

# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on  
FFY 2019

Utah



**PART C DUE**  
**February 1, 2021**

U.S. DEPARTMENT OF EDUCATION  
WASHINGTON, DC 20202

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

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 FFY 2019, this measure was determined using assessment tools (COS and BDI-2 NU) entry and exit raw scores/DQ. The calculation identified that 52.87 percent of children moved closer in functioning to that of same-aged peers, as reflected in Summary Statement 1.

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

Although the COVID-19 pandemic has brought about a variety of internal and external challenges to fulfill the mission of Early Intervention (EI) in Utah, local EI programs have maintained successful operations delivering services, collecting and entering data, and maintaining positive relationships with families. As the lead agency (LA), Baby Watch has continued to communicate/educate/evaluate partners and local EI programs to ensure quality data is reported, despite internal and external challenges described below.

Challenges that some EI programs have communicated related to the COVID-19 pandemic include financial impacts as caseloads/IFSPs decline and decreased service delivery options as many families do not desire virtual visits. The pandemic has decreased morale among some local EI program staff, required changes or reductions to staff roles and purchases, and driven development of new local EI policies/procedures. Internal communication within some local EI programs has also been a challenge. New referrals have decreased in various areas of the state. Also, some programs have decided to use limited funds to supply families with the technology for virtual visits to be successful.

Although these challenges exist, local EI programs are continuing to find creative solutions to adapt and successfully provide EI services. This is evident in our FFY 2019 APR data.

#### 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 FFY 2019, BWEIP sub-contracted with 14 local EI programs and one EI program in-house under the Utah Department of Health to provide EI services throughout Utah. 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 promote 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 finding of noncompliance, 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. The Part C Data Manager continues to support the processes used to collect and utilize valid and reliable data, and works with Utah's EI programs to provide program indicator data profiles, compliance indicator determinations, 618 data review, discussion on data/target-related changes, 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 (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](http://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 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, and 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 all indicators during the FFY 2014-2019 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 November 2019, the ICC was consulted on the development of targets for FFY 2019. In November 2020 and January 2021, the ICC was consulted on the FFY 2019 APR data, discussing new SPP/APR data requirements, and establishment of future targets.

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 indicator's targets. Additionally, targets for indicator 11 were discussed and refined through calendar years 2019 and 2020. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2019 SiMR data was discussed in depth with the ICC on January 27, 2021.

On January 28, 2021 the Chair and Vice-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 use the State's Part C SPP/APR for FFY 2019 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 2018 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2018 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2018 APR in 2020, is available.**

\*The FFY 2018 SPP/APR has been posted on the BWEIP website at [utahbabywatch.org](http://utahbabywatch.org) under the Track Our Progress tab, State Performance Plan/Annual Performance Report (SPP/APR).

\*Local EI program profiles of indicator performance have been distributed to providers and posted to the BWEIP website under the local programs section in August 2020 at <https://health.utah.gov/cshcn/pdf/BabyWatch/FFY2018%20ALL%20PROFILES.pdf>. Local BWEIPs received their program profiles, determinations, and notifications of noncompliance in July 2020.

\*Utah's Part C determination from OSEP was posted to the Baby Watch Website in August 2020 at <http://health.utah.gov/cshcn/programs/babywatch.html>.

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

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

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

Utah has acknowledged and responded to OSEP's required actions for FFY 2018 and FFY 2019. The State-identified Measureable Result was reported in the FFY 2019 APR, Introduction. Additional details are also included in Utah's FFY 2019 submitted SSIP document, APR Indicator 11.

#### **Intro - OSEP Response**

The State did not provide verification that the attachment(s) it included in its FFY 2019 SPP/APR submission is/are in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508.

#### **Intro - Required Actions**

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

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

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

### Data Source

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

### Measurement

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

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

### Instructions

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

Targets must be 100%.

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

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

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

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

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

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	98.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	99.90%	99.10%	99.10%	98.40%

### Targets

FFY	2019
Target	100%

### FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
5,850	6,218	98.40%	100%	98.63%	Did Not Meet Target	No Slippage

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

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

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

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, 2019 - June 30, 2020

**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 individual early intervention (EI) services from July 1, 2019 to June 30, 2020.

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

Reasons for provider-caused delay were acquired through provider stakeholder feedback and review of child records. Feedback on this indicator during FFY 2019 included: Challenges with developing and implementing instruction in local EI programs related to virtual visitation due to COVID-19, staff shortages in local EI programs due to provider cancellations related to COVID-19, local EI program visit scheduling and coordination challenges, inaccurate family contact information or lack of necessary documentation in database, 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". Reasons for documenting the cases as such were pulled from contact logs and visit notes. These findings indicate that reasons for family-caused delays include missed appointments, family cancelling/rescheduling the service, family not responding to contact attempts, and others, families moving, and others, many of which had an underlying documented reason reflective of concern for their family health or local/state COVID laws, until face to face visits are reinitiated by programs.

Improvement Activities Completed in FFY 2019: During FFY 2019, the timely services indicator report composition and layout was vetted and updated to ensure ease and accuracy with reported requirements. A new feature was developed to document family declination of services, in the contact log, and directing applicable late visits as family-caused. During FFY 2019, the APR 1 report was modified to allow virtual visits starting in March, 2020. The report was distributed for local EI program use in assessing their program delays. 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 corrective action plans relating to data accuracy. 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 2019 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.

Breakdown of delay by number of cases having properly documented and fulfilled first visits for each service, reflective of APR1, was as follows: 1-8 days (26%), 9-15 days (14%), 16-24 days (16%), and more than 25 days (45%).

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
99	99		0

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

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

Corrected Findings of Noncompliance Identified in FFY 2018

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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 13 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 2018 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2018 program determination correction plans, as found in the APR attachments. FFY 2018 cases were also reviewed to identify any continued noncompliance.

FFY 2019 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 2018 were 25.9 percent less likely to continue to be noncompliant in FFY 2019. 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 2018 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. Local EI programs participated in compliance and monitoring audits during 2020 and early 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2018 data.

The 99 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans include: data entry errors, staffing delays or needing to cancel/reschedule, and insufficient documentation of contact attempts or exceptional family circumstances. The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2018 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2018

The Baby Watch Early Intervention Program (BWEIP) contacted each of the local early intervention programs to review data findings from FFY 2018. 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 2018 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. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY2018 involved 99 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 99 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

<b>Year Findings of Noncompliance Were Identified</b>	<b>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR</b>	<b>Findings of Noncompliance Verified as Corrected</b>	<b>Findings Not Yet Verified as Corrected</b>
FFY 2017	42	42	0

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Corrected Findings of Noncompliance Identified in FFY 2017

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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. BWEIP monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Noncompliant cases were identified in 7 of the 15 Utah early intervention programs during this period.

The 42 UT findings of noncompliance have been corrected. The programs have 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.

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.

The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2017 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2017

The Baby Watch Early Intervention Program (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. Corrected findings in FFY17 involved 42 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 42 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR information 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 that it has verified that each EIS program or provider with findings of 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2018 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 2018 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.

**1 - Required Actions**

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	77.90%

FFY	2014	2015	2016	2017	2018
Target>=	91.00%	92.00%	93.00%	94.00%	95.00%
Data	95.37%	95.70%	95.59%	94.42%	94.84%

### Targets

FFY	2019
Target>=	95.00%

### 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, and 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 all indicators during the FFY 2014-2019 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 November 2019, the ICC was consulted on the development of targets for FFY 2019. In November 2020 and January 2021, the ICC was consulted on the FFY 2019 APR data, discussing new SPP/APR data requirements, and establishment of future targets.

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 indicator's targets. Additionally, targets for indicator 11 were discussed and refined through calendar years 2019 and 2020. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2019 SiMR data was discussed in depth with the ICC on January 27, 2021.

On January 28, 2021 the Chair and Vice-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 use the State's Part C SPP/APR for FFY 2019 and confirms provision to our Governor (attached to APR).

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	4,466
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	4,689

**FFY 2019 SPP/APR Data**

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,466	4,689	94.84%	95.00%	95.24%	Met Target	No Slippage

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

Table 1. Indicator 2 Targets and Actual Target Data for Previous Ten Fiscal Years

FFY (December 1 Count) Indicator 2 Target Indicator 2 Actual Target Data

FFY 2009 (December 1, 2009) 77.50% 84.30%

FFY 2010 (December 1, 2010) 78.00% 89.20%

FFY 2011 (December 1, 2011) 78.50% 87.40%

FFY 2012 (December 1, 2012) 79.00% 94.30%

FFY 2013 (December 1, 2013) 79.50% 95.44%

FFY 2014 (December 1, 2014) 91.00% 95.37%

FFY 2015 (December 1, 2015) 92.00% 95.69%

FFY 2016 (December 1, 2016) 93.00% 95.59%

FFY 2017 (December 1, 2017) 94.00% 94.42%

FFY 2018 (December 1, 2018) 95.00% 94.84%

FFY 2019 (December 1, 2019) 95.99% 95.24%

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.

The FFY 2019 percentage of infants and toddlers with IFSPs receiving early intervention services primarily in home or community-based settings (95.24%) exceeds the FFY 2018 percentage (94.84%) and the FFY 2019 target of 95.00 percent. FFY 2013, FFY 2015, and FFY 2016 are the highest percentages in reporting years FFY 2009 through FFY 2019.

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

**2 - Required Actions**

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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

### 3 - Indicator Data

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

NO

#### Targets: Description of Stakeholder Input

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, and 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 all indicators during the FFY 2014-2019 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 November 2019, the ICC was consulted on the development of targets for FFY 2019. In November 2020 and January 2021, the ICC was consulted on the FFY 2019 APR data, discussing new SPP/APR data requirements, and establishment of future targets.

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 indicator's targets. Additionally, targets for indicator 11 were discussed and refined through calendar years 2019 and 2020. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2019 SiMR data was discussed in depth with the ICC on January 27, 2021.

On January 28, 2021 the Chair and Vice-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 use the State's Part C SPP/APR for FFY 2019 and confirms provision to our Governor (attached to APR).

#### Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2013	Target>=	65.50%	66.00%	67.00%	68.00%	69.00%
A1	68.18%	Data	69.77%	67.45%	63.11%	64.33%	64.04%
A2	2013	Target>=	54.00%	54.50%	55.00%	55.50%	56.00%
A2	55.40%	Data	58.44%	60.86%	57.91%	59.90%	60.50%
B1	2013	Target>=	73.00%	73.50%	74.00%	74.50%	75.50%
B1	75.44%	Data	74.17%	70.56%	68.72%	68.85%	68.36%
B2	2013	Target>=	48.00%	48.50%	49.00%	49.50%	51.00%
B2	50.88%	Data	52.81%	54.04%	52.87%	52.50%	51.71%
C1	2013	Target>=	74.00%	74.50%	75.00%	75.50%	76.20%
C1	76.17%	Data	74.97%	73.13%	71.31%	71.13%	70.56%
C2	2013	Target>=	58.00%	58.50%	59.00%	59.50%	60.00%
C2	59.19%	Data	61.18%	62.22%	60.88%	60.99%	61.19%

#### Targets

FFY	2019
Target A1>=	69.00%
Target A2>=	56.50%
Target B1>=	75.50%
Target B2>=	51.50%
Target C1>=	76.20%
Target C2>=	60.50%

#### FFY 2019 SPP/APR Data

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

2,540

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	61	2.40%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	569	22.40%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	252	9.92%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	516	20.31%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,142	44.96%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	768	1,398	64.04%	69.00%	54.94%	Did Not Meet Target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	1,658	2,540	60.50%	56.50%	65.28%	Met Target	No Slippage

**Provide reasons for A1 slippage, if applicable**

Reasons for slippage in indicator 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), included several aspects. Between FFY 2018 and 2019, Indicator A1 outcome score category percentage changes led to an overall percentage decrease. The Baby Watch Early Intervention Program (BWEIP) analyzed the FFY 2018 and 2019 entry and exit data calculations for score computation errors and evaluated category changes. The proportion of children in Category A increased (0.59% to 3.11%), Category B decreased (24.97% to 24.75%), Category C decreased (15.57% to 11.60%), and Category D decreased (28.92% to 19.66%) between these years. COVID-19 required local EI programs to switch from in-home to virtual services. Many families suspended or discontinued services, or were lost to follow-up Mar-Dec 2020. As a result, more children left services during this timeframe without an exit score.

BWEIP modified the method of calculating child functioning in the Baby & Toddler Online Tracking System (BTOTS) to determine entry and exit raw scores and developmental quotients. Historically, the COS assessment was the only tool used to determine child exit scores for children. For FFY 2019, child functioning was calculated using both COS and Battelle Developmental Inventory, Second Edition, Normative Update (BDI 2-NU). Therefore, ascertainment of a new baseline for this measure is not appropriate as this is not a new method of calculation. As expected, 2019 data reflected the downward impact of the switch to the BDI-2 NU, a standardized evaluation tool, to calculate entry and exit raw scores and developmental quotients. This tool is more objective than COS, a subjective assessment tool, which results in less valid and accurate outcomes. There are inherent challenges in obtaining accurate child race and ethnicity information. Although this information is typically reported by families at time of referral, BWEIP is currently developing additional methods of gathering this information prior to child exit. BWEIP will discontinue using the COS when the final group of children who received COS entry scores in FFY 2018 age out of service during FFY 2021. BWEIP has continued to consult with the Interagency Coordinating Council (ICC) to gather input on the best way to transition from COS to BDI-2 NU child outcome measurements.

In November 2019, BWEIP discussed the development of FFY 2019 SPP/APR and SiMR targets with Utah's Interagency Coordinating Council (ICC). In November 2020 and January 2021, the ICC reviewed and approved the FFY 2019 APR data and targets and discussed new SPP/APR data requirements, including child functioning measurement. On January 28, 2021 the ICC Chair and Vice-Chair signed the ICC Annual Report Certification Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2019.

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	33	1.30%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	546	21.50%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	618	24.33%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	784	30.87%

<b>Outcome B Progress Category</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	559	22.01%

<b>Outcome B</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2018 Data</b>	<b>FFY 2019 Target</b>	<b>FFY 2019 Data</b>	<b>Status</b>	<b>Slippage</b>
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,402	1,981	68.36%	75.50%	70.77%	Did Not Meet Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	1,343	2,540	51.71%	51.50%	52.87%	Met Target	No Slippage

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

<b>Outcome C Progress Category</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	17	0.67%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	398	15.67%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	354	13.94%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	738	29.06%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,033	40.67%

<b>Outcome C</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2018 Data</b>	<b>FFY 2019 Target</b>	<b>FFY 2019 Data</b>	<b>Status</b>	<b>Slippage</b>
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	1,092	1,507	70.56%	76.20%	72.46%	Did Not Meet Target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	1,771	2,540	61.19%	60.50%	69.72%	Met Target	No Slippage

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

<b>Question</b>	<b>Number</b>
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	5,019
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.	1,553

<b>Sampling Question</b>	<b>Yes / No</b>
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. For FFY 2019, the Child Outcome Summary (COS) or Battelle Development Inventory, Second Edition, Normative Update (BDI-2 NU) is used to document the process, and includes a rational statement that explains and supports the score given. The scores are completed upon the child's entry and exit from EI services. Scores 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 provided that they have received six consecutive months of EI services at the time of exit.

**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) Ongoing discussion with stakeholders and programs
- 2) 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.

**3 - Prior FFY Required Actions**

None

**3 - OSEP Response**

The State reported in its narrative under reasons for slippage that the "reasons for slippage in indicator 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), included a new method of calculation which incorporates entry and exit raw scores and developmental quotients using the Battelle Developmental Inventory, Second Edition, Normative Update (BDI-2 NU). OSEP would expect the State to reset its baseline, based on the new method of calculation.

**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 =  $\left[ \frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family know their rights}}{\text{\# of respondent families participating in Part C}} \right] \times 100$ .
- B. Percent =  $\left[ \frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs}}{\text{\# of respondent families participating in Part C}} \right] \times 100$ .
- C. Percent =  $\left[ \frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn}}{\text{\# of respondent families participating in Part C}} \right] \times 100$ .

#### Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2006	Target>=	84.50%	85.00%	85.50%	86.00%	86.50%
A	76.00%	Data	87.73%	88.56%	88.69%	95.85%	96.01%
B	2006	Target>=	82.25%	82.50%	82.75%	83.00%	83.25%
B	73.00%	Data	85.86%	86.62%	87.19%	93.72%	93.49%
C	2006	Target>=	92.10%	92.20%	92.30%	92.40%	92.50%
C	83.00%	Data	92.45%	94.08%	93.31%	96.24%	96.43%

### Targets

FFY	2019
Target A>=	90.00%
Target B>=	88.00%
Target C>=	93.00%

### 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, and 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 all indicators during the FFY 2014-2019 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 November 2019, the ICC was consulted on the development of targets for FFY 2019. In November 2020 and January 2021, the ICC was consulted on the FFY 2019 APR data, discussing new SPP/APR data requirements, and establishment of future targets.

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 indicator's targets. Additionally, targets for indicator 11 were discussed and refined through calendar years 2019 and 2020. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2019 SiMR data was discussed in depth with the ICC on January 27, 2021.

On January 28, 2021 the Chair and Vice-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 use the State's Part C SPP/APR for FFY 2019 and confirms provision to our Governor (attached to APR).

#### FFY 2019 SPP/APR Data

The number of families to whom surveys were distributed	4,660
Number of respondent families participating in Part C	2,104
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,484
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,538
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	1,425
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,505
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,460
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,520

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	96.01%	90.00%	96.49%	Met Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	93.49%	88.00%	94.68%	Met Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	96.43%	93.00%	96.05%	Met Target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

Question	Yes / No
Was a collection tool used?	YES
If yes, is it a new or revised collection tool?	NO

Question	Yes / 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 2019 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 May 2020, 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 4,660 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, 2020, and having a documented email address or a meeting to facilitate hand delivery of the survey.

Of the delivered survey links, nearly one-half (45.2%) were accessed and language selected by the family members. Fewer surveys were applicable (1609), meaning they consisted of at least one response to NCSEAM survey questions. The response rate of applicable responses was 34.5 percent.

The demographics of responding families appear to be representative of actively enrolled children in the Baby & Toddler Online Tracking System (BTOTS). Geographic status of regions where programs serve was collected and analyzed, with results (Urban=66%, Rural=28%, Frontier=6%) similar to the FFY 2019 618 Child Count survey data assessed (Urban=71%, Rural=25%, Frontier=4%).

For the FFY 2019 survey, the instrument used only collected child-level primary language (English/Spanish) demographics, not race or ethnicity data. FFY 2019 survey data identified that the count of respondents with English as their primary language was 1514, compared with Spanish as their primary language (95). The proportion of Spanish language respondents with applicable responses to the survey shows an increasing trend with 5.9 percent in FFY 2019, compared with FFY 2018 (4.5%). Additionally, the proportion of active children whose primary language was Spanish, and who meet criteria for electronic distribution of this survey as of April 25, 2020 (for FFY 2019) was higher (8.3%), an increase from 5.1 percent of families last year.

The Baby Watch Early Intervention Program has held stakeholder meetings regarding development of the survey instrument and is currently in the process of revising the tool to include other parent-reported demographic data including race/ethnicity. This data is expected to be collected during FFY 2020.

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. As virtual services were approved during COVID-19, an increased number of email addresses have been verified and collected. In addition, the lead agency has been discussing several options and plans to supplement the NCSEAM electronic survey analyses using RASCH and incorporating other assessments during FFY 2020 as stakeholders support.

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 FFY 2019, 1,484 of 1,538 (96.5%) 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, 1,425 of 1,505 (94.7%) 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, 1,460 of 1,520 (96.1%) 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 reported that the data for this indicator were collected from a response group that was representative of the population. However, in its narrative, the State reported "For the FFY 2019 survey, the count of respondents with English as their primary language was 1514, compared with Spanish as their primary language (95). The proportion of Spanish language respondents with applicable responses to the survey shows a increasing trend with 5.9 percent in FFY 2019, while only 4.5 percent in FFY 2018 and 3.3 percent in FFY 2017. Despite the growth over these three years, it remains lower than in earlier years when only a paper-based survey instrument and mail distribution method was used (9.3 percent in FFY 2015 and 9.5 percent in FFY 2016). In comparison, the proportion of active children whose primary language was Spanish, and who meet criteria for electronic distribution of this survey as of April 25, 2020 (for FFY 2019) was higher (8.3%), increasing from 5.1 percent of families last year. Conversely, a large proportion of Spanish-language families eligible for the FFY 2019 NCSEAM survey did not have email addresses recorded in BTOTS for the child's primary contact (51.1%), as compared to other eligible families (86.1%)." Therefore, OSEP is unclear whether the response group was representative of the population. OSEP notes that the State did not include strategies or improvement activities to address this issue in the future.

## 4 - Required Actions

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

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	0.66%

FFY	2014	2015	2016	2017	2018
Target >=	0.84%	0.85%	0.86%	0.87%	0.88%
Data	0.84%	1.01%	0.94%	1.03%	1.05%

### Targets

FFY	2019
Target >=	1.05%

### 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, and 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 all indicators during the FFY 2014-2019 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 November 2019, the ICC was consulted on the development of targets for FFY 2019. In November 2020 and January 2021, the ICC was consulted on the FFY 2019 APR data, discussing new SPP/APR data requirements, and establishment of future targets.

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 indicator's targets. Additionally, targets for indicator 11 were discussed and refined through calendar years 2019 and 2020. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2019 SiMR data was discussed in depth with the ICC on January 27, 2021.

On January 28, 2021 the Chair and Vice-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 use the State's Part C SPP/APR for FFY 2019 and confirms provision to our Governor (attached to APR).

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	538

Source	Date	Description	Data
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	48,566

**FFY 2019 SPP/APR Data**

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
538	48,566	1.05%	1.05%	1.11%	Met Target	No Slippage

**Compare your results to the national data**

According to IDEA 2019 Part C Child Count and Settings data (published January 2021), the national average percentage of all children under the age of one receiving early intervention services was 1.37%. The percentage of infants birth to 1 receiving early intervention services in Utah in 2019 was 0.26 percent lower (1.11%). Utah's 2018 percentage was 0.20% below the national average. This percentage difference is congruent with the 2017 and 2016 data, when Utah was 0.22% and 0.30% below the national average, respectively. The average percentage of infants birth to 1 among the 18 states with similar eligibility criteria is 2.14 percent. Utah is 1.03 percent lower than the average, and is in 13th place out of this cohort.

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

Indicator data for FFY 2019 identified the highest trended percentage of infants and toddlers birth to one with IFSPs (1.11%), as well as the highest target (1.05%). Despite challenges from COVID-19, the Baby Watch Early Intervention Program moved forward with its 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**

**5 - Required Actions**

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

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 6 - Indicator Data

Baseline Year	Baseline Data
2005	1.90%

FFY	2014	2015	2016	2017	2018
Target >=	2.15%	2.20%	2.25%	2.30%	2.35%
Data	2.55%	2.75%	2.79%	2.93%	3.06%

#### Targets

FFY	2019
Target >=	3.10%

#### 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, and 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 all indicators during the FFY 2014-2019 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 November 2019, the ICC was consulted on the development of targets for FFY 2019. In November 2020 and January 2021, the ICC was consulted on the FFY 2019 APR data, discussing new SPP/APR data requirements, and establishment of future targets.

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 indicator's targets. Additionally, targets for indicator 11 were discussed and refined through calendar years 2019 and 2020. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2019 SiMR data was discussed in depth with the ICC on January 27, 2021.

On January 28, 2021 the Chair and Vice-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 use the State's Part C SPP/APR for FFY 2019 and confirms provision to our Governor (attached to APR).

#### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	4,689

Source	Date	Description	Data
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	145,948

**FFY 2019 SPP/APR Data**

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,689	145,948	3.06%	3.10%	3.21%	Met Target	No Slippage

**Compare your results to the national data**

According to IDEA 2019 Part C Child Count and Settings data (published January 2021), the national average percentage of all children under the age of three receiving early intervention services was 3.70%. The percentage of infants birth to 3 receiving early intervention services in Utah in 2019 was 3.21%. Utah's 2019 percentage is 0.49 percent below the national average. This percentage difference is slightly higher than the average for each of the last four years (2018 - 0.42%, 2017 - 0.34%, 2016 - 0.33%, and 2015 - 0.33%). The average percentage for infants and children birth to 3 among the 18 states with similar eligibility criteria is 4.54 percent. Utah is 1.33 percent lower than the average.

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

Data trends indicate that FFY 2019 was the highest percentage of infants and toddlers birth to three with IFSPs (3.21%). 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**

**6 - Required Actions**



## Indicator 7: 45-Day Timeline

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

## 7 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	96.60%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	99.47%	98.16%

### Targets

FFY	2019
Target	100%

### FFY 2019 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,283	5,057	98.16%	100%	98.95%	Did Not Meet Target	No Slippage

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

This number will be added to the "Number of 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.

721

**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, 2019 to June 30, 2020

**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, 2019 through June 30, 2020.

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

Reasons for provider-caused delay were acquired through provider stakeholder feedback and review of child records. Feedback on this indicator during FFY 2019 included: Staff downsizing and position changes in local EI programs, staff member unavailability, local EI program transition to new office locations, COVID-19 illness among local EI program staff, EI program visit scheduling and coordination challenges, and inconsistent response from families to schedule visits.

Breakdown of delay by number of cases having properly documented established IFSP, reflective of APR 7, was as follows: 1-8 days (27%), 9-15 days (29%), 16-24 days (23%), and more than 25 days (21%).

A family circumstance causing a documented delay as the last point of contact was counted as "exceptional family delay". Reasons for documenting the cases as such were pulled from contact logs and visit notes. These findings indicate that reasons for family-caused delays include missed appointments, family cancelling/rescheduling the service, family not responding to contact attempts, families moving, and others, many of which had an underlying documented reason reflective of concern for their family health or local/state COVID laws, until face to face are reinitiated by programs.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
100	100		0

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

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

Corrected Findings of Noncompliance Identified in FFY 2018

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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 10 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 2018 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2018 program determination correction plans, as found in the APR attachments. FFY 2019 cases were also reviewed to identify any continued noncompliance. FFY 2019 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 2018 were 76.5 percent less likely to continue to be noncompliant in FFY 2019.

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 2018 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. Local EI programs participated in compliance and monitoring audits during 2020 and early 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2018 data.

The 100 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans included: Delay in contacting to schedule, holiday breaks resulting in late Initial IFSP's, inability to schedule sooner due to staff schedules, inadequate documentation of contact attempts or exceptional family circumstances and program's inability with current staff to meet the demand of completing intakes. The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2018 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2018

BWEIP contacted each of the local early intervention programs to review data findings from FFY 2018. 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 2018 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. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY18 involved 100 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 100 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2017	30	30	0

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Corrected Findings of Noncompliance Identified in FFY 2017

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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. 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 early intervention (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.

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.

The 30 UT findings of noncompliance are corrected. The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). BWEIP monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2017 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2017

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. Corrected findings in FFY2017 involved 30 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 30 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

**7 - Prior FFY Required Actions**

None

**7 - OSEP Response**

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR information 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 that it has verified that each EIS program or provider with findings of 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2018 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 2018 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.

## **7 - Required Actions**

## Indicator 8A: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	99.66%	99.75%

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,077	4,087	99.75%	100%	99.76%	Did Not Meet Target	No Slippage

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

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

**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, 2019 to June 30, 2020.

**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, 2019 to June 30, 2020.

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

Reasons for provider-caused delay were acquired through provider stakeholder feedback and review of child records. Feedback on this indicator during FFY 2019 included: local EI program lack of understanding and following of transition steps and services, local EI program documentation of transition planning, local EI program scheduling and coordination challenges, and inconsistent response from families to schedule visits. COVID-19 was identified as a factor impacting family willingness to meet and discuss transition steps and services.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
14	14		0

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

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

Corrected Findings of Noncompliance Identified in FFY 2018

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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 3 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 2018 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2018 program determination correction plans, as found in the APR attachments.

FFY 2018 cases were also reviewed to identify any continued noncompliance. FFY 2019 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 2018 were 71.4 percent less likely to continue to be noncompliant in FFY 2019. 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 2018 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. Local EI programs participated in compliance and monitoring audits during 2020 and early 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2018 data.

The 14 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the

El programs reported in their corrective action plans include: inadequate documentation of transition, inadequate data entry, service coordinator error, did not occur. The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2018 related to timely services on the IFSP.

The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2018

BWEIP contacted each of the local early intervention programs to review data findings from FFY 2018. 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 2018 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that transition steps and services occurred following delay/noncompliance. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY2018 involved 14 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 14 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2017	14	14	0

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Corrected Findings of Noncompliance Identified in FFY 2017

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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.

The 14 UT findings of noncompliance are corrected. 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.

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. The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2017 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2017

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. Corrected

findings in FFY 2017 involved 14 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 14 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

### **8A - Prior FFY Required Actions**

None

### **8A - OSEP Response**

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR information 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 that it has verified that each EIS program or provider with findings of 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2018 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 2018 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.

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	93.00%

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

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
3,984	4,087	100.00%	100%	100.00%	Met Target	No Slippage

**Number of parents who opted out**

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

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

The data for the FFY 2019 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, 2019 through June 30, 2020.

**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, 2019 to June 30, 2020

**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, 2019 to June 30, 2020.

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

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

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

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

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

**8B - Prior FFY Required Actions**

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8C - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	86.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.37%	99.10%	100.00%	99.52%	99.00%

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
2,360	3,398	99.00%	100%	99.07%	Did Not Meet Target	No Slippage

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

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

402

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.

608

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, 2019 - June 30, 2020

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, 2019 to June 30, 2020.

Provide additional information about this indicator (optional)

Reasons for delay were acquired through stakeholder feedback. Feedback on this indicator during FFY 2019 included: COVID-19 illness among local EI program staff, staff shortage in local EI programs, local EI program visit scheduling and coordination challenges, challenges scheduling an interpreter, and inconsistent response from families to schedule visits related to COVID-19 quarantine and other reasons.

Correction of Findings of Noncompliance Identified in FFY 2018

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
29	29		0

FFY 2018 Findings of Noncompliance Verified as Corrected

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

Corrected Findings of Noncompliance Identified in FFY 2018

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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 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 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 2018 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. Please see FFY 2018 program determination correction plans, as found in the APR attachments. FFY 2018 cases were also reviewed to identify any continued noncompliance.

FFY 2019 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 2018 were 64.7 percent less likely to continue to be noncompliant in FFY 2019. 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 2018 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. Local EI programs participated in compliance and monitoring audits during 2020 and early 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2018 data.

The 29 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans include: Data entry errors, inability to coordinate timely with preschool, lack of staffing due to holiday breaks, staff delays, and inadequate information documented.

The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions.

Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2018 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

**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 2018. 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 2018 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that transition conferences occurred following delay/noncompliance. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY2018 involved 29 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 29 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2017	10	10	0

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Corrected Findings of Noncompliance Identified in FFY 2017

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/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. 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.

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.

The 10 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans. The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions.

Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2017 related to timely services on the IFSP. The

Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2017

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. Corrected findings in FFY2017 involved 10 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 10 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

**8C - Prior FFY Required Actions**

None

**8C - OSEP Response**

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR information 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 that it has verified that each EIS program or provider with findings of 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.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2018 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 2018 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.

**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.**

State has not adopted Part B due process procedures

### 9 - Prior FFY Required Actions

None

### 9 - OSEP Response

OSEP notes that this indicator is not applicable.

### 9 - Required Actions



## Indicator 10: Mediation

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

### 10 - Indicator Data

#### Select yes to use target ranges

Target Range not used

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

NO

#### Prepopulated Data

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

#### Targets: Description of Stakeholder Input

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, and 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 all indicators during the FFY 2014-2019 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 November 2019, the ICC was consulted on the development of targets for FFY 2019. In November 2020 and January 2021, the ICC was consulted on the FFY 2019 APR data, discussing new SPP/APR data requirements, and establishment of future targets.

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 indicator's targets. Additionally, targets for indicator 11 were discussed and refined through calendar years 2019 and 2020. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2019 SiMR data was discussed in depth with the ICC on January 27, 2021.

On January 28, 2021 the Chair and Vice-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 use the State's Part C SPP/APR for FFY 2019 and confirms provision to our Governor (attached to APR).

No mediations were held during FFY 2019.

#### Historical Data

Baseline Year	Baseline Data
2005	0.00%

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

**Targets**

FFY	2019
Target>=	0.00%

**FFY 2019 SPP/APR Data**

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
0	0	0		0.00%		N/A	N/A

Provide additional information about this indicator (optional)

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

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

**10 - Required Actions**

## **Certification**

### **Instructions**

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

### **Certify**

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

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

Lead Agency Director

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

### **Name:**

Lisa Davenport, PhD

### **Title:**

Part C Coordinator, Program Manager

### **Email:**

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### **Submitted on:**

04/27/21 5:50:22 PM