervention services in the home and community-based settings was 10,101, the total number of infants and toddlers with IFSPs was 10,194, and Virginia's percentage for Indicator 2 for FFY 2021 is 99.09%. Therefore, Virginia met the FFY 2021 target and showed no slippage.

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

Although the State's FFY 2021 data represent slippage from the FFY 2020 data and the State did not meet its FFY 2021 target for this indicator, the State did not, as required, provide an explanation of slippage.

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2018	Target>=	64.10%	64.10%	66.00%	64.94%	64.94%
A1	64.93%	Data	66.05%	66.28%	64.93%	63.78%	61.63%
A2	2018	Target>=	63.30%	63.30%	65.00%	57.55%	57.55%
A2	57.54%	Data	60.71%	60.05%	57.54%	54.27%	51.00%
B1	2018	Target>=	68.30%	68.30%	70.00%	68.74%	68.74%
B1	68.73%	Data	70.10%	69.96%	68.73%	68.04%	65.39%
B2	2018	Target>=	51.50%	51.50%	54.00%	46.93%	46.93%
B2	46.92%	Data	49.62%	48.69%	46.92%	44.63%	40.49%
C1	2018	Target>=	70.70%	70.70%	73.00%	68.57%	68.57%
C1	68.56%	Data	70.38%	70.16%	68.56%	67.59%	63.32%
C2	2018	Target>=	55.20%	55.20%	57.00%	50.74%	50.74%
C2	50.73%	Data	53.84%	54.10%	50.73%	49.99%	44.65%

Targets

FFY	2021	2022	2023	2024	2025
Target A1>=	64.94%	64.94%	64.94%	64.94%	65.78%
Target A2>=	57.55%	57.55%	57.55%	57.55%	59.54%
Target B1>=	68.74%	68.74%	68.74%	68.74%	70.04%
Target B2>=	46.93%	46.93%	46.93%	46.93%	48.92%
Target C1>=	68.57%	68.57%	68.57%	68.57%	69.59%

Target C2>=	50.74%	50.74%	50.74%	50.74%	51.99%
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FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

6,339

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	6	0.09%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,829	28.85%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,288	20.32%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,867	29.45%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,349	21.28%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,155	4,990	61.63%	64.94%	63.23%	Did not meet 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	3,216	6,339	51.00%	57.55%	50.73%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	7	0.11%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,930	30.45%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,818	28.68%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,990	31.40%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	593	9.36%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,808	5,745	65.39%	68.74%	66.28%	Did not meet target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they	2,583	6,338	40.49%	46.93%	40.75%	Did not meet target	No Slippage

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
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	5	0.08%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2,060	32.50%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,361	21.47%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,261	35.67%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	651	10.27%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,622	5,687	63.32%	68.57%	63.69%	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	2,912	6,338	44.65%	50.74%	45.95%	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	11,111
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.	3,163

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.

Virginia does not require the use of a specific assessment tool(s). Specific procedures and practices related to the child outcome summary process are detailed in the Infant & Toddler Connection of Virginia Practice Manual and summarized here:

AT ENTRY AND EACH ANNUAL IFSP: The assessment narrative section of Virginia's IFSP is organized by the three child outcome areas. The service coordinator facilitates the team summary of assessment results in terms of the three child outcomes (positive social relationships, acquiring and using knowledge and skills, and use of appropriate behaviors to meet needs) and determination and documentation of entry ratings for the three child outcomes for all eligible children.

- Assessment information is derived from multiple sources - results from developmental instruments and observation; the family, including information about the child's performance in relation to the three child outcomes across situations and settings and with different people; and any other source (e.g., childcare provider, medical records, etc.)
- Considering the information above and functional skills of same-aged peers, the team determines the appropriate rating statement for each of the three child outcomes. Since September 2018, teams have been required to use the Decision Tree in determining the appropriate rating.
- The assessment process and documentation of assessment results are the same for all children; however, child outcome rating numbers (1-7) that correspond to the child outcome rating statements are only required to be recorded in ITOTS, the statewide data system, for children who are new to early intervention and who are 30 months or younger at the time of the initial IFSP. This includes children who have received early intervention from other states, but who are new to early intervention in Virginia.
- The entry ratings recorded in ITOTS follow the child. A child who moves within Virginia from one early intervention system to another will already have entry assessment data, and the new local system does not need to do a new entry-level assessment. If a child is discharged from the

Infant & Toddler Connection system and returns within 6 months of leaving the system, then the initial child outcome ratings continue to be used as the entry ratings. If the child is out of the system for more than six months but returns to the system when he/she is still 30 months old or younger, then new entry child outcome ratings are completed.

AT EXIT: The service coordinator ensures exit ratings on all three child outcomes (positive social relationships, acquiring and using knowledge and skills, and use of appropriate behaviors to meet needs) are done prior to exit for all children who had an entry rating AND who have been in the system for 6 months or longer since their initial IFSP (i.e., there have been 6 months between the initial IFSP and the exit assessment). The rating must be done no more than 6 months prior to exit from early intervention. To complete the exit ratings:

- Using information from parent report, an assessment instrument, observation and other sources, and the Decision Tree, determine the child's status (rating) for each of the three child outcomes. A formal assessment is not required. Instead, the provider(s) determines the child's functional status on the three child outcomes through ongoing assessment (which can occur over multiple sessions). The provider must document the child's abilities by filling in an assessment instrument (such as the HELP, ELAP, etc.). The reason for documenting what has been observed through ongoing assessment on an assessment tool is not to generate age levels but to serve as an anchor for the assessment and to provide a standard measure to be used in combination with other assessment sources for determining the child's functional status on the three child outcomes in relation to same-age peers. It is not necessary to use the same instrument that was used for the entry assessment. -OR- Obtain entry ratings from the local school division to use as the exit ratings for the Infant & Toddler Connection system. If Part B entry assessment data is being used for the early intervention exit assessment data, then that Part B assessment information must be available prior to the child's discharge from early intervention.

- The IFSP team considers information from the sources listed above to determine the child's status in relation to same-age peers for all three child outcomes. Unless the exit ratings are being determined and documented as part of an annual IFSP, document the child's functional status on the three child outcomes (including the child outcome rating statement) in a contact note or on an IFSP Review page. Also document the sources of information used in the assessment process. When documenting whether the child has made progress for each child outcome (in order to respond to the yes/no progress question in ITOTS), remember that the answer to that question must always be based on the child's progress since the initial assessment, even if there have been one or more interim assessments. Information to support the yes/no answer to whether the child has made progress may be documented on an IFSP Review page, an annual IFSP or in a contact note(s).

- Since the ratings reflect the child's status at the time of the assessment, it is important to time the exit assessment/rating as close to exit as possible in order to capture results for the full time the child was receiving early intervention services. This may mean using ongoing assessment information to update the ratings just before exit, even if there was an annual IFSP developed within the last 6 months.

The date of the exit assessment is one of the following:

- The last date on which assessment information was collected (e.g., date of the last visit during which ongoing assessment information was documented);

- If completed within the 6 months prior to the child's discharge and it reflects the most up-to-date assessment information available, then the date of the most recent IFSP in which the child outcome ratings were documented; or

- If completed within the 6 months prior to the child's discharge and they reflect the most up-to-date assessment information available and they are available to the local early intervention system by the date of the child's discharge, the date that child outcome entry ratings were determined by the local school division.

Provide additional information about this indicator (optional).

Virginia's statewide early intervention data system (Infant and Toddler Online Tracking System – ITOTS) was permanently taken offline in mid-June 2022 and replaced with a more robust case management system (Tracking, Reporting and Coordinating for Infants and Toddlers – TRAC-IT). As a result, the data reported for Indicator 03 (Child Outcomes) covers an 11-month period (July 1, 2021, through May 31, 2022) instead of a full year.

During that 11-month period:

- 9,654 children exited Virginia's Part C system;

- 6,688 children were in the system for 6 months or greater and, therefore, expected to have exit scores; and

- Exit scores were captured for 6,339 children, for a percentage score of 94.78%.

The denominator for outcome A (6339) is greater than the denominators for indicators 3B and 3C (6338). This attributable to:

a) For one child, insufficient information was captured in our ITOTS data system to allow for an outcome B calculation; and

b) For one child, insufficient information was captured in our ITOTS data system to allow for an outcome C calculation.

Our new statewide data system, TRAC-IT, has been designed to ensure all required information is captured.

3 - Prior FFY Required Actions

None

3 - OSEP Response

In reporting the percent of infants and toddlers who were functioning within age expectations in each outcome area by the time they turned three years of age or exited the program, the State reported 6339 as the denominator in outcome A, 6338 as the denominator in outcome B, and 6338 as the denominator in outcome C. Additionally, the State reported 6339 infants and toddlers with IFSPs were assessed. The State explained this discrepancy.

3 - Required Actions

In the FFY 2022 SPP/APR submission, the State must explain any discrepancies between the FFY 2022 total number assessed and the FFY 2022 denominator in its calculation of the percent of infants and toddlers who were functioning within age expectations in each outcome area by the time they turned three years of age or exited the program.

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

Report the number of families to whom the surveys were distributed and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

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

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2011	Target>=	76.40%	76.40%	80.00%	76.12%	74.98%
A	72.30%	Data	79.55%	76.01%	76.12%	74.98%	76.52%
B	2011	Target>=	74.40%	74.40%	77.00%	73.59%	71.88%
B	###C04BBA SEDA TA###	Data	75.65%	74.34%	73.59%	71.88%	73.14%
C	2011	Target>=	84.90%	84.90%	88.00%	85.44%	85.85%

C	81.90 %	Data	88.66%	85.74%	85.44%	85.85%	86.31%
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Targets

FFY	2021	2022	2023	2024	2025
Target A>=	74.98%	74.98%	74.98%	74.98%	77.98%
Target B>=	71.88%	71.88%	71.88%	71.88%	75.88%
Target C>=	85.85%	85.85%	85.85%	85.85%	88.85%

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	9,257
Number of respondent families participating in Part C	1,869
Survey Response Rate	20.19%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	980
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,262
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	934
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,262
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	1,104
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,262

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	76.52%	74.98%	77.65%	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)	73.14%	71.88%	74.01%	Met target	No Slippage

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	86.31%	85.85%	87.48%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

Virginia's Indicator 4 family outcome data is based on results from an annual administration of the NCSEAM survey. A survey is sent to all families enrolled on December 1. A second mailing is sent about 4 weeks later to those families who did not respond to the first mailing. Finally, the contract agency attempts to contact by phone families who have not yet responded to the survey and who reside in localities that have fewer than 15 completed surveys after the second-wave mailing.

In order to ensure the family outcomes results reported in the SPP/APR are representative of the population of families served in Virginia's early intervention system, the evaluator uses the following process to select a statistically valid random sample:

Step 1: Determine the Analytic Sample Size for Each Race/Ethnicity Category. With knowledge of Virginia's early intervention population percentage in each race/ethnicity category, the first step involves determining the actual analytic sample size that will be used for each race/ethnicity category. To accomplish this, a trial and error process is used to arrive at the analytic sample size for each race/ethnicity category that satisfies the condition that the analytic sample size for each race/ethnicity category is less than or equal to the observed sample size for each race/ethnicity category (i.e., the analytic sample size for each race/ethnicity category cannot exceed the actual sample size for the race/ethnicity category having an IFS measure, a complete survey). The resulting number of respondents included in the analytic sample for each race/ethnicity category is referred to here as N(category). For example, the number of respondents in the analytic sample having the race/ethnicity category of White would be denoted by N(White).

Step 2: Assign a Random Outcome. Each respondent in the total sample having a valid IFS measure is assigned a random outcome from a 0/1 uniform distribution. This random number (outcome) can range between 0 and 1, and can be any value between 0 and 1. For example, it can be 0.2876, or 0.8921, or 0.0008, etc. In addition, by virtue of being drawn from a uniform distribution, each possible value between 0 and 1 is equally likely to be assigned (i.e., 0.2876 is just as likely to be assigned as is 0.8921 or 0.0008, etc.). The resulting random number assigned to each respondent will be referred hereafter as U. Thus, each respondent is assigned a value of U randomly, and U will range between 0 and 1 such that each possible value between 0 and 1 is equally likely to be assigned. This form of assignment of U to each respondent ensures that each respondent within a given race/ethnicity category in the total sample has an equal chance of being selected for the final analytic sample.

Step 3: Select Respondents for the Analytic Sample. Within each race/ethnicity category, respondents are ordered from lowest to highest with respect to U, and the first N(category) respondents are selected for inclusion in the analytic sample. For example, if N(White) = 502, then the first 502 respondents in the race/ethnicity category of White (i.e., the 502 respondents in the White race/ethnicity category having the lowest values of U) would be selected for the analytic sample. The ordering of the respondents with respect to U within each race/ethnicity category accomplishes the random selection of respondents to the analytic sample.

Virginia is working with our family survey contractor and family survey data analyst to review and revise our sampling methodology based on the Office of Special Education Programs (OSEP) Part C Sampling Plan Checklist.

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

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

The State Lead Agency will use the strategies described later in this section to increase the response rate for those groups that are underrepresented. While working toward an overall response pool that is more representative of the demographics of families served in the Part C program, Virginia will continue to use a representative sample in reporting results for Indicator 4 to ensure the data the State is acting upon are representative of the population served.

Survey Response Rate

FFY	2020	2021
Survey Response Rate	20.04%	20.19%

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

At its December 2022 meeting, the State Interagency Coordinating Council expressed renewed interest in developing and implementing strategies to increase the response rate year over year, particularly for those groups that are underrepresented. Because of the many COVID-related stressors on local systems, providers and families, it has been difficult to engage stakeholders in this work over the past two years. However, new parent representatives (welcomed in December 2022) seem particularly engaged in this topic.

Virginia will implement the following strategies:

1. Continue to participate in the Family Outcomes Data Community of Practice facilitated by the Early Childhood Technical Assistance Center (ECTA) to learn from national technical assistance providers and other states. This community of practice is currently focusing on response rate, representativeness and equity.
2. Review methods of response (paper, online or phone) and demographic data to identify response patterns and preferences.
3. Conduct focus groups with families representing Virginia's diverse races/ethnicities and regions to understand why families do or do not respond to the family survey and what changes to the survey tool and/or procedures would promote an increased response rate and a more representative response.
4. Explore with stakeholders, including families and leaders in underrepresented groups, how pre-survey outreach and communication can better convey the value of each family's unique perspective and how the survey results are used.

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

Virginia's family survey uses the Impact on Families Scale developed and validated by the National Center for Special Education Accountability Monitoring (NCSEAM).

Surveys were mailed to all families (9,821) who were receiving early intervention supports and services as of December 1, 2021. Surveys were returned (via mail, online submission or phone) by 1,869 families receiving early intervention services. This represents a response rate of 19.03%. When the number of surveys sent is reduced by the number returned due to incorrect or insufficient addresses (564), the response rate is 20.19%.

Families have the choice of receiving the survey by email or mail. Surveys are sent by email/mail in two waves that are sent out approximately 1 month apart. A total of 428 completed surveys were returned from the first wave mailing efforts (4.6% of all families). Another 314 completed surveys were returned from the second wave mailing (an additional 3.4% of all families). A total of 1054 families completed the web-based version of the survey (11.4% of families). Finally, families in localities with fewer than 15 completed surveys after the second wave mailing received follow-up calls for an additional 73 surveys completed via phone.

The survey is available in seven (7) languages other than English. Six (6) of these languages were available for the first time in FFY 2019 and were added to reflect the languages spoken by families served in Virginia's early intervention system. In FFY 2021 a total of 90 surveys were completed in Spanish, representing 20.1% of the families the statewide data system indicated should receive the survey in Spanish. When the number of surveys sent is reduced by the number returned due to bad or insufficient addresses (14), the response rate is 20.7%. Of the other six languages available for the survey, a total of one (1) survey was completed (in Arabic).

As indicated in the demographic analysis presented in the next section of this report, the race/ethnicity of respondents and non-respondents do differ. Analyzing the results of the survey based on all responses would skew the results toward the experiences of families who identify their child as White or More Than One Race and would not adequately capture the voice of families who identify their child as Black/African American or Hispanic. For that reason, results on the Indicator 4 family outcomes are based on a sample of the total responses that is representative of the race/ethnicity of families served in Virginia's early intervention system.

At this time, Virginia is unable to analyze nonresponse bias beyond race/ethnicity as there is currently no feasible way to connect those families who do respond to the survey with other demographic information about those children and families. Despite this shortcoming, Virginia has taken steps to reduce potential nonresponse bias and promote survey responses from a broad cross-section of families who received Part C services:

- The survey is available in the languages predominantly spoken by families in Virginia's early intervention system;
- There are multiple methods for distributing and returning the survey;
- Families completing the survey are entered into a drawing to win one of three \$100 gift cards; and
- Phone surveys are attempted in those local systems with fewer than 15 completed surveys after the second wave mailing to ensure representation from all areas of the Commonwealth.

Other steps that will be taken include the following:

1. As the State Lead Agency works with stakeholders to evaluate Virginia's family survey tool and process (as described in a previous section), attention will be given to understanding and addressing potential nonresponse bias and strategies to promote equitable survey access and response rates from the full cross-section of families served.
2. Once Virginia's new statewide data system, TRAC-IT, is fully implemented in December 2023, we will explore how family survey respondents can be connected to other demographic data in TRAC-IT in order to better identify and analyze nonresponse bias. If needed, Virginia will consider adding or revising the demographic questions on the family survey itself as an interim or alternative step for collecting this information.

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

The demographics of families responding to the FFY 2021 survey were representative of the demographics of infants, toddlers and families served in Virginia's Part C system in several ways:

- Geographically – All 40 local systems were represented.
- Gender – 60.6% of survey respondents had a male child (compared to 62% of the population served); 36.8% were female, compared to 38% of the population served.
- Race/ethnicity of the child – The percent of respondents who identified their child: as Asian was 5.0% compared to 5.7% served; as American Indian or Alaskan Native was 0.3% compared to 0.1% served; and as Pacific Islander or Hawaiian Native was 0.2% compared to 0.1% served.

For the remaining race/ethnicity categories, the families responding to the survey were not representative of the families served in Part C.

- Families who identified their child as Black/African-American were under-represented in the survey responses received (13.5% of responses compared to 20.0% served).
- Families who identified their child as Hispanic were under-represented in the survey responses received (8.8% of responses compared to 11.9% served).
- Families who identified their child as White were over-represented in the survey responses received (56.5% of responses compared to 51.4% of families served).
- Families who identified their child as two or more races were over-represented in the survey responses received (14.7% of responses compared to 10.8% of families served).

To ensure the family outcome data is representative of the population served, Virginia uses a representative sample of the total responses received in order to calculate the state results for all parts of Indicator 4. From the 1,869 responses to the FFY 2021 family survey, a random sample of 1,262 families reflecting the distribution of race/ethnicity in the population served in early intervention was selected for data analysis. The race/ethnicity of children in the representative sample was 51.8% White (matching the percent served), 19.9% Black/African-American (matching the percent served), 11.8% Hispanic/Latino (matching the percent served), 11.3% two or more races (matching the percent served), 5.0% Asian (matching the percent served), 0.1% American Indian or Alaskan Native (matching the percent served, and 0.2% served Pacific Islander or Hawaiian Native (matching the percent served). Although not selected specifically for gender, the representative sample was also representative of the gender of children receiving services under Part C in Virginia (Male 62.4% of representative sample; female, 35.5%). In addition, the representative sample includes families representing all local early intervention systems in Virginia. The sample of 1,262 families exceeds the minimum number required for an adequate confidence level based on established survey sample guidelines, providing a high degree of confidence that the results of the survey accurately reflect the degree to which families have achieved the outcomes in Indicator 4.

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

Virginia used +/- 3% discrepancy as the metric to determine representativeness.

Provide additional information about this indicator (optional).

Once Virginia has met a target and maintained that target level for one year, increases in the targets for the remaining years of the SPP/APR cycle are considered. Since the FFY 2020 and FFY 2021 results exceeded the FFY 2019 target (set for the first five years of the current SPP/APR 6-year cycle), with FFY 2021 exceeding FFY 2020 results, at its December 2022 meeting the State Interagency Coordinating Council discussed raising the targets for Indicator 4A-C. However, after reviewing five years of data, the recommendation was made to continue monitoring this outcome for at least one additional year to allow for possible fluctuations.

4 - Prior FFY Required Actions

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

Response to actions required in FFY 2020 SPP/APR

N/A

4 - OSEP Response

OSEP's response to the State's initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover regarding the submission.

The State did not analyze the response rate to identify potential nonresponse bias or identify steps taken to reduce any identified bias to promote response from families participating in early intervention services, as required by the Measurement Table. The State reported it is "unable to analyze nonresponse bias beyond race/ethnicity as there is currently no feasible way to connect those families who do respond to the survey with the same children and families within our system."

4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 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.

In the FFY 2022 SPP/APR, the State must analyze the response rate to identify potential nonresponse bias and report on steps taken to reduce any identified bias and promote response from a broad cross section of families.

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs.

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.51%

FFY	2016	2017	2018	2019	2020
Target >=	1.20%	1.20%	1.26%	1.58%	1.44%
Data	1.38%	1.50%	1.58%	1.83%	1.35%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	1.64%	1.83%	1.83%	1.83%	1.90%

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	1,485

Source	Date	Description	Data
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	92,468

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,485	92,468	1.35%	1.64%	1.61%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

N/A

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	1.72%

FFY	2016	2017	2018	2019	2020
Target >=	2.76%	2.89%	2.89%	3.54%	3.20%
Data	3.18%	3.29%	3.54%	3.62%	3.29%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	3.43%	3.62%	3.62%	3.62%	3.77%

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	11,133
Annual State Resident Population Estimates for 6 Race Groups (5 Race	06/28/2022	Population of infants and toddlers birth to 3	287,996

Source	Date	Description	Data
Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021			

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
11,133	287,996	3.29%	3.43%	3.87%	Met target	No Slippage

Provide additional information about this indicator (optional).

N/A

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	98.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.91%	97.51%	99.70%	96.88%	98.71%

Targets

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

FFY 2021 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,654	2,626	98.71%	100%	97.14%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

Although there was some slippage from the previous year, Virginia's compliance with this indicator remains high. Once again, though, anecdotal reports of provider shortages in multiple disciplines are being further supported by the data. At the time of Virginia's annual record review (detailed below), eight (8) localities were noncompliant with this indicator. Two localities with significant provider shortages accounted for 86.7% of the system delays in this indicator. Correction of noncompliance has since been verified for four (4) of the 8 local systems that had noncompliance identified on this indicator in FFY 2021.

Number of documented delays attributable to exceptional family circumstances

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

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Provide reasons for delay, if applicable.

Exceptional family circumstances that resulted in delays in the 45-day timeline included child/family ill, family scheduling preference, temporarily lost contact, and disaster/severe weather. Systems reasons were provider unavailability or instances where no reason was documented.

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 reflects all children referred from October 1, 2021, through December 31, 2021, and evaluated and assessed and for whom an IFSP meeting was required to be conducted.

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

Although the data collected for FFY 2021 were from the second quarter of the fiscal year, Virginia has determined that these data accurately reflect data for infants and toddlers with IFSPs for the full fiscal year based on the following:

- The Commonwealth's compliance percentage was similar each year from FFY 2008 through FFY 2012 (97% - 99%) when data were collected in the second quarter of the fiscal year as they were in FFY 2007 (98%) when data were from the fourth quarter. There appears to be no difference in performance at different times of the year.
- The data collected in FFY 2021 included all children who were referred in the given quarter who were evaluated and assessed and for whom an initial IFSP meeting was required to be conducted. Therefore, the data is representative of all local systems and of the population of children served in Virginia's Part C system in terms of race/ethnicity, gender, age and reason for eligibility.

Provide additional information about this indicator (optional).

Although Virginia reported less than 100% compliance with this indicator in FFY 2020, the state did not identify any findings of noncompliance (see table below). The six (6) local systems that were below 100% compliance at the time of the FFY 2020 annual record review were able to document (and the State verified) their correction of that noncompliance prior to the State issuing a finding of noncompliance. Verification of this pre-finding correction included verification that, based on updated data, the local system was now implementing the regulatory requirement correctly and that each individual case of noncompliance had been corrected.

- The State Lead Agency selected a random sample of either 3 or 5 records (depending on the size of the local system) of children recently referred, and the local system submitted the documentation from those records confirming the referral dates, initial IFSP meeting dates and the reasons for any delay in meeting the 45-day timeline for the initial IFSP meeting. State staff members reviewed the documentation in order to verify that these EIS programs are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008; and

- State Part C staff used record review data documenting each instance of noncompliance at the time of the annual record review to verify that an initial IFSP meeting was held, though late, for the child or that the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

7 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

N/A

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, 2021 - June 30, 2022). 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = [(# 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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	86.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	82.85%	96.19%	97.79%	97.60%	98.43%

Targets

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

FFY 2021 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
455	502	98.43%	100%	99.20%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

43

Provide reasons for delay, if applicable.

Exceptional family circumstances for untimely transition plans included family scheduling preference, late referral to Part C, child/family illness and disaster/severe weather. System reasons included system delays in developing the transition plan or instances where no reason was documented.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Data for FFY 2021 is based on monitoring data from all 40 local systems in Virginia and was gathered through record reviews. The State Lead Agency randomly selected the children whose records were to be reviewed for each local system from those children who exited early intervention between August 1, 2021, and December 31, 2021. The number of records to be reviewed was based on the number of children in the local system who exited early intervention between August 1, 2021, and December 31, 2021, with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined.

- 0-9 children exited: All records reviewed
- 10-20 children exited: 10 records reviewed
- 21-100 children exited: 15 records reviewed
- 101-300 children exited: 20 records reviewed
- 301+ children exited: 30 records reviewed

Provide additional information about this indicator (optional)

Although Virginia reported less than 100% compliance with this indicator in FFY 2020, the state did not identify any findings of noncompliance (see table below). The six (6) local systems that were below 100% compliance at the time of the FFY 2020 annual record review were able to document (and the State verified) their correction of that noncompliance prior to the State issuing a finding of noncompliance. Verification of this pre-finding correction included verification that, based on updated data, the local system was now implementing the regulatory requirement correctly and that each individual case of noncompliance had been corrected.

- The State Lead Agency selected a random sample of either 3 or 5 records (depending on the size of the local system) for children who recently transitioned from Part C with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined, and the local system submitted the documentation from those records showing completion of all 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. State staff members reviewed the documentation in order to verify that these EIS programs are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008.
- State Part C staff used record review data documenting each instance of noncompliance at the time of the annual record review to verify that the child had transition steps and services added to the IFSP, though late, or that the child had already transitioned out of the Part C early intervention system by the time the noncompliance was identified, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

8A - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

N/A

8A - OSEP Response

8A - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

- Percent = [(# 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.
- 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.
- 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 timely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	89.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	93.16%	96.39%	96.20%	97.30%	94.76%

Targets

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

FFY 2021 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
480	502	94.76%	100%	98.77%	Did not meet target	No Slippage

Number of parents who opted out

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

16

Provide reasons for delay, if applicable.

Exceptional family circumstances for untimely transition notifications included family scheduling preference, late referral to Part C, and disaster/severe weather. System reasons included system delays in sending the notification or instances where no reason was documented.

Describe the method used to collect these data.

Data for FFY 2021 is based on monitoring data from all 40 local Part C systems in Virginia and was gathered through local record reviews. The number of records reviewed and the process for selecting local records for review are described below in the section on methods used to select EIS programs for monitoring.

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

YES

If yes, is the policy on file with the Department? (yes/no)

YES

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Data for FFY 2021 is based on monitoring data from all 40 local systems in Virginia and was gathered through record reviews. The State Lead Agency randomly selected the children whose records were to be reviewed for each local system from those children who exited early intervention between August 1, 2021, and December 31, 2021. The number of records to be reviewed was based on the number of children in the local system who exited early intervention between August 1, 2021, and December 31, 2021, with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined.

- 0-9 children exited: All records reviewed
- 10-20 children exited: 10 records reviewed
- 21-100 children exited: 15 records reviewed
- 101-300 children exited: 20 records reviewed
- 301+ children exited: 30 records reviewed

Provide additional information about this indicator (optional).

N/A

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

Typically, in order to verify correction of noncompliance on Indicators 8A, 8B and 8C, the State Lead Agency selects a random sample of either 3 or 5 records (depending on the size of the local system) of children who had recently transitioned out of early intervention, and the local system submits the documentation from those records showing the transition steps and services, notification and/or transition conference and the reasons for any deviation from the required timeline for the given transition activity. State staff members review the documentation in order to verify that the local system is now correctly implementing the transition requirement.

However, in this instance, the EIS program demonstrated, and the State Lead Agency verified, correction of noncompliance during the subsequent annual record review. Please see "State Monitoring" above for a description of this annual record review process.

The State Lead Agency has verified that based on updated data, the EIS program with noncompliance identified in FFY 2020 and reported by Virginia

under this indicator in the FFY 2020 APR is correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

For the local system with a finding of noncompliance on Indicator 8B, state Part C staff used record review data to verify that for each instance of noncompliance involved in a FFY 2020 finding, transition notification occurred, though late, unless the child had already transitioned out of the Part C early intervention system by the time the noncompliance was identified. The State Lead Agency has verified that the EIS program with noncompliance identified in FFY 2020 and reported by Virginia in the FFY 2020 APR has completed the transition notification for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

8B - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

N/A

8B - OSEP Response

8B - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = [(# 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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	87.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	79.01%	97.43%	98.39%	98.68%	98.08%

Targets

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

FFY 2021 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
182	502	98.08%	100%	100.00%	Met target	No Slippage

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

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

274

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.

46

Provide reasons for delay, if applicable.

Exceptional family circumstances for untimely transition conferences included family scheduling preference, late referral to Part C, child/family illness and disaster/severe weather. System reasons included system delays in scheduling and instances where no reason was documented.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Data for FFY 2021 is based on monitoring data from all 40 local systems in Virginia and was gathered through record reviews. The State Lead Agency randomly selected the children whose records were to be reviewed for each local system from those children who exited early intervention between August 1, 2021, and December 31, 2021. The number of records to be reviewed was based on the number of children in the local system who exited early intervention between August 1, 2021, and December 31, 2021, with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined.

- 0-9 children exited: All records reviewed
- 10-20 children exited: 10 records reviewed
- 21-100 children exited: 15 records reviewed
- 101-300 children exited: 20 records reviewed

Provide additional information about this indicator (optional).

Although Virginia reported less than 100% compliance with this indicator in FFY 2020, the state did not identify any findings of noncompliance (see table below). The one (1) local system that was below 100% compliance at the time of the FFY 2020 annual record review was able to document (and the State verified) their correction of that noncompliance prior to the State issuing a finding of noncompliance. Verification of this pre-finding correction included verification that, based on updated data, the local system was now implementing the regulatory requirement correctly and that each individual case of noncompliance had been corrected.

- The State Lead Agency selected a random sample of either 3 or 5 records (depending on the size of the local system) for children who recently transitioned from Part C with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined, and the local system submitted the documentation from those records showing the transition conference was 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. State staff members reviewed the documentation in order to verify that these EIS programs are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008.
- State Part C staff used record review data documenting each instance of noncompliance at the time of the annual record review to verify that the transition conference occurred, though late, or that the child had already transitioned out of the Part C early intervention system by the time the noncompliance was identified, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

8C - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

N/A

8C - OSEP Response

8C - Required Actions

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below.

Virginia has not adopted Part B due process procedures.

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 ED*Facts* Metadata and Process System (EMAPS)).

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

Virginia has not reached the OSEP-identified threshold (10 mediations in a year) that requires targets to be set.

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2021. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

11 - Indicator Data

Section A: Data Analysis

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

As a result of implementing the SSIP, Virginia will increase the percentage of infants and toddlers who substantially increase their rate of growth in the area of positive social-emotional skills (including social relationships) by the time they exit early intervention.

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

YES

Provide a description of the system analysis activities conducted to support changing the SiMR.

As Virginia approached the end of the previous SSIP cycle, the State Lead Agency worked with a variety of stakeholders to review and analyze child and family outcome data for the past five years, consider infrastructure and related factors, review SiMRs selected by other states in the first SSIP cycle, and weigh pros and cons of possible SiMRs (including the possibility of continuing with the same SiMR selected in the first SSIP cycle). Two data analysis and SiMR input sessions were offered for families, three for local system managers and providers, one for state Part C staff, and one for the State Interagency Coordinating Council. All groups reviewed the same set of data and followed the same process for analysis and input. The State Interagency Coordinating Council was the last group to complete this process and, after doing their own data analysis, also reviewed input previously gathered from families, local system managers and providers before making their final recommendation.

Please list the data source(s) used to support the change of the SiMR.

In deciding to change the SiMR, Virginia considered child and family outcome results data from our statewide data system; Virginia's child and family outcome results compared to national results; completeness of child outcome data; response rate and representativeness for family survey results; family outcome results by race/ethnicity; anecdotal information from families, local administrators and providers based on their experiences; SiMRs selected by other states in the first SSIP cycle; input from other states about their ability to impact their selected SiMR; infrastructure factors and other statewide early childhood initiatives in Virginia; and availability of evidence-based practices specific to each child and family outcome.

Provide a description of how the State analyzed data to reach the decision to change the SiMR.

During each data analysis and SiMR input session, the stakeholder group reviewed and discussed child outcome data and then responded to this question: Based on your experience and the data, if Virginia was going to select a child outcome for our SiMR, what outcome should we select and why?" The same process was used to consider and identify a family outcome. Each group then considered pros and cons and voted on whether Virginia should select the identified child outcome or the family outcome and why. All stakeholder groups selected the same child outcome (positive social-emotional skills) and the same family outcome (helping the family help their child develop and learn). Similarly, with all groups, the vote was evenly split between selecting the child outcome or the family outcome.

Ultimately, based on data and stakeholder input, Virginia decided to focus on increasing the percentage of infants and toddlers who substantially increase their rate of growth in the area of positive social-emotional skills (including social relationships) by the time they exit early intervention for the following reasons:

- While Virginia's results in Indicator 3A – Summary Statement 1 have been equal to the national average, they are lower than Virginia's results for Summary Statement 1 on Indicators 3B and 3C;
- Research has widely documented the pandemic's impact on the social-emotional well-being of children and families and highlighted how critical positive social-emotional skills and social relationships are to progress in other developmental areas;
- It is the topic local system managers and providers most frequently and consistently identify in professional development needs assessments;
- The State Lead Agency for Part C is the Department of Behavioral Health and Developmental Services; and there are existing, related projects and programs to leverage in Virginia, including Early Childhood Mental Health Virginia, Virginia Association for Infant Mental Health, and Early Impact Virginia (home visiting);
- Virginia is already prioritizing and investing in infant and early childhood mental health initiatives within and beyond early intervention;
- There are extensive national resources available to support this work;
- There are evidence-based practices that specifically address positive social-emotional skills and social relationships. The general evidence-based practices selected and implemented in Virginia's original SSIP improved practices but did not result in achieving the SiMR. Having an evidence-based practice that specifically addresses the SiMR was a top priority for the new SSIP.
- The new SiMR allows Virginia to build upon and leverage the work completed in the first SSIP cycle since evidence-based caregiver coaching and assessment practices, a consistent child outcome summary process and the infrastructure improvements made are still relevant.

Please describe the role of stakeholders in the decision to change the SiMR.

A variety of stakeholders actively participated in the data and infrastructure analyses and discussions that led to the decision to change the SiMR. Participants included families, local system managers, service coordinators and other providers, and members of the State Interagency Coordinating Council. The State Lead Agency collaborated with the New Path Family Support Director to hold two family input sessions on Zoom and (simultaneously) Facebook Live to analyze child and family outcome data, evaluate progress over time and prioritize areas for improvement. These sessions were advertised through the New Path listserv, website and Facebook page. Information about the sessions and a later reminder were also sent to all local system managers with a request that they disseminate to all families. The Facebook Live sessions were recorded and remained available to be viewed later on the New Path Facebook page. Since COVID prevented in-person options at the time, local system managers and providers were able to choose from three Zoom input sessions. The State Interagency Coordinating Council participated in the data analysis and input process during a quarterly meeting.

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

NO

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

YES

Please provide a description of the changes and updates to the theory of action.

A new Theory of Action was developed with stakeholder input to address the new SiMR.

Please provide a link to the current theory of action.

<https://static1.squarespace.com/static/59a023cfbe42d6bbb81d66a5/t/61b8e99a6163b834202867a5/1639508378204/Theory+of+Action+2022.pdf>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2018	64.93%

Targets

FFY	2021	2022	2023	2024	2025
Target>=	64.94%	64.94%	64.94%	64.94%	65.78%

FFY 2021 SPP/APR Data

# of infants and toddlers who substantially increased their rate of growth in Outcome 3A by the time they turned 3 years of age or exited the program	# of infants and toddlers with IFSPs assessed	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
3,155	4,990	44.65%	64.94%	63.23%	Did not meet target	No Slippage

Provide the data source for the FFY 2021 data.

Data is from Virginia's statewide early intervention data system.

Please note: The FFY 2020 data (44.65%) in the table above is from the previous SiMR but could not be edited. The FFY 2020 data for the new SiMR is 61.63%

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

Virginia's SiMR is the same as Indicator 3A, summary statement 1. Procedures used to assess each child's functional skills and progress in the area of positive social-emotional skills (including social relationships) are described in Indicator 3 of this report. Based on those procedures, entry and exit data are entered into the state early intervention data system. Virginia analyzes data quality using the pattern checking tools recommended by national technical assistance centers. Phase I implementation of Virginia's new statewide early intervention data system, TRAC-IT, does not allow for effective analysis of SiMR results based on demographic factors and collects no delivered service data to use in further analysis. Once the full set of required fields are implemented in FFY 2023, TRAC-IT will facilitate more thorough analysis of factors potentially impacting child outcome results (e.g., demographics, delivered services, etc.) and more effective improvement planning.

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

YES

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

As outlined in Virginia's theory of action, progress on infrastructure changes and use of the targeted evidence-based practices are expected to have a positive impact over time on Virginia's SiMR. Therefore, progress on and evaluation of infrastructure and practice changes speak to progress toward the SiMR and are discussed later in this report.

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

The evaluation plan is embedded within Virginia's SSIP:

<https://static1.squarespace.com/static/59a023cfbe42d6bbb81d66a5/t/61b7a7a7c987184363f25343/1639425959806/SSIP2+--+The+Plan+2021-12+DRAFT.pdf>

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

YES

If yes, provide a description of the changes and updates to the evaluation plan.

The details of the evaluation plan have changed to reflect the new SiMR and new improvement strategies and activities. The approach to the evaluation plan has not changed. The plan includes both short-term and long-term indicators of success, data sources and timelines. The short-term indicators of success primarily focus on completion of the step (e.g., product released, webinar conducted, etc.), as designed, and the immediate or short-term (6 – 12 month) use of that product or information. More complex evaluation activities and those indicators reflecting impacts more than 6-12 months from implementation of the steps are identified in the long-term column of the SSIP. More in-depth evaluation is focused on those improvement activities and steps most closely related to the Theory of Action and the SiMR. The evaluation plan is designed to be manageable and efficient given the finite resources (people and money) available at both the state and local level.

If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.

The details of the evaluation plan have changed to reflect the new SiMR and new improvement strategies and activities.

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

As Virginia shifted to a new SiMR, Virginia's SSIP activities in FFY 2021 were primarily focused on the infrastructure necessary to implement and evaluate the use of evidence-based practices for improving infants' and toddlers' positive social-emotional skills (including social relationships).

DATA:

After a year of development work, Virginia launched Phase I of a new statewide early intervention data system TRAC-IT (Tracking, Reporting and Coordinating for Infant and Toddlers) on June 27, 2022. TRAC-IT is a comprehensive electronic health record and case management system with significantly more data fields and functionality than the previous data system, ITOTS. As indicated in Virginia's Theory of Action, an enhanced data system is essential for ensuring necessary data will be available for monitoring, evaluation and improvement planning related to child outcomes at the state and local levels. While Phase I implementation included all data fields, a limited number of those fields are required. Phase II of the TRAC-IT launch will occur in FFY 2023 and will implement the full set of field requirements and validations. Once fully implemented with Phase II, TRAC-IT will facilitate in-depth analysis of child outcomes based on demographics, eligibility reasons, delivered services, etc. This level of analysis has not been possible to date due to the limitations of the previous data system.

PROFESSIONAL DEVELOPMENT AND PERSONNEL:

Virginia implemented several improvement activities in 2022 that are foundational to ensuring all children will receive the supports and services necessary to develop and maintain positive social-emotional skills and social relationships. In order to successfully implement planned changes in social-emotional screening, assessment and service delivery, all practitioners (regardless of discipline) must know they have a role in supporting positive social-emotional development and a nurturing caregiver-child relationship and must have the training and tools to do that. Toward that goal, ten new professional development activities, resources or tools relevant to all early intervention practitioners were released this past year. These new resources covered a variety of topics, including social-emotional developmental milestones, supporting the parent-child relationship, using Eco Maps to understand family relationships, and the intersection of early intervention and infant mental health. Virginia continued to implement the existing Infant Mental Health Endorsement and implemented new strategies (e.g., virtual outreach and a new diversity committee) to increase the diversity of endorsees. Statewide and regional meetings of local systems and the monthly Infant & Toddler Connection of Virginia Update were used to share information and resources for reducing stress and supporting the well-being of Virginia's early intervention practitioners and leaders. Finally, introductory webinars on reflective supervision were offered statewide.

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

Since this was the first year of implementation for the new SiMR and improvement plan, Virginia evaluated achievement based on the short-term indicators of success, monitoring completion of activities and release of products and reviewing evaluation data related to specific activities when available. Ongoing stakeholder feedback and anecdotal data were also critical sources of evaluation information.

DATA:

Leading up to the June 27, 2022 Phase I launch of the new statewide data system, TRAC-IT, Virginia successfully met planned short-term outcomes including development of a data model/dictionary; identification of reports and extracts to support easy reporting and analysis of child outcome data at the state and local levels; and training for users. To support users in learning to use TRAC-IT, Virginia provided a total of fifteen live online overview and role-based training sessions, a "Sandbox" training version of the data system where users can practice, a written user manual, Quick Reference Cards, recorded training, and live office hours. Attendance at the four overview training sessions ranged from 90 – 320 participants. Participants in overview and role-based training included the full range of users: administrators, local system managers, service coordinators, service providers, and fiscal staff. In-session polls at the end of the live training indicated at least 85% of participants felt more confident in using TRAC-IT or felt confident they could figure it out with practice. TRAC-IT represents a significant system change since it is a case management system and standardizes some practices that previously were more flexible and variable at the local level. User feedback on TRAC-IT has been mixed but is trending more positive as people use more of the functions. In addition, as local systems, service coordinators and providers have adjusted to TRAC-IT, they are reporting that it improves timely communication among team members working with a child and family. Once fully implemented with Phase II, TRAC-IT will allow the State Lead Agency and local systems to understand who is and is not benefiting from our efforts to improve child outcomes in the area of positive social-emotional development, what accounts for differences and how to promote equitable outcomes.

PROFESSIONAL DEVELOPMENT AND PERSONNEL:

Virginia has a robust early intervention professional development system, which was strengthened in 2022 with the addition of ten new activities,

resources and tools designed to ensure all practitioners know they have a role in supporting positive social-emotional development and a nurturing caregiver-child relationship and have the training and tools to do so. This information was provided in a variety of evidence-based formats to facilitate access, engage adult learners and support use of the information in practice. Those formats included live and recorded webinars; a podcast; blog posts; a learning path; concurrent conference sessions and a full-day preconference session at Virginia's statewide early childhood conference; short courses; an ECHO (Extension for Community Healthcare Outcomes) learning community on social-emotional development; a statewide virtual Infant and Early Childhood Mental Health conference; and relevant monthly articles in the Infant & Toddler Connection of Virginia Update that goes to a wide range of stakeholders. These activities successfully targeted a broad audience of service coordinators, service providers and local system managers in all parts of Virginia. Evaluation data from these activities indicated they were successful in imparting knowledge and/or supporting practitioners to use that knowledge in their work. For instance, evaluations from the Social-Emotional ECHO found that 99% of participants gained knowledge and/or skills and plan to implement at least one new thing they learned. Similarly, 97% of evaluation respondents indicated they had gained knowledge and skills from the two-part webinar series on using ECO Maps to Understand Family Relationships, 99% indicated the webinars would have a positive impact on their work, and 99% indicated they learned about practical strategies they can use.

As a result of new strategies implemented this year to increase the diversity of Infant Mental Health endorsees, the 2022-2023 endorsement cohort is the most diverse to date.

Having a sufficient, sustainable and accessible workforce of highly effective and diverse practitioners to support children's positive social-emotional development is a critical component of Virginia's theory of action, and the short-term outcomes achieved over the past year directly relate to achieving the SIMR and to Virginia's ability to make and sustain system improvements.

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

NO

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

Data and stakeholders continue to identify professional development, personnel, and the data system as key components of the system framework that impact provider practices and, ultimately, child and family outcomes.

DATA:

Virginia expects to launch Phase II (full implementation) of TRAC-IT in FFY 2023. In conjunction with that effort, the State Lead Agency will develop and implement a schedule and process for state-level review and analysis of child outcome data from the new data system and address analysis and use of local child outcomes data on increasing positive social-emotional skills (including social relationships) to support data quality and program improvement through structured support in regional meetings, statewide meetings, and/or webinars. In addition, in the next reporting period, Virginia will begin developing a new focused monitoring protocol on Indicator 3A (positive social-emotional skills, including social relationships) for use with all local systems.

PROFESSIONAL DEVELOPMENT AND PERSONNEL:

During the next reporting period, Virginia will work to identify and implement strategies to increase the diversity of the early intervention workforce; identify and implement strategies to recruit and retain early intervention personnel with mental health expertise as well as personnel in other fields (OT, PT, SLP, education, etc.) with the knowledge and skills to support positive social-emotional development for all children; collaborate with the State Medicaid Agency to add Infant and Early Childhood Mental Health endorsed practitioners and others with appropriate mental health qualifications to the list of providers approved to deliver Medicaid-reimbursed early intervention services, explore options for reimbursement for services to the caregiver, and increase early intervention reimbursement rates; and build Virginia's reflective supervision capacity to support all early intervention practitioners.

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

Since this was the first year of implementation for Virginia's new SSIP/SIMR, the activities implemented during the reporting period included the State Lead Agency collaborating with stakeholders to identify the evidence-based practices that will be implemented in subsequent years to address positive social-emotional skills and social relationships. A stakeholder group began and is continuing to review available social-emotional screening and assessment tools and the screening and assessment practices used in other states in order to make recommendations about evidence-based social-emotional screening and assessment tools and practices for Virginia. The State Lead Agency also worked with stakeholders and reviewed practices in other Virginia early childhood programs to select the Pyramid Model as the framework of evidence-based service delivery practices that will be implemented in Virginia.

Virginia continued to implement the evidence-based caregiver coaching and natural learning environment practices that were first implemented as part of Virginia's previous SSIP since these are important practices within the Pyramid Model framework.

Provide a summary of each evidence-based practice.

Pyramid Model - The Pyramid Model is a framework of evidence-based practices for promoting young children's healthy social and emotional development. In this tiered approach, systems provide universal supports to all children to promote wellness, targeted services to those who need more support, and intensive services to those who need them. Resources are now available to specifically support the use of the pyramid model in early intervention.

Within the framework of the Pyramid Model, Virginia continued to implement the evidence-based caregiver coaching and natural learning environment practices already in place. As defined by Dathan Rush and M'Lisa Shelden, coaching is "An adult learning strategy in which the coach promotes the learner's ability to reflect on his or her actions as a means to determine the effectiveness of an action or practice and develop a plan for refinement and use of the action in immediate and future situations." In Virginia, practitioners are expected to implement the early childhood coaching approach described by Rush and Shelden to focus on building the caregiver's capacity to enhance the child's development using everyday interactions and activities. Practitioners support caregivers during EI visits by joining family activities and coaching caregivers as they practice using intervention strategies with their children during everyday routines and activities.

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

As detailed in Virginia's Theory of Action, if providers are consistently using evidence-based screening, assessment and service delivery practices then (1) eligibility, assessment and IFSP teams will have an improved picture of the child's social-emotional skills and social relationships in the context of his or her family; (2) all children will receive supports and services necessary to develop and maintain positive social-emotional skills and social

relationships; and (3) caregivers will receive services, support, information and/or referrals, as needed, to promote their own well-being and ability to meet their child's social-emotional needs. The improvement activities in Virginia's SSIP are designed to impact the SiMR by building the state-level expectations (policies) for use of the evidence-based practices, the capacity (knowledge and skills) of providers to implement these evidence-based practices, the capacity of local systems to deliver ongoing support to providers in using these practices, and the fidelity measures necessary to know these practices are being delivered as intended.

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

During the reporting period, Virginia continued to collect data on fidelity to the caregiver coaching practices implemented during the previous SSIP cycle. The coaching fidelity assessment process includes both self-assessment and observation. All observation data is reported to the State Lead Agency annually. In FFY 2021, there were 562 coaching fidelity observations conducted statewide. Results showed increased use of all components of coaching compared to the previous year. For five of the twelve components included on Virginia's fidelity checklist, the percentage of practitioners who used the practice was over 98%.

Fidelity tools and fidelity assessment processes for new evidence-based practices that will be implemented to address Virginia's new SiMR are among the next steps outlined in Virginia's SSIP.

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

N/A

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

Evidence-based screening and assessment tools and practices – During the next reporting period, Virginia expects to establish recommended and/or required practices for use of a social-emotional screening tool(s) as part of eligibility determination and for ongoing developmental monitoring; establish recommended and/or required practices for use of a social-emotional assessment tool(s) as part of initial and ongoing child assessment and additional questions for the family assessment tool. While considering evidence-based tools and practices, the State Lead Agency and stakeholders will examine inequities/bias in eligibility determination and assessment practices and tools and explore screening or assessing for other factors that impact infants' and toddlers' social-emotional development, such as parental depression, anxiety, trauma, parent-child interaction, attachment and temperament. Recommended practices also will include the role of eligibility and/or assessment team members with Infant Mental Health or related expertise.

Pyramid Model – Now that Virginia has identified the framework for service delivery to support positive social-emotional skills and social relationships, next steps include identifying any additional evidence-based practices necessary and developing an implementation plan, including identifying professional development activities and resources needed to support implementation. Related activities will include strengthening state practice manual language, guidance and support for documenting family outcomes on the IFSP and identifying services and supports to meet those outcomes; establishing practices for accessing clinical-level treatment, including evidence-based dyadic treatment, when needed (e.g., when to access, who determines the need, who provides it, etc.); and identifying, and sharing statewide, strategies for using Infant or Early Childhood Mental Health endorsed practitioners, LCSWs and other mental health specialty providers effectively throughout the early intervention process to support children, families and other providers.

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

NO

If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.

The only changes are to timelines, particularly in Broad Improvement Strategy 1 (screening and assessment) and Broad Improvement Strategy 2 (evidence-based service delivery). Because preparation for and adjustment to the new statewide data system was very time-intensive at the state and local levels, the State Lead Agency paused work on these other strategies for six months to focus available resources on TRAC-IT. Those paused activities have now resumed. For that reason and because Phase II of TRAC-IT will launch in FFY 2023 (with related change management impacts), several timelines have been pushed back.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The State Lead Agency has had in place and continues to use multiple mechanisms for sharing data with and soliciting broad stakeholder input and engagement on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):

- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Statewide meetings and regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- Virginia's Parent Training and Information Center, PEATC, which collaborates with DBHDS to identify and support families to engage in data analysis and improvement planning through SSIP workgroups and leadership teams;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences;
- Meetings and joint planning sessions with other early childhood programs and groups, like home visiting and early childhood mental health; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2021, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in planning, evaluation and decision-making related to the SPP/APR targets and implementation of the SSIP.

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

Mechanisms for ongoing communication include a SSIP section on the state website and written monthly updates. Beyond being informed of SSIP work, stakeholders were actively engaged in the work, serving on work groups, review groups and the State Leadership Team (one-third of whom are parents) that were involved with implementing SSIP activities and evaluating progress. The state Interagency Coordinating Council (ICC) was updated on and discussed SSIP implementation at each of their quarterly meetings. Other mechanisms to support stakeholder engagement included discussion during statewide and regional meetings, participation on subject matter expert small groups, and opportunities for evaluation/feedback via surveys and web discussions. Participants included families, service providers, service coordinators, local system managers, local lead agency administrators, state agencies, institutes of higher education faculty and state ICC members. Stakeholder group meeting notes were posted in the SSIP section on the Infant & Toddler Connection of Virginia website and available for broader stakeholder review and input.

Among other activities over the past year, stakeholders have reviewed and provided input on professional development resources and the functionality of the new statewide data system; researched and presented findings on available social-emotional screening and assessment tools; piloted new early intervention-specific Pyramid Model modules/training to inform state decisions; and reviewed progress on and evaluated the need for revisions to the SSIP activities.

Stakeholders also participated with the Part C Coordinator and State Infant and Early Childhood Mental Health (IECMH) Coordinator in a cross-state technical assistance opportunity with the Early Childhood Technical Assistance Center. This technical assistance focused on supporting IECMH policies and practices in early intervention. Stakeholder participants worked with state staff to identify overlapping activities between the SSIP and Virginia's IECMH State Strategic Plan, consider work happening in other states, and ensure there were no gaps in Virginia's plans.

As noted in the Introduction section of this report, the State Lead Agency continued to collaborate with the Arc of Virginia and PEATC (Virginia's Parent Training and Information Center) to increase family engagement in Virginia's SPP/APR, including SSIP work. After pausing work with one workgroup during TRAC-IT roll-out and initial implementation, some family participants on workgroups were no longer able to engage in the work when it resumed. DBHDS worked with PEATC to identify and engage additional families on that workgroup and new workgroups that will begin work in 2023. PEATC is using a mini survey and connections through other groups and committees to identify interested families. In addition, the Part C Coordinator and PEATC will be jointly hosting an information session for families about opportunities to participate in state-level workgroups and available support for that engagement. PEATC applied for and was accepted to be part of the Family Data Leadership Project that will be led by the Center for IDEA Early Childhood Data Systems (DaSy) and the Center for Parent Information and Resources (CPIR) and assist Parent Centers in recruiting and training families to understand and use data and become vital, involved stakeholders around change that impacts infants and toddlers with disabilities. PEATC is particularly interested in training a diverse group of families to actively engage in SSIP work and is collaborating closely with the State Lead Agency in these efforts.

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

NO

Additional Implementation Activities

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

N/A

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

N/A

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

No barriers were identified.

Provide additional information about this indicator (optional).

N/A

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Designated Lead Agency Director

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

Name:

Kyla Patterson

Title:

Early Intervention Program Manager (Part C Coordinator)

Email:

k.patterson@dbhds.virginia.gov

Phone:

804-402-8759

Submitted on:

04/21/23 1:14:51 PM

Determination Enclosures

RDA Matrix

2023 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination¹

Percentage (%)	Determination
81.25%	Meets Requirements

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	8	5	62.50%
Compliance	14	14	100.00%

2023 Part C Results Matrix

I. Data Quality

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

Number of Children Reported in Indicator C3 (i.e., outcome data)	6,339
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	11,111
Percentage of Children Exiting who are Included in Outcome Data (%)	57.05
Data Completeness Score²	1

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

Data Anomalies Score³	2
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II. Child Performance

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

Data Comparison Score⁴	1
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(b) Performance Change Over Time: Comparing your State's FFY 2021 data to your State's FFY 2020 data

Performance Change Score⁵	1
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Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2021	63.23%	50.73%	66.28%	40.75%	63.69%	45.95%
FFY 2020	61.63%	51.00%	65.39%	40.49%	63.32%	44.65%

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

² Please see Appendix A for a detailed description of this calculation.

³ Please see Appendix B for a detailed description of this calculation.

⁴ Please see Appendix C for a detailed description of this calculation.

⁵ Please see Appendix D for a detailed description of this calculation.

2023 Part C Compliance Matrix

Part C Compliance Indicator ⁶	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 1: Timely service provision	95.29%	N/A	2
Indicator 7: 45-day timeline	97.14%	N/A	2
Indicator 8A: Timely transition plan	99.20%	N/A	2
Indicator 8B: Transition notification	98.77%	YES	2
Indicator 8C: Timely transition conference	100.00%	N/A	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

⁶ The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf

Appendix A

I. (a) Data Completeness:

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

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

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

Appendix B

I. (b) Data Quality:

Anomalies in Your State's FFY 2021 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e⁷⁸. In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

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

Outcome A	Positive Social Relationships
Outcome B	Knowledge and Skills
Outcome C	Actions to Meet Needs

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

⁷ Numbers shown as rounded for display purposes.

⁸ Values based on data for States with summary statement denominator greater than 199 exiters.

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

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

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

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

Anomalies in Your State's Outcomes Data FFY 2021

Number of Infants and Toddlers with IFSP's Assessed in your State	6,339
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	6	1,829	1,288	1,867	1,349
Performance (%)	0.09%	28.85%	20.32%	29.45%	21.28%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	7	1,930	1,818	1,990	593
Performance (%)	0.11%	30.45%	28.68%	31.40%	9.36%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	5	2,060	1,361	2,261	651
Performance (%)	0.08%	32.50%	21.47%	35.67%	10.27%
Scores	1	1	1	1	1

	Total Score
Outcome A	5
Outcome B	5
Outcome C	5
Outcomes A-C	15

Data Anomalies Score	2
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Appendix C

II. (a) Data Comparison:

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

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement⁹. Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

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

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

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

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

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

Your State's Summary Statement Performance FFY 2021

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	63.23%	50.73%	66.28%	40.75%	63.69%	45.95%
Points	1	1	1	1	1	1

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

Appendix D

II. (b) Performance Change Over Time:

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

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

Test of Proportional Difference Calculation Overview

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

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

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

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on¹⁰

$$\text{Sqrt}[(\text{FFY}2021\% * (1-\text{FFY}2021\%)) / \text{FFY}2021\text{N}] + ((\text{FFY}2022\% * (1-\text{FFY}2022\%)) / \text{FFY}2022\text{N})] = \text{Standard Error of Difference in Proportions}$$

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

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

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

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

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

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

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

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

¹⁰Numbers shown as rounded for display purposes.

Summary Statement/ Child Outcome	FFY 2020 N	FFY 2020 Summary Statement (%)	FFY 2021 N	FFY 2021 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	5,045	61.63%	4,990	63.23%	1.60	0.0097	1.6561	0.0977	NO	1
SS1/Outcome B: Knowledge and Skills	5,940	65.39%	5,745	66.28%	0.90	0.0088	1.0217	0.3069	NO	1
SS1/Outcome C: Actions to meet needs	5,888	63.32%	5,687	63.69%	0.37	0.0090	0.4177	0.6761	NO	1
SS2/Outcome A: Positive Social Relationships	6,569	51.00%	6,339	50.73%	-0.26	0.0088	-0.2994	0.7646	NO	1
SS2/Outcome B: Knowledge and Skills	6,569	40.49%	6,338	40.75%	0.26	0.0086	0.3018	0.7628	NO	1
SS2/Outcome C: Actions to meet needs	6,569	44.65%	6,338	45.95%	1.30	0.0088	1.4788	0.1392	NO	1

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

FFY 2021 APR¹¹

Part C Timely and Accurate Data -- SPP/APR Data		
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	N/A	0
10	1	1
11	1	1
	Subtotal	12
APR Score Calculation	Timely Submission Points - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	17

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

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

Indicator Calculation	
A. APR Grand Total	17
B. 618 Grand Total	18.00
C. APR Grand Total (A) + 618 Grand Total (B) =	35.00
Total N/A Points in APR Data Table Subtracted from Denominator	1
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	35.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

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

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

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

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

Part C 618 Data

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

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

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

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

How the Department Made Determinations

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

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