State Performance Plan / Annual Performance Report:  
Part C  

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

For reporting on  
FFY18  

PART C DUE February 3, 2020  

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

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

Intro - Indicator Data

Executive Summary
Role of Utah's Lead Agency:

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) oversees Early Intervention (EI) service activities in Utah for infants and toddlers up to three years of age. The BWEIP has multiple mechanisms in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to contracted EI programs.

Lead Agency Engagement with Partners:
The BWEIP solicits ongoing stakeholder discussion and input from groups on setting of policies, development and tracking of data measures, as well as methods for ensuring family awareness, and is always engaging valuable partnerships. The BWEIP continues to be successful in its mission to provide individualized support and services to Utah children and their families.

Quality Performance:
As a goal, the BWEIP remains determined to meet or exceed indicator target levels. Program policies and processes focus on data being timely, complete, and accurate. The BWEIP contracts with EI programs to address data needs and follow through on non-compliance.

State-identified Measurements

The BWEIP tracks a State-identified Measurable Result (SiMR) indicator seeking to substantially increase the rate of growth in positive social-emotional skills (including social relationships) for culturally diverse infants and toddlers with disabilities in Utah by the time they exit Part C. In FY 2018, this measure was determined to be 63.3 percent of children moved closer in functioning to that of same-aged peers, as reflected in Summary Statement 1.

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.

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) oversees Early Intervention (EI) service activities in Utah for infants and toddlers up to three years of age. During FY 2018, BWEIP sub-contracted with 15 programs across Utah to provide EI services. BWEIP maintains and enforces policies to ensure programs are aware of proper processes for services and data tracking. On an ongoing basis, the program performs surveillance and monitoring of EI services performed and program compliance with regulations and data. BWEIP also evaluates family perceptions of services, as well as partners with stakeholders.

BWEIP compliance indicator levels and program quality are ascertained annually using state aggregated data, individual program data, input from partnering stakeholders, or other information. EI programs and the Interagency Coordinating Council (ICC) contribute to determining which focus activities will be reviewed. Focus activities may include off-site and on-site monitoring, as well as any additional activities that are deemed necessary and/or appropriate by the BWEIP. Off-site monitoring refers to the oversight of activities and technical assistance by BWEIP to EI programs to improve program compliance, satisfactory performance, address improvement strategies or corrective actions, or other actions toward timely correction of noncompliance and performance.

On-site monitoring refers to any BWEIP oversight activities of EI programs provided at their locations and that may identify low performance, the need for technical assistance, or improvement strategies to ensure the programs are meeting required activities and timelines set by BWEIP. Intensive activities may be necessary based on issues identified through general or focused monitoring activities, the complaints/resolution system, or other means. On-site monitoring activities include interviews, follow-up monitoring visits as needed, quality assurance reports developed by the local program, and any additional activities determined necessary by the BWEIP.

Through relevant activities, noncompliance may be identified at all levels within the State General Supervision System Framework. If the BWEIP finds noncompliance with any compliance indicator, the EI program responsible is required to create a written notification of the finding of noncompliance. The BWEIP will then require a corrective action (CA) for full correction of all noncompliance from the individual EI program. All noncompliance, once it is identified and notification is given to the EI program, will be corrected as soon as possible, but in no case later than one year from the date of the written notification for findings of noncompliance. The BWEIP requires CA for all noncompliance. If noncompliance is not corrected within one year of the written notification, the BWEIP may impose sanctions and require that the EI program provide detail in the CA on how they will revise necessary policies, procedures, and/or practices that contributed to any noncompliance. The BWEIP will conduct several annual general supervision activities for each EI program to monitor the implementation of the Individuals with Disabilities Act (IDEA) and identify possible areas of noncompliance and low performance. The general activities include: (a) collection and verification of the Baby and Toddler Online Tracking System (BTOTS) data for the SPP/APR compliance and results indicators, (b) program determinations, (c) review of the program data accountability plan, (d) fiscal management, (e) collection and verification of 618 data in BTOTS, and (f) targeted technical assistance and professional development.

The BWEIP will ensure timely dispute resolution through mediation and/or due process. All parties will be allowed to dispute any matter under Part C, including matters arising prior to the filing of a due process complaint, through a mediation process. The mediation process may be requested at any time, and may not be used to deny or delay a parent’s right to a due process hearing or to deny any other rights afforded under Part C. Upon resolution by parties, a legally binding written agreement will be created to enforce confidentiality of all discussions that happened during the mediation process. The agreement will also prohibit the use of mediation documents to be used as evidence in any subsequent due process hearing or civil proceeding. This agreement will include signatures by the parent(s), as well as a representative from the BWEIP who is authorized to bind the agency. Finally, a written statement will be included, expressing that the written and signed agreement is enforceable in any state court of competent jurisdiction or in a district court of the United States.
Funding sources that support the BWEIP are the State Appropriation (State General Fund), IDEA Part C Grant Award, Medicaid, Children's Health Insurance Program (CHIP), and Family Cost Participation Fees. Utah ensures that Federal funds made available to the state under Part C are implemented and distributed in accordance with the provisions of Part C. The BWEIP provides grants to local programs in the state to support and carry out the purposes and requirements of Part C and state regulations. The BWEIP will utilize its established system of payments and fees for EI services under Part C, including a schedule of sliding fees. Fees collected from the child’s family to pay for EI services under the BWEIP’s system of payments will be considered as program income. Finally, if a child is eligible for Medicaid or CHIP, BWEIP can bill these public insurances for EI services received. EI services, as specified in the child’s IFSP, cannot be denied due to a parent’s refusal to allow their public insurance to be billed for such services.

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

Lead Agency Technical Assistance. As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) has multiple mechanisms in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to early intervention (EI) programs. The Utah Part C Program Manager is the official LA liaison for all 15 local EI programs and answers questions from program administrators related to Part C regulations and LA policy and procedures. LA staff are identified as points of contact based on their areas of knowledge and expertise and are the official contacts for program administrative and other staff to answer additional questions and concerns. In June, 2018, BWEIP hired Gregg Reed as the Part C Data Manager. Mr. Reed continues to support the processes used to collect and utilize valid and reliable data, and works with Utah’s EI programs to provide them with program data profiles, compliance indicator determinations, and other technical assistance. BWEIP also employs a Senior Business Analyst to support technical system processes and two Compliance and Monitoring Specialists to ensure programs receive necessary feedback on their operations.

Data System. The LA’s comprehensive, statewide, web-based data system, Baby and Toddler Online Tracking System (BTOTS), is used by all 15 BWEIP local early intervention programs and provides a detailed electronic child EI record from time of referral to exit. LA staff work closely with the BTOTS developer to ensure ongoing fidelity of the database with current Part C regulations, as well as LA policy and procedures. BTOTS generates alerts and reports to inform local programs of timelines for events such as initial Individualized Family Service Plan (IFSP) meetings, new initial IFSP services, and transition conferences. Field definitions were recently written by LA staff and added throughout all areas of the database to include descriptions of the data entry field and associated regulatory and policy references. The LA supports grantees in their understanding and use of BTOTS through conference calls, data system workgroups, user group enhancement meetings, and other feedback meetings as needed. Training and support to local EI program staff and administrators provides updates on development progress, enhancement priorities, system security, etc. In addition, “Frequently Asked Questions” documents, a telephone helpline, and an electronic bug submission system are available to assist end users with the BTOTS system.

National and Local Technical Assistance Resources. LA staff access both national and local (e.g., Early Childhood Technical Assistance Center, The Center for IDEA Early Childhood Data Systems, University of Kansas Early Childhood Personnel Center) and local (e.g., Utah Parent Center) resources to stay current with and research questions about Part C regulations, evidence-based practices, etc.

Conferences and Trainings. The Utah Part C Program Manager, Compliance and Education Team Manager, and Data Team/618 Data Manager all attend OSEP leadership and conferences, as well as other relevant national and local conferences and trainings, to stay current with the field.

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.

TRAINING TO ENSURE EFFECTIVE SERVICES

The Baby Watch Early Intervention Program (BWEIP) maintains policies and procedures to ensure that EI programs are aware of required regulations and service providers are qualified. These policies are available on utahbabywatch.org and include the following:

1. A Comprehensive System of Personnel Development (CSPD) is the primary mechanism for improving the quality of services provided to young children and their families. The CSPD addresses the establishment and maintenance of education, licensing, and credentialing standards for employees delivering early intervention services.

2. The BWEIP has a child find system that provides primary referral sources with training and information about the EI services available to Utah infants and toddlers.

3. The CSPD is comprised of five components including:

   a. Leadership, Coordination, and Sustainability: Coordination of training and resources with other early childhood special education agencies, including the Utah State Board of Education (USBE), and institutions of higher education.

   b. State Personnel Standards: An appropriate system of Utah EI standards, content, and support to assist programs in preparing qualified personnel.

   c. Preservice Personnel Requirement: A minimum of a bachelor’s degree from an accredited higher education institution in a field of study related to EI.

   d. In-service Personnel Development: An approved credentialing program for new employees, based on the Baby Watch Early Intervention Standards.

   e. Recruitment and Retention: Training local EI programs to implement innovative employee recruitment and retention strategies and activities.

EDUCATION AND LICENSING REQUIREMENTS

BWEIP is responsible for ensuring that all EI employees have appropriate and adequate job training. The following education and licensing requirements are consistent with the requirements set by the Utah Division of Occupational & Professional Licensing (DOPL), and the Utah State Board of Education (USBE). The requirements for new direct service personnel include:

a. As of October 1, 2016: before hire, direct service personnel must have a completed bachelor’s degree in a field of study related to EI.

b. Before hire, direct service personnel must have current licensure or certification as required in their respective disciplines from one of the following agencies: • DOPL: Division of Occupational & Professional Licensing • USBE: Utah State Board of Education.
CREDENTIAL OPTIONS

All new hires who will provide direct services or serve as program directors/coordinators are required to earn and maintain a BWEIP credential. Baby Watch has several categories of credentials for Early Intervention, including Early Intervention Specialist; Early Intervention Specialist (Provisional); Professional Authorization; Early Intervention Administrative Certificate; and Early Intervention Administrative Credential.

1. EARLY INTERVENTION SPECIALIST (EIS)

The Early Intervention Specialist (EIS) credential is the credential that most new direct service providers earn through the CSPD system, and is required for all service coordinators. EIS credential is required for all direct service providers, unless they meet the specific criteria for a Professional Authorization or a Provisional credential. The EIS must be renewed every five years.

Before hire, a completed bachelor’s degree in a field related to early intervention is required. Employees are also required to successfully complete all online training topics provided by BWEIP, complete a self-assessment, and set learning priorities for the first six months of employment. They conduct 20+ observations of EI services across all disciplines. Employees are then observed as they conduct and participate in three service visits: eligibility evaluation, IFSP meeting, and a home visit. Pediatric CPR/First Aid certification is required within the first year of employment.

2. EARLY INTERVENTION SPECIALIST (EIS): PROVISIONAL

The Early Intervention Specialist (EIS) provisional credential is issued before hire to undergraduate or graduate students working in direct service roles, and to substitute employees hired on a temporary basis when colleagues are on leave (maternity, medical, disability, etc.). This credential is good for one year. The EI program seeking to employ the student/substitute must submit a provisional credential application, which must be approved by the BWEIP before hire.

3. PROFESSIONAL AUTHORIZATION

Professional Authorizations are issued to licensed direct service providers who work less than 0.5 FTE (20 hrs/wk). Due to the limited nature of their work hours, many EIS credentialing requirements are waived for Professional Authorization holders. Professional Authorization holders cannot provide service coordination and must be less than 0.5 FTE (half time or 20 hours/week). Prior to hire, a completed bachelor’s degree in a field related to early intervention and current DOPL/USBE license must be obtained.

4. EARLY INTERVENTION ADMINISTRATIVE CERTIFICATE

The Early Intervention Administrative Certificate is a professional development option for any employee who does not provide direct services, and is required for all program directors or coordinators who do not have a current Early Intervention Specialist (EIS) credential. Certificate training offers the same foundational knowledge provided to Early Intervention Specialists, but does not require the employee to facilitate home visits and demonstrate service provision skills.

5. EARLY INTERVENTION ADMINISTRATIVE CREDENTIAL

The Early Intervention Administrative Credential is an optional credential available only to current EI program directors or coordinators. A completed master’s degree or 30 semester hours in a field related to early intervention is required.

AUTHORITY

34 CFR §303.13: Early intervention services
34 CFR §303.118: Comprehensive system of personnel development (CSPD)
34 CFR §303.119: Personnel standards
Utah Code, Titles 53A and 58 and the Utah State Board of Education Certification Standards

RELATED DIRECTIVE

BWEIP Policy 1.A.2 Comprehensive System of Personnel Development (available on BWEIP website)

Stakeholder Involvement:

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

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) solicits ongoing stakeholder discussion and input from various groups on setting of policies, development and tracking of data measures, methods for ensuring family awareness. BWEIP is always looking to facilitate valuable partnerships.

Stakeholders have provided input on targets and discussion on data results for indicators 2, 3, 4, 5, and 6 targets for the FFY 2013-2018 State Performance Plan/Annual Performance Report (SPP/APR). On an ongoing basis, the Interagency Coordinating Council (ICC) is presented data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In January 2020, the ICC was consulted on the FFY 2018 APR data and target establishment for FFY 2019.

Meetings have been held to present data and seek involvement from stakeholder groups that are comprised of ICC members, parents, EI Provider Consortium members, and partnering agencies and programs including Utah State Board of Education, Migrant and Homeless, Utah Parent Center, Children with Special Health Care Needs, Early Head Start, Child Protection, The Utah Parent Center, the Office of Home Visiting, Utah Schools for the Deaf and the Blind, Medicaid, CHIP, University Personnel Preparation Centers, Center for Persons with Disabilities and Utah Department of Insurance, and early intervention service coordinators, specialists, therapists and administrators.

During extended ICC meetings, Baby Watch Staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the six-year results indicator’s targets.

On January 22, 2020 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the
Individually with Disabilities Education Act (IDEA) asserting to submit the ICC's own annual report (attached to APR), and confirms provision to our Governor (attached to APR).

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

Reporting to the Public:

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

*The FFY 2017 SPP/APR have been posted on the BWEIP website at utahbabywatch.org under the Reporting tab, State Performance Plan/Annual Performance Reports

*Local EI program profiles of indicator performance have been distributed to providers and posted to the BWEIP website under the local programs section in September 2019 at https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202017%20Program%20Profile%20Summary.pdf. Local BWEIPs received their program determinations and notifications of noncompliance in August 2019.

*Utah's Part C determination from OSEP was posted to the Baby Watch Website in August 2019 at http://health.utah.gov/cshcn/programs/babywatch.html.

Intro - Prior FFY Required Actions
None

Intro - OSEP Response
States were instructed to submit Phase III, Year Four, of the State Systemic Improvement Plan (SSIP), indicator C-11, by April 1, 2020. The State provided the required information. The State provided a target for FFY 2019 for this indicator, and OSEP accepts the target.

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

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

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

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

Targets must be 100%.

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

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

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

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

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

1 - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>98.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td>2013</td>
<td>2014</td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Data</td>
<td>99.84%</td>
<td>100.00%</td>
</tr>
<tr>
<td></td>
<td>99.90%</td>
<td>99.10%</td>
</tr>
<tr>
<td>Targets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFY</td>
<td>2018</td>
<td>2019</td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner</th>
<th>Total number of infants and toddlers with IFSPs</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>5,804</td>
<td>6,203</td>
<td>99.10%</td>
<td>100%</td>
<td>98.40%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.
Include your State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

Timeline for Provision of Services:

Each EI service shall be provided as soon as possible and no later than within forty-five (45) days after the parent provides written consent for that service (Day one (1) of the forty-five (45) days being the day the consent is given).

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).

Full reporting period of July 1, 2018 - June 30, 2019

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSP’s who have received individual early intervention (EI) services from July 1, 2018 to June 30, 2019.

If needed, provide additional information about this indicator here.

Reasons for delays were acquired through stakeholder feedback. Feedback on this indicator during FFY 2018 included: Staff shortage in local EI programs, local EI program visit scheduling and coordination challenges, challenges scheduling a translator, increase in workload due to referrals and intakes, and inconsistent response from families to schedule visits.

Improvement Activities Completed in FFY 2018: During FFY 2018, the timely services indicator report composition and layout was vetted and updated to ensure ease and accuracy with reported requirements. Additional methodology revision was reviewed and anticipated during future SPP baselines and target establishment.

BWEIP encouraged EI providers to run and review BTOTS monitoring reports systematically for the timeliness indicators and bring alerts from the reports to their staff’s attention. These activities were incorporated into all EI providers’ required data accuracy plans. Local EI programs were also encouraged to investigate cases by drilling down to the child level for reasons for delays and make necessary process adjustments to prevent future delayed service provision.

During FFY 2018 contact logs were utilized and deployed through the BTOTS Web database. The contact logs hold detailed information about family and provider circumstances, delays, and contact history. Additionally, input from providers and other stakeholders was utilized to reduce potential data entry error by modifying the database function to clarify visit information and document unique situations where families had declined to schedule a visit. Editing of records for exited children was restricted to certain criteria.

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>42</td>
<td>42</td>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

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

BWEIP reviewed compliance indicator data and developed reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases were reviewed to determine causes. Noncompliant cases were identified in 7 of the 15 Utah early intervention programs during this period. Please see tables attached to APR in order to understand Utah’s templates for corrective action requirements.

The programs implemented quality assurance plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regulatory requirements identified through reports and documentations.

BWEIP discussed, with local EI program administrators, individual cases identified in FFY 2017 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2017 program determination correction plans, as found in the APR attachments.

FFY 2018 cases were also reviewed to identify any continued noncompliance. FFY 2018 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2017 were 42 percent less likely to continue to be noncompliant in FFY 2018.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements.

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

BWEIP contacted each of the local early intervention programs to review data findings from FFY 2017. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance.
Correction of Findings of Noncompliance Identified Prior to FFY 2017

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1 - Prior FFY Required Actions
None

1 - OSEP Response
The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2018 SPP/APR, that the remaining 42 uncorrected findings of noncompliance identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2018 and each EIS program or provider with remaining noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

1 - Required Actions
**Indicator 2: Services in Natural Environments**

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

### 2 - Indicator Data

#### Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>77.90%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FFY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target=&gt;</td>
<td>2013</td>
<td>90.00%</td>
</tr>
<tr>
<td></td>
<td>2014</td>
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<td>2016</td>
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<td>95.59%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>94.42%</td>
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</table>

#### Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target=&gt;</td>
<td>95.00%</td>
<td>95.00%</td>
</tr>
</tbody>
</table>

**Targets: Description of Stakeholder Input**

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) solicits ongoing stakeholder discussion and input from various groups on setting of policies, development and tracking of data measures, methods for ensuring family awareness. BWEIP is always looking to facilitate valuable partnerships.

Stakeholders have provided input on targets and discussion on data results for indicators 2, 3, 4, 5, and 6 targets for the FFY 2013-2018 State Performance Plan/Annual Performance Report (SPP/APR). On an ongoing basis, the Interagency Coordinating Council (ICC) is presented data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In January 2020, the ICC was consulted on the FFY 2018 APR data and target establishment for FFY 2019.

Meetings have been held to present data and seek involvement from stakeholder groups that are comprised of ICC members, parents, EI Provider Consortium members, and partnering agencies and programs including Utah State Board of Education, Migrant and Homeless, Utah Parent Center, Children with Special Health Care Needs, Early Head Start, Child Protection, The Utah Parent Center, the Office of Home Visiting, Utah Schools for the Deaf and the Blind, Medicaid, CHIP, University Personnel Preparation Centers, Center for Persons with Disabilities and Utah Department of Insurance, and early intervention service coordinators, specialists, therapists and administrators.

During extended ICC meetings, Baby Watch Staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the six- year results indicator’s targets.

On January 22, 2020 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to submit the ICC’s own annual report (attached to APR), and confirms provision to our Governor (attached to APR).

#### Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</td>
<td>4,376</td>
</tr>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Total number of infants and toddlers with IFSPs</td>
<td>4,614</td>
</tr>
</tbody>
</table>

**FFY 2018 SPP/APR Data**
The Baby Watch Early Intervention Program (BWEIP) Indicator 2 targets for reporting years FFY 2005 through FFY 2010 were based on “hand collected” data from years prior to the introduction of the Baby and Toddler Online Tracking System (BTOTS) database in 2005. For three of these ten reporting years (FFY 2006 through FFY 2008), the percentage of infants and toddlers with IFSPs receiving early intervention services primarily in home or community-based settings was static at approximately 71.00%. Since these early years, performance on this indicator has successfully increased. Although the FFY 2018 percentage of infants and toddlers with IFSPs receiving early intervention services primarily in home or community-based settings (94.84%) exceeds the FFY 2017 percentage (94.42%), it does not quite meet the FFY 2018 target of 95.00 percent. FFY 2013, FFY 2015, and FFY 2016 are the highest percentages in reporting years FFY 2006 through FFY 2018.

2 - Prior FFY Required Actions
None

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

2 - Required Actions
Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source
State selected data source.

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:
Percent = [(# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d)) divided by (# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d))] times 100.

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

Measurement for Summary Statement 2:
Percent = [(# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e)) divided by (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

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Historical Data

<table>
<thead>
<tr>
<th></th>
<th>Baseline</th>
<th>FFY</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1</td>
<td>2013</td>
<td>Target&gt;=</td>
<td>65.00%</td>
<td>65.50%</td>
<td>66.00%</td>
<td>67.00%</td>
<td>68.00%</td>
</tr>
<tr>
<td>A1</td>
<td>68.18%</td>
<td>Data</td>
<td>68.18%</td>
<td>69.77%</td>
<td>67.45%</td>
<td>63.11%</td>
<td>64.33%</td>
</tr>
<tr>
<td>A2</td>
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<td>Target&gt;=</td>
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<td>54.00%</td>
<td>54.50%</td>
<td>55.00%</td>
<td>55.50%</td>
</tr>
<tr>
<td>A2</td>
<td>55.40%</td>
<td>Data</td>
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<td>58.44%</td>
<td>60.86%</td>
<td>57.91%</td>
<td>59.90%</td>
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<td>B1</td>
<td>2013</td>
<td>Target&gt;=</td>
<td>72.50%</td>
<td>73.00%</td>
<td>73.50%</td>
<td>74.00%</td>
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<tr>
<td>B1</td>
<td>75.44%</td>
<td>Data</td>
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<td>74.17%</td>
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<td>48.50%</td>
<td>49.00%</td>
<td>49.50%</td>
</tr>
<tr>
<td>B2</td>
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<td>Data</td>
<td>50.88%</td>
<td>52.81%</td>
<td>54.04%</td>
<td>52.87%</td>
<td>52.50%</td>
</tr>
<tr>
<td>C1</td>
<td>2013</td>
<td>Target&gt;=</td>
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<td>74.00%</td>
<td>74.50%</td>
<td>75.00%</td>
<td>75.50%</td>
</tr>
<tr>
<td>C1</td>
<td>76.17%</td>
<td>Data</td>
<td>76.17%</td>
<td>74.97%</td>
<td>73.13%</td>
<td>71.31%</td>
<td>71.13%</td>
</tr>
<tr>
<td>C2</td>
<td>2013</td>
<td>Target&gt;=</td>
<td>57.50%</td>
<td>58.00%</td>
<td>58.50%</td>
<td>59.00%</td>
<td>59.50%</td>
</tr>
<tr>
<td>C2</td>
<td>59.19%</td>
<td>Data</td>
<td>59.19%</td>
<td>61.18%</td>
<td>62.22%</td>
<td>60.88%</td>
<td>60.99%</td>
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Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
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<tbody>
<tr>
<td>Target A1&gt;=</td>
<td>69.00%</td>
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</tr>
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</tr>
<tr>
<td>Target B2&gt;=</td>
<td>51.00%</td>
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<td>Target C1&gt;=</td>
<td>76.20%</td>
<td>76.20%</td>
</tr>
<tr>
<td>Target C2&gt;=</td>
<td>60.00%</td>
<td>60.50%</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

3,071

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

#### Number of children and Percentage of Total

<table>
<thead>
<tr>
<th>Category</th>
<th>Number of children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>20</td>
<td>0.65%</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>759</td>
<td>24.72%</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>434</td>
<td>14.13%</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>953</td>
<td>31.03%</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>905</td>
<td>29.47%</td>
</tr>
</tbody>
</table>

#### Numerator, Denominator, FFY 2017 Data, FFY 2018 Target, FFY 2018 Data, Status, Slippage

<table>
<thead>
<tr>
<th>Outcome A: Early Learning and Development (including early language and communication)</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
</tr>
<tr>
<td>Numerator</td>
</tr>
<tr>
<td>1,387</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcome A: Early Learning and Development (including early language and communication)</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
</tr>
<tr>
<td>Numerator</td>
</tr>
<tr>
<td>1,858</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Category</th>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>22</td>
<td>0.72%</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>817</td>
<td>26.60%</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>644</td>
<td>20.97%</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>1,169</td>
<td>38.07%</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>419</td>
<td>13.64%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcome B: Acquisition and use of knowledge and skills (including early language/communication)</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
</tr>
<tr>
<td>Numerator</td>
</tr>
<tr>
<td>1,813</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcome B: Acquisition and use of knowledge and skills (including early language/communication)</th>
</tr>
</thead>
<tbody>
<tr>
<td>B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program</td>
</tr>
<tr>
<td>Numerator</td>
</tr>
<tr>
<td>1,588</td>
</tr>
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</table>

Outcome C: Use of appropriate behaviors to meet their needs

<table>
<thead>
<tr>
<th>Category</th>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>21</td>
<td>0.68%</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>695</td>
<td>22.63%</td>
</tr>
</tbody>
</table>
### Part C

#### Number of Children and Percentage of Total

<table>
<thead>
<tr>
<th>Category</th>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>476</td>
<td>15.50%</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>1,240</td>
<td>40.38%</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>639</td>
<td>20.81%</td>
</tr>
</tbody>
</table>

#### Numerator, Denominator, FFY 2017 Data, FFY 2018 Target, FFY 2018 Data, Status, Slippage

| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | Numerator: 1,716 | Denominator: 2,432 | FFY 2017 Data: 71.13% | FFY 2018 Target: 76.20% | FFY 2018 Data: 70.56% | Status: Did Not Meet Target | Slippage: 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 | Numerator: 1,879 | Denominator: 3,071 | FFY 2017 Data: 60.99% | FFY 2018 Target: 60.00% | FFY 2018 Data: 61.19% | Status: Met Target | Slippage: No Slippage |

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

| The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s part C exiting 618 data | 4,614 |
| 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. | 1,489 |

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.

Utah’s Part C early intervention programs used the Early Childhood Outcomes Center (ECO) method of assigning a score to each child outcome measure. The BWEIP Child Outcome Summary Form (BWEIP COS) is used to document the process, and includes a rational statement that explains and supports the score given. The BWEIP COS is completed upon the child’s entry and exit from EI services. Scores for the BWEIP COS are entered into the Baby Toddler Online Tracking System (BTOTS) database, and used to calculate progress that each child makes. Child outcome entry data is collected for all children with an IFSP. Child outcome exit data is collected for all children under IFSP, provided that they have received six consecutive months of EI services at the time of exit from EI.

Provide additional information about this indicator *(optional)*

In regards to A1, B1, and C1 not meeting established targets, Utah will continue to address this through several means:

1) Discussion with stakeholders and programs

2) Change of tool used to complete the ECO rating

3) Emphasis on providing services to children whose functioning is at a level nearer to same-aged peers, but not quite meeting. BWEIP will continue to encourage conversation with parents to ensure that although their children may be meeting outcomes, parents are informed about their child’s next developmental milestones and encouraged to utilize Utah’s 12 months of eligibility.

During FFY 2018, the number of exiting infants and toddlers who **DID** receive early intervention services for at least six months before exiting the Part C program was calculated by summing the TOTAL NUMBER OF CHILDREN HAVING AN EXIT SCORE (3071) and the NUMBER OF CHILDREN WHO RECEIVED SERVICES FOR AT LEAST SIX MONTHS WITH NO EXIT SCORE (54), equating to 3125. The number of exiting infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program was calculated by subtracting 3125 from the TOTAL NUMBER OF ALL CHILDREN EXITING DURING FFY 2018 in alignment of 618 data (4923), equating to 1798.

### 3 - Prior FFY Required Actions

*None*
3 - OSEP Response
The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

OSEP notes that when reporting on the number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program, the State reported in the data field that there were 4,614 infants and toddlers who exited the Part C program during the reporting period. However, in the narrative, the State reported that 4,923 is total number of children who exited the Part C program during FFY 2018. Because of this discrepancy, OSEP cannot determine the number of exiting infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

3 - Required Actions
Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

4 - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th></th>
<th>Baseline</th>
<th>FFY</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td></td>
<td>Target</td>
<td>84.00%</td>
<td>84.50%</td>
<td>85.00%</td>
<td>85.50%</td>
<td>86.00%</td>
</tr>
<tr>
<td>A</td>
<td>76.00%</td>
<td>Data</td>
<td>87.71%</td>
<td>87.73%</td>
<td>88.56%</td>
<td>88.69%</td>
<td>95.85%</td>
</tr>
<tr>
<td>B</td>
<td></td>
<td>Target</td>
<td>82.00%</td>
<td>82.25%</td>
<td>82.50%</td>
<td>82.75%</td>
<td>83.00%</td>
</tr>
<tr>
<td>B</td>
<td>73.00%</td>
<td>Data</td>
<td>86.13%</td>
<td>85.86%</td>
<td>86.62%</td>
<td>87.19%</td>
<td>93.72%</td>
</tr>
<tr>
<td>C</td>
<td></td>
<td>Target</td>
<td>92.00%</td>
<td>92.10%</td>
<td>92.20%</td>
<td>92.30%</td>
<td>92.40%</td>
</tr>
<tr>
<td>C</td>
<td>83.00%</td>
<td>Data</td>
<td>92.12%</td>
<td>92.45%</td>
<td>94.08%</td>
<td>93.31%</td>
<td>96.24%</td>
</tr>
</tbody>
</table>

Targets

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target A&gt;=</td>
<td>86.50%</td>
<td>90.00%</td>
</tr>
<tr>
<td>Target B&gt;=</td>
<td>83.25%</td>
<td>88.00%</td>
</tr>
<tr>
<td>Target C&gt;=</td>
<td>92.50%</td>
<td>93.00%</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) solicits ongoing stakeholder discussion and input from various groups on setting of policies, development and tracking of data measures, methods for ensuring family awareness. BWEIP is always looking to facilitate valuable partnerships.

Stakeholders have provided input on targets and discussion on data results for indicators 2, 3, 4, 5, and 6 targets for the FFY 2013-2018 State Performance Plan/Annual Performance Report (SPP/APR). On an ongoing basis, the Interagency Coordinating Council (ICC) is presented data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In January 2020, the ICC was consulted on the FFY 2018 APR data and target establishment for FFY 2019.
Meetings have been held to present data and seek involvement from stakeholder groups that are comprised of ICC members, parents, EI Provider Consortium members, and partnering agencies and programs including Utah State Board of Education, Migrant and Homeless, Utah Parent Center, Children with Special Health Care Needs, Early Head Start, Child Protection, The Utah Parent Center, the Office of Home Visiting, Utah Schools for the Deaf and the Blind, Medicaid, CHIP, University Personnel Preparation Centers, Center for Persons with Disabilities and Utah Department of Insurance, and early intervention service coordinators, specialists, therapists and administrators.

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**FFY 2018 SPP/APR Data**

<table>
<thead>
<tr>
<th>The number of families to whom surveys were distributed</th>
<th>4,357</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of respondent families participating in Part C</td>
<td>1,601</td>
</tr>
<tr>
<td>A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights</td>
<td>1,203</td>
</tr>
<tr>
<td>A2. Number of responses to the question of whether early intervention services have helped the family know their rights</td>
<td>1,253</td>
</tr>
<tr>
<td>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</td>
<td>1,148</td>
</tr>
<tr>
<td>B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children’s needs</td>
<td>1,228</td>
</tr>
<tr>
<td>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</td>
<td>1,188</td>
</tr>
<tr>
<td>C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn</td>
<td>1,232</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FFY 2018 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)</td>
<td>95.85%</td>
<td>86.50%</td>
<td>96.01%</td>
<td>Met Target</td>
</tr>
<tr>
<td>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)</td>
<td>93.72%</td>
<td>83.25%</td>
<td>93.49%</td>
<td>Met Target</td>
</tr>
<tr>
<td>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)</td>
<td>96.24%</td>
<td>92.50%</td>
<td>96.43%</td>
<td>Met Target</td>
</tr>
</tbody>
</table>

Was sampling used?

NO

Was a collection tool used?

YES

If yes, is it a new or revised collection tool?

NO

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

YES

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

NCSEAM Survey Utilized for FFY 2018 Data Collection

The Utah Department of Health adopted the standards recommended by NCSEAM as a way of obtaining the percentages to be reported for Indicators 4a, 4b, and 4c. To establish a recommended standard, NCSEAM utilized a group of nationally representative stakeholders, including parents of children with disabilities, state directors of special education, state early intervention coordinators, district and program personnel, advocates, attorneys, and community representatives.

Through April and May 2019, the Utah Department of Health, Babywatch Early Intervention Program (BWEIP), implemented a multilingual electronic
survey using a tool developed by the National Center for Special Education and Accountability Monitoring (NCSEAM) to assess perceptions from family members of children enrolled in Part C early intervention. A link to the survey was distributed through electronic mail or web link means to 4,357 families of Utah children meeting certain criteria: being ages birth to three, having disabilities or delays, being under an individualized family service plan as of April 25, 2019, and having a documented email address or a meeting to facilitate hand delivery of the survey.

Of the delivered survey links, over one-third (36.7%) were accessed and language selected by the family members. Fewer surveys were applicable (1,314), meaning they consisted of at least one response to NCSEAM survey questions. The response rate of applicable responses was 30.2 percent.

The demographics of responding families appears to be representative of actively enrolled children in the Baby & Toddler Online Tracking System (BTOTS). The proportion of Spanish language respondents with applicable responses to the survey was 4.5 percent in FFY18. The proportion of active children whose primary language was Spanish, and who meet criteria for electronic distribution of this survey as of April 25, 2019 was similar (5.1%). This percent shows an increase from Spanish language survey response during FFY 2017 (3.3%). However, both of these years were lower than in earlier years when only a paper-based survey instrument and mail distribution method was used (9.3 percent in 2016 and 9.5 percent in 2017).

One of the potential reasons the paper-based method provided a higher response rate for minority families is the large proportion of families who did not have email addresses recorded in BTOTS for the child’s primary contact. Lead agency data identifies an approximate 31 percent decrease in the number of families listed with Spanish as their primary language and who are eligible for the NCSEAM electronic method (i.e., have an email address listed for the child’s primary contact). Data also indicates an approximate 40 percent decrease in the number of families with another primary minority language listed who are eligible for participation through the electronic survey (i.e., have an email address listed for the child’s primary contact). Utah’s NCSEAM method also includes program-specific survey links that are used when families do not receive an electronic survey and would like to participate. We anticipate that as virtual services have been approved during COVID-19, an increased number of email addresses will be verified and collected. In addition, the lead agency has been discussing several options and plan to supplement the NCSEAM electronic survey distribution with paper-based survey distribution as needed during future assessments.

Survey question response identifying agreement with indicator 4A, 4B, and/or 4C

4A: A response of “agree,” “strongly agree,” or “very strongly agree” with this item on the NCSEAM survey’s Impact of EI Services on Your Family scale: “Over the past year, Early Intervention services have helped me and/or my family: know about my child’s and family’s rights concerning Early Intervention services.” In 2019, 1,203 of 1,253 (96.0%) responded with agree, strongly agree or very strongly agree to this question.

4B: A response of “agree,” “strongly agree,” or “very strongly agree” with this item on the NCSEAM survey’s Impact of EI Services on Your Family scale: “Over the past year, Early Intervention services have helped me and/or my family: communicate more effectively with the people who work with my child and family.” In 2019, 1,148 of 1,228 (93.5%) responded with agree, strongly agree or very strongly agree to this question.

4C: A response of “agree,” “strongly agree,” or “very strongly agree” with this item on the NCSEAM survey’s Impact of EI Services on Your Family scale: “Over the past year, Early Intervention services have helped me and/or my family understand my child’s special needs.” In 2019, 1,188 of 1,232 (96.4%) responded with agree, strongly agree or very strongly agree to this question.

Provide additional information about this indicator (optional)

4 - Prior FFY Required Actions

None

4 - OSEP Response

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

4 - Required Actions
Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>0.66%</th>
</tr>
</thead>
</table>

<table>
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<tr>
<th>FFY</th>
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<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target &gt;=</td>
<td>0.83%</td>
<td>0.84%</td>
<td>0.85%</td>
<td>0.86%</td>
<td>0.87%</td>
</tr>
<tr>
<td>Data</td>
<td>0.86%</td>
<td>0.84%</td>
<td>1.01%</td>
<td>0.94%</td>
<td>1.03%</td>
</tr>
</tbody>
</table>

Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target &gt;=</td>
<td>0.88%</td>
<td>1.05%</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) solicits ongoing stakeholder discussion and input from various groups on setting of policies, development and tracking of data measures, methods for ensuring family awareness. BWEIP is always looking to facilitate valuable partnerships.

Stakeholders have provided input on targets and discussion on data results for indicators 2, 3, 4, 5, and 6 targets for the FFY 2013-2018 State Performance Plan/Annual Performance Report (SPP/APR). On an ongoing basis, the Interagency Coordinating Council (ICC) is presented data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In January 2020, the ICC was consulted on the FFY 2018 APR data and target establishment for FFY 2019.

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Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers birth to 1 with IFSPs</td>
<td>529</td>
</tr>
<tr>
<td>Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin</td>
<td>06/20/2019</td>
<td>Population of infants and toddlers birth to 1</td>
<td>50,160</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data
### Compare your results to the national data

According to IDEA 2018 Part C Child Count and Settings data (published January 2020), the national average percentage of all children under the age of one receiving early intervention services was 1.25%. The percentage of infants birth to 1 receiving early intervention services in Utah in 2018 was 0.20 percent lower (1.05%). Utah’s 2017 percentage was 0.22% below the national average. This percentage difference is congruent with the 2016 and 2015 data, when Utah was 0.30% and 0.19% below the national average, respectively. The average percentage of infants birth to 1 among the 19 states with similar eligibility criteria is 1.73 percent. Utah is 0.68 percent lower than the average.

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

Indicator data for FFY 2018 identified the highest trended percentage of infants and toddlers birth to one with IFSPs, as well as the highest target (1.05%). The Baby Watch Early Intervention Program established a new goal to increase referrals for this age group and worked with other programs to understand potential ways to be increasingly successful at finding children.

### 5 - Prior FFY Required Actions

None

### 5 - OSEP Response

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

### 5 - Required Actions
Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline 2005 1.90%

<table>
<thead>
<tr>
<th>FFY</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target &gt;=</td>
<td>2.10%</td>
<td>2.15%</td>
<td>2.20%</td>
<td>2.25%</td>
<td>2.30%</td>
</tr>
<tr>
<td>Data</td>
<td>2.37%</td>
<td>2.55%</td>
<td>2.75%</td>
<td>2.79%</td>
<td>2.93%</td>
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</tbody>
</table>

Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target &gt;=</td>
<td>2.35%</td>
<td>3.10%</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

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<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers birth to 3 with IFSPs</td>
<td>4,614</td>
</tr>
<tr>
<td>Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin</td>
<td>06/20/2019</td>
<td>Population of infants and toddlers birth to 3</td>
<td>150,786</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>Number of infants and toddlers birth to 3 with IFSPs</th>
<th>Population of infants and toddlers birth to 3</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>4,614</td>
<td>150,786</td>
<td>2.93%</td>
<td>2.35%</td>
<td>3.06%</td>
<td>Met Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>
Compare your results to the national data
According to IDEA 2018 Part C Child Count and Settings data (published January 2020), the national average percentage of all children under the age of three receiving early intervention services was 3.48%. The percentage of infants birth to 3 receiving early intervention services in Utah in 2018 was 3.06%. Utah's 2018 percentage is 0.42 percent below the national average. This percentage difference is slightly higher than the average of the 2017 data (0.34% lower than the national data) and 2016 and 2015 data, which were 0.33% below the percentage of children served nationwide. The average percentage for infants and children birth to 3 among the 19 states with similar eligibility criteria is 4.03 percent. Utah is 1.03 percent lower than the average.

Provide additional information about this indicator (optional)
Data trends indicate that FFY 2018 was the highest percentage of infants and toddlers birth to three with IFSPs (3.06%). Utah has had success at increasing this over the past several years. The Baby Watch Early Intervention Program regularly collaborates with workgroups, the public, and service programs to develop targets and dedicate SSIP activities. These efforts may have increased referrals and retention of some families in the target population.

6 - Prior FFY Required Actions
None

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

6 - Required Actions
**Indicator 7: 45-Day Timeline**

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

\[ \text{Percent} = \left( \frac{\text{(# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline)}}{\text{(# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted)}} \right) \times 100 \]

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

**Instructions**

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

Targets must be 100%.

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

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

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

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

### 7 - Indicator Data

#### Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>96.60%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2013</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2014</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2015</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2016</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2017</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

#### Targets

<table>
<thead>
<tr>
<th>FFY 2018</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2019</td>
<td>100%</td>
</tr>
</tbody>
</table>

#### FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>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</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>4,363</td>
<td>99.47%</td>
<td>100%</td>
<td>98.16%</td>
<td>Did Not Meet Target</td>
<td>Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

During FFY 2017, cases of infants and toddlers with IFSPs not receiving a timely initial IFSP were reviewed and corrected by programs prior to calculation of the APR. During FFY 2018, programs were not extended the opportunity to correct noncompliant cases. In preparation for the FFY 2018 SPP/APR, programs had not completed a timely IFSP for 99 cases.

Reasons for slippage were acquired through stakeholder feedback. Feedback on this indicator during FFY 2018 included: Staff shortage in local EI programs, local EI program visit scheduling and coordination challenges, challenges scheduling a translator, increase in workload due to referrals and intakes, and inconsistent response from families to schedule visits.

**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.

852

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).

Full reporting period of July 1, 2018 to June 30, 2019

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby and Toddler Online Tracking System (BTOTS), and includes all newly-referred children who were found eligible and for whom an initial IFSP was required to be conducted during the time period July 1, 2018 through June 30, 2019.

Provide additional information about this indicator (optional)

Reasons for delay were acquired through stakeholder feedback. Feedback on this indicator during FFY 2018 included: Staff shortage in local EI programs, local EI program visit scheduling and coordination challenges, challenges scheduling a translator, increase in workload due to referrals and intakes, and inconsistent response from families to schedule visits.

A family circumstance causing a documented delay as the last point of contact was counted as “exceptional family delay”. Contact logs indicate that reasons for family-caused delays include missed appointment, family cancelling/rescheduling the service, family not responding to contact attempts, and others.

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>30</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

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

BWEIP reviewed compliance indicator data and developed reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases be reviewed to determine causes. Noncompliant cases were identified in 8 of the 15 Utah early intervention programs during this period. Please see tables attached to APR in order to understand Utah's templates for corrective action requirements.

The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regulatory requirements identified through reports and documentations.

BWEIP discussed, with local EI program administrators, individual cases identified in FFY 2017 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2017 program determination correction plans, as found in the APR attachments.

FFY 2018 cases were also reviewed to identify any continued noncompliance. FFY 2018 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2017 were 36 percent less likely to continue to be noncompliant in FFY 2018.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements.

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

BWEIP contacted each of the local early intervention programs to review data findings from FFY 2017. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

23
7 - Prior FFY Required Actions

None

7 - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2018 SPP/APR, that the remaining 30 uncorrected findings of noncompliance identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2018 and each EIS program or provider with remaining noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

7 - Required Actions
**Indicator 8A: Early Childhood Transition**

**Instructions and Measurement**

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

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services;

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 = \[
\frac{\# \text{ of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday}}{\# \text{ of toddlers with disabilities exiting Part C}} \times 100
\]

B. Percent = \[
\frac{\# \text{ of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services} \times 100}{\# \text{ of toddlers with disabilities exiting Part C who were potentially eligible for Part B preschool services}} \times 100
\]

C. Percent = \[
\frac{\# \text{ of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services} \times 100}{\# \text{ of toddlers with disabilities exiting Part C who were potentially eligible for Part B preschool services}} \times 100
\]

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

**Instructions**

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

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

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

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

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

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

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

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

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

---

### 8A - Indicator Data

**Historical Data**

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>97.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FFY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2013</td>
<td>2014</td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Data</td>
<td>100.00%</td>
<td>100.00%</td>
</tr>
</tbody>
</table>
Targets

<table>
<thead>
<tr>
<th></th>
<th>FFY 2018</th>
<th>FFY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**FFY 2018 SPP/APR Data**

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

YES

<table>
<thead>
<tr>
<th>Number of children exiting Part C who have an IFSP with transition steps and services</th>
<th>Number of toddlers with disabilities exiting Part C</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,975</td>
<td>3,989</td>
<td>99.66%</td>
<td>100%</td>
<td>99.75%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

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.

4

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).

Full reporting period of July 1, 2018 to June 30, 2019.

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSP’s who have received early intervention (EI) services from July 1, 2018 to June 30, 2019.

Provide additional information about this indicator (optional)

Reasons for delay were acquired through stakeholder feedback. Feedback on this indicator during FFY 2018 included: Staff shortage in local EI programs, local EI program visit scheduling and coordination challenges, challenges scheduling a translator, increase in workload due to referrals and intakes, and inconsistent response from families to schedule visits.

**Correction of Findings of Noncompliance Identified in FFY 2017**

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>14</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

BWEIP reviewed compliance indicator data and developed reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases be reviewed to determine causes. Noncompliant cases were identified in 4 of the 15 Utah early intervention programs during this period. Please see tables attached to APR in order to understand Utah's templates for corrective action requirements.

The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regularity requirements identified through reports and documentations.

BWEIP discussed, with local EI program administrators, individual cases identified in FFY 2017 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2017 program determination correction plans, as found in the APR attachments.

FFY 2018 cases were also reviewed to identify any continued noncompliance. FFY 2018 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2017 were 67 percent less likely to continue to be noncompliant in FFY 2018.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements.

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

BWEIP contacted each of the local early intervention programs to review data findings from FFY 2017. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response.
Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**8A - Prior FFY Required Actions**

None

**8A - OSEP Response**

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2018 SPP/APR, that the remaining 14 uncorrected findings of noncompliance identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2018 and each EIS program or provider with remaining noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

**8A - Required Actions**
### Indicator 8B: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = \([\frac{(# \text{ of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)} - 100]}{(# \text{ of toddlers with disabilities exiting Part C})}\) times 100.

B. Percent = \([\frac{(# \text{ of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)} - 100]}{(# \text{ of toddlers with disabilities exiting Part C who were potentially eligible for Part B})}\) times 100.

C. Percent = \([\frac{(# \text{ of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B)} - 100]}{(# \text{ of toddlers with disabilities exiting Part C who were potentially eligible for Part B})}\) times 100.

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

**Instructions**

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

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

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

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

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

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

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

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

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

### 8B - Indicator Data

#### Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>93.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FFY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>2014</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>2015</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>2017</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Target</strong></td>
<td>100.00%</td>
<td>100.00%</td>
</tr>
<tr>
<td><strong>Data</strong></td>
<td>100.00%</td>
<td>100.00%</td>
</tr>
</tbody>
</table>
Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data

Data include notification to both the SEA and LEA

YES

<table>
<thead>
<tr>
<th>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</th>
<th>Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,877</td>
<td>3,989</td>
<td>100.00%</td>
<td>100%</td>
<td>100.00%</td>
<td>Met Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

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.

112

Describe the method used to collect these data

The data for the FFY 2018 APR submission for this indicator includes all children 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 exiting Part C where these children that were at least 33 months old and exited EI from July 1, 2018 though June 30, 2019.

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 database

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

Full reporting period of July 1, 2018 to June 30, 2019

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSP's who have received early intervention (EI) services from July 1, 2018 to June 30, 2019.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

Correction of Findings of Noncompliance Identified Prior to FFY 2017

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8B - Prior FFY Required Actions

None

8B - OSEP Response

8B - Required Actions
Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

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

Data Source
Data to be taken from monitoring or State data system.

Measurement

A. Percent = \left( \frac{\text{ (# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{ (# of toddlers with disabilities exiting Part C)}} \right) \times 100.

B. Percent = \left( \frac{\text{ (# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)}}{\text{ (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right) \times 100.

C. Percent = \left( \frac{\text{ (# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B)}}{\text{ (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right) \times 100.

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

Instructions

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>86.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FFY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td><strong>Data</strong></td>
<td>100.00%</td>
<td>99.37%</td>
</tr>
<tr>
<td></td>
<td>99.10%</td>
<td>100.00%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>99.52%</td>
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</table>
**Targets**

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**FFY 2018 SPP/APR Data**

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

**YES**

<table>
<thead>
<tr>
<th>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</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,282</td>
<td>3,288</td>
<td>99.52%</td>
<td>100%</td>
<td>99.00%</td>
<td>Did Not Meet Target</td>
</tr>
</tbody>
</table>

**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.

391

**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.

586

**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).**

Full reporting period of July 1, 2018 - June 30, 2019

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSPs who have received early intervention (EI) services from July 1, 2018 to June 30, 2019.

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

Reasons for delay were acquired through stakeholder feedback. Feedback on this indicator during FFY 2018 included: Staff shortage in local EI programs, local EI program visit scheduling and coordination challenges, challenges scheduling a translator, increase in workload due to referrals and intakes, and inconsistent response from families to schedule visits.

**Correction of Findings of Noncompliance Identified in FFY 2017**

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>10</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

BWEIP reviewed compliance indicator data and developed reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases be reviewed to determine causes. Noncompliant cases were identified in 6 of the 15 Utah early intervention programs during this period. Please see tables attached to APR in order to understand Utah’s templates for corrective action requirements.

The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regulatory requirements identified through reports and documentations.

BWEIP discussed, with local EI program administrators, individual cases identified in FFY 2017 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2017 program determination correction plans, as found in the APR attachments.

FFY 2018 cases were also reviewed to identify any continued noncompliance. FFY 2018 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2017 were 43 percent less likely to continue to be noncompliant in FFY 2018.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated
data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements.

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

BWEIP contacted each of the early intervention programs to review data findings from FFY 2017. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2017 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance.

### Correction of Findings of Noncompliance Identified Prior to FFY 2017

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8C - Prior FFY Required Actions

None

8C - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2018 SPP/APR, that the remaining ten uncorrected findings of noncompliance identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2018 and each EIS program or provider with remaining noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

8C - Required Actions
Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source
Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the EDFacts 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.

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 EDIFacts 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.

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

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

Targets: Description of Stakeholder Input

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) solicits ongoing stakeholder discussion and input from various groups on setting of policies, development and tracking of data measures, methods for ensuring family awareness. BWEIP is always looking to facilitate valuable partnerships.

Stakeholders have provided input on targets and discussion on data results for indicators 2, 3, 4, 5, and 6 targets for the FFY 2013-2018 State Performance Plan/Annual Performance Report (SPP/APR). On an ongoing basis, the Interagency Coordinating Council (ICC) is presented data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In January 2020, the ICC was consulted on the FFY 2018 APR data and target establishment for FFY 2019.

Meetings have been held to present data and seek involvement from stakeholder groups that are comprised of ICC members, parents, EI Provider Consortium members, and partnering agencies and programs including Utah State Board of Education, Migrant and Homeless, Utah Parent Center, Children with Special Health Care Needs, Early Head Start, Child Protection, The Utah Parent Center, the Office of Home Visiting, Utah Schools for the Deaf and the Blind, Medicaid, CHIP, University Personnel Preparation Centers, Center for Persons with Disabilities and Utah Department of Insurance, and early intervention service coordinators, specialists, therapists and administrators.

During extended ICC meetings, Baby Watch Staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the six-year results indicator’s targets.

On January 22, 2020 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to submit the ICC’s own annual report (attached to APR), and confirms provision to our Governor (attached to APR).

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>0.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td>2013</td>
<td>2014</td>
</tr>
<tr>
<td>Target=</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Data</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
</tbody>
</table>
### Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

### FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>2.1.a.i Mediation agreements related to due process complaints</th>
<th>2.1.b.i Mediation agreements not related to due process complaints</th>
<th>2.1 Number of mediations held</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Provide additional information about this indicator (optional)

#### 10 - Prior FFY Required Actions

None

#### 10 - OSEP Response

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

#### 10 - Required Actions
Certification

Instructions

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

Certify

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

Select the certifier's role

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:
Lisa Davenport, PhD

Title:
Part C Coordinator

Email:
lisadavenport@utah.gov

Phone:
801-273-2961

Submitted on:
04/27/20  1:28:08 PM