

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2021**

Delaware



**PART C DUE
February 1, 2023**

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The DHSS Birth to Three Early Intervention Program - Administration (hereafter referred to as Administration) has multiple general components in place to ensure that Part C requirements are met. This is accomplished through sound policies and procedures; a statewide data system; monitoring and a system to ensure correction of noncompliance; fiscal management; coordination with interagency partners; stakeholder engagement; professional development and technical assistance; and a system of dispute resolution. The Program leverages these general supervision components to support the two Birth to Three Early Intervention Regional Programs – Child Development Watch (hereafter referred to as CDWs) and the 10 external early intervention service (EIS) provider agencies.

FFY 2021 has been another pivotal year for addressing compliance and quality performance issues in the state. The Program focused much of its attention on improving policy updates and strengthening the relationship with parents, staff and providers to enrich the State Systemic Improvement Plan (SSIP). Program policies and processes have been developed to focus on data being timely, complete, and accurate so that Administration can quickly attend to issues that need improvement. To continue in its efforts to improve compliance and outcomes for infants and toddlers with disabilities and their families, Administration continued to implement the strategies included in the Corrective Action Plan that was submitted to OSEP in response to OSEP's January 19, 2021 Differentiated Monitoring and Support (DMS) letter based on its December 2019 DMS visit to the state. In FFY 2021 Administration also accessed OSEP-recommended technical assistance from the Center for IDEA Early Childhood Data Systems (DaSy), Early Childhood Personnel Center (ECPC), the Early Childhood Technical Assistance Center (ECTA), and the Center for IDEA Fiscal Reporting (CIFR). Administration also contracted with WestEd for additional technical assistance support. Delaware has continued to provide OSEP with updates and additional information so that OSEP is aware of Administration's progress and assist them in determining the scope of engagement necessary to improve compliance. This will include further collaboration with OSEP-funded technical assistance centers and independent contractors, working with stakeholders to launch a root cause analysis process to identify the factors that contributed to low compliance, increasing training and technical assistance to Regional Programs - CDW, and accessing additional OSEP engagement and follow-up.

The Program engages with DHSS leadership, the two CDWs, EIS provider agencies, the Interagency Coordinating Council (ICC), Parent Information Center (PIC), the Department of Education (DOE), Early Head Start, Division of Children, Youth and their Families (DSCYF), and collaborates with the Lead Prevention Program as well as other interested partners to engage in continuous improvement, expand on outreach and engagement with family members, and plan for system changes to ensure high quality statewide early intervention services.

Stakeholder groups determined, when developing the FFY 2020 APR, that they would meet after the FFY 2021 data was collected to determine the need for review of the targets. It is in the intention of the stakeholder group to begin quarterly meetings to review data and determine appropriate target settings for the FFY 2022 APR.

As was stated previously, the Program continues to engage with various programs to enlist parent involvement in discussions that affect the birth to three population. Through various outreach events attended with our stakeholder groups, we are able to reach difficult or underserved populations not only for child find activities but also to make efforts for recruitment to our program as parent representative stakeholders.

Additional information related to data collection and reporting

While the availability of services was made easier with the parents' choice of virtual versus in home visits in light of the pandemic, the effects of the COVID pandemic continued to impact the provision of services for families. However, even with the challenges that were presented the CDWs were able to carry out successful delivery of early intervention services, collected and entered data, made timely payments to contracted providers, and provided services to meet the individual needs of children and families in the state.

Data System: The Birth to Three data system (DHSSCares) is a vital component to the general supervision system. The two CDWs enter and maintain their own data in DHSSCares. The data system is web-based to allow for data to be entered from state offices and remote, third-party locations with a dual factor authentication process for users to securely access the system. The system includes child demographics, referral, Part C eligibility, evaluations, assessments, family-directed assessments, Individual Family Service Plan (IFSP) data, service delivery data, child outcome scores, progress notes and transition conference details. This allows for a wide array of performance tracking and management reports to be generated at the state and regional levels.

Through a SQL data system, Administration can extract raw data from DHSSCares to generate Annual Child Count reports, Child Outcome Summary (COS) reports, and other data required for compliance and quality management purposes. Data training and TA are provided by Birth to Three – Administration to all Regional Program staff.

As a way to enhance the quality of data and its usefulness in efficient and effective data based strategic planning, DHSS has contracted and coordinated with a vendor who is in the process of creating a more enhanced data system which will replace the current DHSSCares system. It is anticipated that the new data system will be ready for production and data entry by July 1, 2023.

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.

Within DHSS as the lead agency, Administration is responsible for the general administration and supervision of programs and activities administered by the two CDWs and external early intervention service (EIS) providers. These responsibilities include:

The monitoring of programs through annual chart review, monthly compliance review and COS monitoring. Administration offers weekly alternating office hours, one for general/process and one for data/process concerns and questions. As part of the provider contract and process monitoring administration has begun the first of 4 cohorts of EIS provider monitoring. This monitoring is conducted via open interview process to determine if the EIS agencies are able to ensure that services are conducted in a timely manner (30 days from the date of written parental consent) and that the provision of all services are consistent with the IFSP.

Correcting any noncompliance identified through monitoring as soon as possible and in no case later than one year after the Lead agency's identification of the noncompliance. Administration engages in continual monthly data review for each Regional Program in compliance indicators where there was

less than 100% compliance.

The identification and coordination of available resources for EI services within the State, including those from federal, state, local, and private sources. Administration continues to contract with the Parent Information Center (PIC) of Delaware to support underserved populations and family outreach. Within DHSS, the Division of Public Health (DPH) is charged with the single line of authority. DPH has delegated responsibility for policy and monitoring to Birth to Three Administration. Administration, assigns financial responsibility through Memoranda of Understanding with key state agency partners (DOE and DSCYF) and fiscal management based on federal and state fiscal requirements.

Administration ensures timely dispute resolution through the establishment of procedures in its Birth to Three Early Intervention Policies and Procedures Manual (Manual) for mediation, due process hearings, and state complaints. Administration has provided training regarding Part C to due process hearing officers and mediators. Further, Administration is in the process of finalizing an internal dispute resolution processes guidance document.

In addressing integrated monitoring activities, Administration annually monitors the CDWs on compliance and performance measures, based on the collection, analysis and utilization of data from the statewide data system as well as the Family Outcomes Survey report. Administration developed an improved monitoring tool and process steps. Administration conducts its monitoring for the SPP/APR compliance indicators via record reviews. Based on the information collected through this monitoring, Administration issued monitoring reports to each of the CDWs and worked with each CDW to identify, document, and sustain individual and systemic correction.

Beginning in FFY 2020 and into FFY 2021, Administration developed of a more in-depth accountability system for the monitoring and accountability component of the General Supervision system. The program Corrective Action Plan (pCAP) template continues to be used as a tool for Administration, the CDWs and external EIS providers for determining reasons for noncompliance, using root cause analysis logic and benchmarks for improvements. In order to verify correction of previously identified noncompliance as required by OSEP Memo 09-02, Administration has established and implemented procedures for determining whether a Regional Program has achieved both systemic and Individual correction. The state verifies that the Regional Program: (1) is correctly implementing the specific regulatory requirements based on a review of updated data showing two consecutive months of 100% compliance; and (2) has corrected each individual case of noncompliance (although late), unless the child is no longer within the jurisdiction of the early intervention program or provider. In monitoring reports issued to the CDWs on January 4, 2021, Administration made findings of noncompliance based on FFY 2019 data, requiring correction by January 4, 2022. DHSS is reporting, in each of the compliance indicators in this SPP/APR, on the status of the correction of those FFY 2020 findings of noncompliance, including detailing the actions that DHSS has taken to verify systemic and individual correction and the actions that Administration has taken when the CDWs have not yet corrected the noncompliance originally identified. Administration has provided targeted technical assistance and training to support compliance by the CDWs. In order to ensure that individual instances of noncompliance are addressed, the Data Manager reviewed progress notes and data system entries. By utilizing these measures, the Data Manager was able to determine that, while in some cases timelines were not met, those services or actions were completed, although late.

Administration staff participate in outreach events occur throughout the year. They attend and provide resource materials to at risk populations, general public, and EI professionals. Some of the outreach activities are specifically designed to reach underserved population. A new brochure was created and distributed to outreach partners. This brochure about the Birth to Three Program and the importance of developmental screenings, is available in English, Spanish, and Haitian. Foster families, homeless or displaced families and multi-cultural populations are a main focus of several of the outreach activities. Statewide collaboration occurs with many families and child servicing organizations including: New Directions Early Head Start, the Child Care Association of Sussex County Delaware, Exceptional Family Member Program at the Dover Air Force Base.

Administration staff also participated in the planning and provision of vendor information tables at conferences. Some of the outreach activities were Mickey Fest, Help Me Grow Anniversary Event, Dover Airforce Base Firehouse Family Day, Milford Community, Rosehill Community, Do Care Duoula Foundation Baby Showers, and the Family Shade Summit. The Program experienced a 10 percent increase in the number of referrals due to these outreach activities. To address the increase in the number of referrals, the Program participated in an active EIS provider recruiting regime that was conducted outside of the normal RFP process. Its intent was to have EIS providers move quickly through the contract process while waiting to be approved through the RFP.

For fiscal management and accountability, Administration has in place a System of Payment policy, approved by OSEP in 2015 and reapproved in August 2021. Administration utilizes a central billing system to process claims. With prior written notification and written parental consent, private and public insurances are accessed to contribute funds for services. The state has had a family fee structure in place for several years, but the System of Payments policy has been revised in 2022 with the removal of family fees. This proposed policy change will be reviewed by the public in Spring 2023 and be submitted as part of the FFY 2023 grant application. If approved by OSEP, it goes into effect beginning July 2023. In addition, Administration ensures that federal Part C funds are not used to supplant other state and federal funding, are used as the payor of last resort, and obligated and liquidated within the allowable timeframe and for appropriate activities.

Through technical assistance provided by CIFR, Administration fiscal staff have revised and improved billing and fiscal data guidelines for programs, strengthened the communication with finance staff in DHSS to ensure accurate tracking of funding revenue and expenses, and increased oversight of the use of Part C funds by CDWs.

Technical Assistance System:

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

During the past year Administration has engaged in extensive technical assistance to address some of the state-identified needs as well as the information addressed during the OSEP onsite visit. These TA activities included participation in:

- National Service Coordinator Training Workgroup and the subgroup on the Service Coordinator Leadership both supported by DEC and ECPC
- Part C Data Manager Calls that are set up by ECTA
- Monthly OSEP TA calls
- Participation in multiple webinars hosted by national TA Centers
- Participation with CIFR in the Community of Practice calls, 2022 IDEA Fiscal Forum, and engagement in Intensive TA
- Regular TA meetings and work with independent contractors, Ardith Ferguson (WestEd) and Larry Ringer (consultant)
- Participation in the 2022 IDIO Conference

Administration provides training and technical assistance for each of the two Regional Programs – CDW. Program leadership provides regulatory guidance and technical assistance to ensure progress towards compliance and evidence-based service delivery practices. All new staff are required to participate in a 16-hour training and orientation on federal policies and regulatory guidance on early intervention and service coordination, as well as on the Delaware specific early intervention program. The training modules are also utilized as resources for veteran service coordinators to ensure consistency of information and best practices. Open Office Hours have been maintained by the Part C Coordinator to engage in one-on-one discussion of programmatic concerns with the CDWs. All staff are encouraged to participate.

Administration provides individualized, targeted technical assistance as needed, and ongoing TA occurs via phone, email and virtually. Administration also provides training on the DHSSCares data system to allow for consistency in data management and program documentation. One-on-one technical

assistance is also available to individual staff as requested or identified through monitoring. Training and ongoing TA are offered on topics such as transition, early childhood outcomes, birth mandates, and other topics as necessary. Data Open Office Hours are maintained by the Part C Data Manager to encourage engagement of the Regional Programs – CDW in technical questions regarding the DHSSCares data system or data which are used in annual reports.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year-old by 25%. In addition, Administration collaborates, in attendance, with the Early Hearing Detection and Intervention Advisory Board (EHDI) program and The Governor's Advisory Council for Exceptional Citizens (GACEC).

Administration continues to work with WestEd to develop training and materials to explain the dispute resolution options under Part C of the IDEA: mediation, written state complaints and the due process hearing procedures specific to families with infants or toddlers with disabilities. Materials from the Center for Appropriate Dispute Resolution in Special Education (CADRE) are also being shared as part of the training. Delaware adheres to Delaware Part C due process hearing procedures. Administration will also continue to work with contracted TA consultants to solidify a process for tracking any disputes and resolutions that may occur in Delaware

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.

Administration has mechanisms in place to ensure that service providers are provided ongoing training and technical assistance to effectively provide services that improve results for infants and toddlers with disabilities and their families. Delaware has received technical assistance from Early Childhood Personnel Center (ECPC) and participated in ECPC leadership institutes to support a birth to five comprehensive systems professional development plan to address training and professional development needs in early intervention and early childhood systems. This plan is continually reviewed by Delaware stakeholders to assess this cross sector sustainable personnel and professional development system for all programs serving young children, in order to sustain a qualified work force. Birth to Three - Administration actively participates in the Early Childhood Early Intervention Professional Development Community of Practice (ECEIPDCoP), and National Service Coordinators Training Workgroup to address training needs of early intervention service coordinators. Birth to Three staff access both national and local resources, including conferences and webinars, to stay current on best practices and federal requirements. While the Program's early intervention personnel standards are still in the earliest stages of redevelopment, the current standards are reinforced through provider contracts and enhanced communication with Regional Program staff.

In addition, Administration also collaborates with Regional Program – EIS provider leadership in the hiring of all Early Childhood Special Educators (ECSE) providing services to infants and toddlers with disabilities who participate in early intervention services in Delaware. Administration has in place a Personnel Standards and Guidelines Matrix that ensures all ECSEs have appropriate collegiate certification and professional experience with a focus on infants and toddlers with special needs, and their families.

Administration has collaborated with the Delaware State Professional Development System to aide in the development of an early intervention personnel development tracking system. The purpose of this collaboration is to incorporate early intervention modules, trainings and policy reviews into the Delaware Learning Center (DLC), a state run training program. Administration will be able to utilize the DLC to track participation, analyze if the training is effective and to provide certificates to participants as they complete necessary goals.

Broad Stakeholder Input:

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

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birthtothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHDI) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team. The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders

to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP) they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware's CRESPP program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state's improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

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

YES

Number of Parent Members:

5

Parent Members Engagement:

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

Whenever there was an opportunity to involve individual parents and advocates, Administration staff would send invitations to and through the Interagency Coordinating Council (ICC) which occurs quarterly, the Parent Information Center (PIC), and other family networks to engage families and providers in deep and meaningful ways to understand the current needs of families. As a result of enhanced communication via emails, word of mouth, and announcements made for inviting parent feedback, improvement strategy recommendations were also gathered from parents in one-on-one conversations with the Part C Coordinator. Administration is developing a monthly outreach and resource calendar for parents. This calendar will be made available to currently enrolled parents as well as to the targeted birth to three population through the PIC. We intend to use our new data system as a means of advertisement for parent participation in outreach activities. Making the monthly calendar of activities and resources available through the parent portal will enable our parents to be more aware of opportunities of participation.

Activities to Improve Outcomes for Children with Disabilities:

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

Stakeholder groups were invited to capture diverse representation of our populations in making decisions on future targets and implementation strategies.

The stakeholder groups intend to continue to meet at least on a quarterly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. We continue to work closely with PIC to encourage parents, from diverse populations, to attend the meetings and become active members in our groups. We intend to conduct more focus groups specifically targeting those parents who are part of underserved populations.

Soliciting Public Input:

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

Ongoing stakeholder meetings occur on weekly, biweekly and monthly basis. These groups are comprised of early intervention service providers, parents, Department of Education representatives, independent contractors for provider agencies, and other interested parties. The two SSIP work groups are held frequently, as are Ages and Stages reviewer meetings. Open office hours for both general information and data information are held on alternate weeks and any interested party can attend. Community of practice calls for child find activities such as screenings are held monthly. Each of these meetings are utilized to look at current data, discuss the validity and accuracy as well as developing improvement strategies to determine if the targets are being met.

Making Results Available to the Public:

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

Discussions surrounding target setting are conducted on a monthly basis and the results and recommendations that stakeholders make are presented quarterly at ICC meetings. Continued data analysis is presented at the quarterly ICC Meetings.

Reporting to the Public:

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

Administration reports to the public on the performance of each Regional Program on the targets in the SPP/APR as soon as practicable, but not later than 120 days following the submission of its FFY APR as required by 34 CFR §303.702(b)(1)(i)(A).

The state has reported to the public, as required, for FFY 2020 at the following URL:

2022.02.03_RegionalMonitoringFFY20_PubReporte_.xls (delaware.gov)

A complete copy of the Program's SPP, including any revisions, and the APR are located on the Birth to Three website at Birth to Three Early Intervention Program - Delaware Health and Social Services - State of Delaware

Birth to Three - Administration reports on the following:

- A. Current data;
- B. Current data performance in relation to state targets for each of the two CDWs using percentage measurements;
- C. Description of whether the Regional Program met the target, made progress or slipped.

The Regional Program Performance Report also includes:

Data are generated from the following sources:

- A. DHSSCares data system;
- B. Family Outcomes Survey;
- C. Onsite monitoring;
- D. Table 1 Report of Children Receiving Early Intervention Services in Accordance with Part C; and,
- E. Table 2 Report of Program Setting Where Early Intervention Services are Provided to Children with Disabilities and Their Families in Accordance with Part C

Per section 508 and Section 255 of the Rehabilitation Act of 1973, each report is completed within 508 compliance to be visually safe and accessible for individuals with disabilities

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

The State attached its 2022 Annual Report Certification of the State Interagency Coordinating Council (SICC) Form. The State must submit its 2023 SICC form to confirm that the SICC is supporting the State's submission of the FFY 2021 SPP/APR.

The State did not describe the mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR and subsequent revisions that the State made to those targets. Specifically, the State did not report a description of the activities conducted to increase the capacity of diverse groups of parents.

OSEP notes that the State submitted verification that the attachment complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the attachments included in the State's FFY 2021 SPP/APR submission are not in compliance with 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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	81.28%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	79.75%	64.54%	55.33%	82.37%	85.19%

Targets

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

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
63	100	85.19%	100%	79.00%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Birth to Three saw a 10% increase in the number of referrals in the past fiscal year. This increase in the number of children referred, evaluated, and found eligible for early intervention services has made it even more challenging to meet the 30-day timeline from parent consent to the date on which services begin.

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.

16

Provide reasons for delay, if applicable.

Of the 16 families for whom the delays in the initiation of services were due to exceptional family circumstances, 5 were impacted by COVID, either by a sick family member or concern of exposure. One child was hospitalized so it was not possible to begin the service within 30 days, two families had a sick family member, four delays were due to family request, one family did not show for their initial visit, one family had consented to services but subsequently withdrew consent to the services in their IFSP and two families had children with medical conditions which caused delays in the service beginning within 30 days of the parent's written consent.

A total of 21 families had delays in services not related to exceptional family circumstances. Families of 16 infants/toddlers experienced delays due to services not being available through the Regional External Early Intervention Service Providers. One family had a delay in services because of EIS provider cancellation, one family had a delay due to the interpreter cancelling the initial visit, and three delays were due to family service coordinator scheduling issues.

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).

The state determines that the definition of timely service delivery to be that each service will start within 30 calendar days of the written parental consent which is indicated as a signature on the IFSP (Section 12). Birth to Three – Administration calculates timeliness by the time period elapsed between the date the parent provides written consent to each of the services in the IFSP and the actual start date of each service.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

DHSS monitors both CDWs every year for all compliance indicators using the statewide data system to capture compliance data.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	0	0	2

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Because the Regional Programs – CDW failed to correct the January 4, 2021 findings by January 4, 2022, and there was slippage in the data from the previous fiscal year, a corrective action plan meeting occurred in June 2022. During this meeting Administration and CDWs, which included CDW and the EIS Providers, indicated that a new referral system was going to be implemented in July 2022. This referral system (Referral Portal) was implemented beginning July 1, 2022. The CDWs post each child and family needing EIS on the Portal, and then, after first confirming that the provider agency had the needed personnel to begin each EIS within 30 days from referral, will use the Portal to accept the case. Not only will the process help to increase the timeliness of the provision of services, it will also allow Administration the opportunity to determine which services need more targeted recruitment because of the lack of availability. Administration is working with the Regional Programs – CDW by providing monthly Indicator 1 reports showing the number of services that were provided timely, which were provided late and had exceptional family circumstances as well as those services which provided late and did not have exceptional family circumstance. The Regional Programs – CDW are able to better monitor the new referral process and provide guidance to coordinators who may be part of a trend in not getting services started in a timely manner. This process will provide up-to-date knowledge on what is occurring with services so that the Regional Programs – CDW and EIS Providers are able to better address the continued noncompliance. In addition, the Portal allows EIS Providers the opportunity to gather data to determine which disciplines are in need to be recruited.

Only findings made for Indicator 1 were the FFY 2020 findings of noncompliance made on January 4, 2021. There were no previous reports, and subsequent reports continued the findings made on January 4, 2021 rather than making new findings.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

1 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

As noted above, only findings made for Indicator 1 were the FFY 2020 findings of noncompliance made on January 4, 2021. There were no previous reports, and subsequent reports continued the findings made on January 4, 2021 rather than making new findings.

1 - OSEP Response

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 ED Facts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	85.12%

FFY	2016	2017	2018	2019	2020
Target>=	90.03%	90.04%	90.05%	95.41%	95.58%
Data	96.21%	96.52%	95.41%	95.59%	95.58%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	95.61%	95.64%	95.67%	95.70%	95.73%

Targets: Description of Stakeholder Input

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birthtothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHDI) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team.

The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP) they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware’s CRESPP program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state’s improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,174
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	1,202

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,174	1,202	95.58%	95.61%	97.67%	Met target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7, 8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birthtothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHD) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team. The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP) they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware's CRES program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state's improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2008	Target>=	48.30%	48.40%	48.50%	48.60%	61.25%
A1	46.63%	Data	64.89%	63.79%	63.74%	68.01%	61.25%
A2	2008	Target>=	40.30%	40.40%	40.50%	49.24%	45.51%
A2	48.73%	Data	53.63%	41.46%	38.00%	39.29%	33.49%
B1	2008	Target>=	50.30%	50.40%	50.50%	50.60%	65.42%
B1	48.39%	Data	70.44%	67.68%	69.25%	69.51%	65.42%

B2	2008	Target>=	45.30%	45.40%	45.50%	45.60%	41.51%
B2	41.53%	Data	49.79%	36.15%	34.62%	33.58%	27.77%
C1	2008	Target>=	50.30%	50.40%	50.40%	51.06%	65.97%
C1	50.54%	Data	65.30%	65.28%	67.05%	71.01%	65.97%
C2	2008	Target>=	45.30%	45.40%	45.50%	47.98%	46.47%
C2	47.46%	Data	50.62%	42.61%	41.25%	39.83%	36.64%

Targets

FFY	2021	2022	2023	2024	2025
Target A1>=	61.50%	61.75%	62.00%	62.25%	62.50%
Target A2>=	45.52%	45.53%	45.54%	45.55%	48.75%
Target B1>=	65.67%	65.92%	66.17%	66.42%	66.67%
Target B2>=	41.52%	41.53%	41.54%	41.55%	41.56%
Target C1>=	66.22%	66.47%	66.72%	66.97%	67.22%
Target C2>=	46.48%	46.49%	46.50%	46.51%	47.47%

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

814

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	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	301	36.98%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	223	27.40%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	199	24.45%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	91	11.18%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	422	723	61.25%	61.50%	58.37%	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	290	814	33.49%	45.52%	35.63%	Did not meet target	No Slippage

Provide reasons for A1 slippage, if applicable

While, during evaluation, the State did not see an increase in Social Emotional developmental delays, once services started, the interventionists found that in other delay areas, children were affected on a social emotional level. Due to the restrictions of COVID, children were unable to participate in activities with peers. The lack of peer interaction made an impact on the potential progress of the children. Other challenges that children and families faced, related to COVID, consisted of breaks in services that were once provided in the home or childcare which then had to be provided via telehealth.

Some parents were working from home and may have had other children in the home who were expected to attend school via online learning, which would interfere with access to [online] services. Additionally, a parent's opportunity to engage in coaching therapy with interventionists in a manner that would benefit the child was affected by the switch to virtual communications. Services for children were also impacted by the 10-day quarantine due to positive COVID results or cases of voluntary quarantine because of exposure to COVID. Inconsistencies due to family concerns impacted all areas of the COS, not just social emotional.

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	298	36.61%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	269	33.05%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	186	22.85%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	61	7.49%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	455	753	65.42%	65.67%	60.42%	Did not meet target	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	247	814	27.77%	41.52%	30.34%	Did not meet target	No Slippage

Provide reasons for B1 slippage, if applicable

Due to the restrictions of COVID, children were unable to participate in activities with peers. The lack of peer interaction made an impact on the potential progress of the children's acquisition and use of knowledge and skills which include early language and communication. Other challenges that children and families faced, related to COVID, consisted of breaks in services that were once provided in the home or childcare which then had to be provided via telehealth. Some parents were working from home and may have had other children in the home who were expected to attend school via online learning, which would interfere with access to [online] services. Additionally, a parent's opportunity to engage in coaching therapy with interventionists in a manner that would benefit the child was affected by the switch to virtual communications. Services for children were also impacted by the 10-day quarantine due to positive COVID results or cases of voluntary quarantine because of exposure to COVID. Inconsistencies due to family concerns impacted all areas of the COS, not just social emotional.

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	310	38.08%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	195	23.96%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	278	34.15%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	31	3.81%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who	473	783	65.97%	66.22%	60.41%	Did not meet target	Slippage

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
substantially increased their rate of growth by the time they turned 3 years of age or exited the program							
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	309	814	36.64%	46.48%	37.96%	Did not meet target	No Slippage

Provide reasons for C1 slippage, if applicable

Due to the restrictions of COVID, children were unable to participate in activities with peers. The lack of peer interaction made an impact on the potential progress of the children's appropriate behaviors to meet their needs. Other challenges that children and families faced, related to COVID, consisted of breaks in services that were once provided in the home or childcare which then had to be provided via telehealth. Some parents were working from home and may have had other children in the home who were expected to attend school via online learning, which would interfere with access to [online] services. Additionally, a parent's opportunity to engage in coaching therapy with interventionists in a manner that would benefit the child was affected by the switch to virtual communications. Services for children were also impacted by the 10-day quarantine due to positive COVID results or cases of voluntary quarantine because of exposure to COVID. Inconsistencies due to family concerns impacted all areas of the COS, not just social emotional.

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	1,339
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.	442

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The COS is completed as part of the IFSP process at the Initial IFSP meeting and after the completions of Transition activities. Information for the initial rating is collected during the MDE and MDA processes, using a variety of developmental test tools, observation, and family report; and the exit rating is based on the most current assessments of the providers, observation and family report. The IFSP team uses the Child outcomes Summary (COS) process to collect and report child outcomes data to the federal government.

Birth to Three – Administration runs a SQL report of raw data based on the criteria necessary to complete this indicator, which is then interpreted for the use in the COS reporting. Periodic review is conducted to ensure valid and reliable child outcome data are entered.

Provide additional information about this indicator (optional).

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2006	Target>=	91.20%	91.60%	92.00%	92.40%	92.23%
A	46.30%	Data	89.18%	93.75%	92.23%	92.23%	98.26%
B	2006	Target>=	94.20%	94.60%	95.00%	95.40%	95.35%
B	49.00%	Data	97.39%	97.37%	96.11%	96.11%	95.36%
C	2006	Target>=	94.20%	94.60%	95.00%	95.40%	96.19%

C	55.90 %	Data	94.78%	97.04%	96.82%	96.82%	96.23%
---	---------	------	--------	--------	--------	--------	--------

Targets

FFY	2021	2022	2023	2024	2025
Target A>=	92.33%	92.43%	92.53%	92.63%	92.73%
Target B>=	95.45%	95.55%	95.65%	95.75%	95.85%
Target C>=	96.29%	96.39%	96.49%	96.59%	96.69%

Targets: Description of Stakeholder Input

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birthtothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHD) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team. The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP) they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware's CRESPP program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state's improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	1,110
Number of respondent families participating in Part C	346

Survey Response Rate	31.17%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	334
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	346
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	333
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	346
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	342
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	346

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	98.26%	92.33%	96.53%	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)	95.36%	95.45%	96.24%	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)	96.23%	96.29%	98.84%	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?	YES
If your collection tool has changed, upload it here.	
The demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program.	YES

Survey Response Rate

FFY	2020	2021
Survey Response Rate	32.52%	31.17%

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

During the contract negotiation process, Administration collaborates with the University of Delaware's CRESP program to determine where underlying needs may be for increasing the response rate year over year. For FFY 2021 reporting, the majority of the surveys were introduced to the families via email or text message. In cases where an email or cell phone was not available, a letter was mailed to the parents' home address. In this year's contract negotiation for the FFY 2022 Family Survey, Administration and the CRESP program are discussing the possibility of outreach infographics and a social media presence to help families become aware of the survey, the need to fill out the survey, as well as how to access the survey. Training service coordinators in better describing the survey process and expectation is also on the list of activities. We intend to use the data provided in the FFY 2021 Survey to dictate where our resources need to go in order to reach underrepresented populations.

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

Statistical analyses of survey data were conducted in a Statistical Package for Social Sciences (SPSS) program. To treat missing quantitative data, we excluded cases based on individual case analysis. We used descriptive (mean, standard deviation) and summary statistics (percentage of responses for 'strongly agree,' 'agree,' 'disagree,' 'strongly disagree') to describe the basic features of the survey data. In addition, to compare how families scored across items, survey data were analyzed using the independent-samples Mann Whitney U tests (for comparing 2 groups) or Kruskal-Wallis tests (for comparing three or more groups) of significance. P-values were set at .05.

Families were compared across demographic characteristics (child's age, child's biological sex, county, child's race, child's ethnicity). The category

'child's race' was collapsed from the original groups to 'White' (1) and 'children of color' (2) due to uneven distribution of families across the original categories. Likewise, the category 'child's age' was collapsed from the original groups to 'Birth to 2' (1) and 'Over 2' (2) due to the uneven distribution of families across the original categories. Tests of significance were run for every group of survey items. In addition, post-hoc tests were conducted following Kruskal-Wallis tests to analyze all pairs of groups. Significance values for post-hoc tests are Bonferroni corrected to control for Type I error.

In addition to the Likert-style questions, the survey asked three open-ended questions, which asked families to (1) Please share with us if the changes in your Family Service Coordinator have affected your family's experience in the B23/Child Development Watch Program, (2) Please share with us any additional information about your experience with the B23/CDW program, and (3) Do you have any suggestions for us to improve in the future?. Two-hundred and fifty-nine (259) open-ended responses were provided in relation to these three items.

Qualitative data were analyzed using open coding to identify themes. Responses in Spanish were translated to English by bilingual research staff during the coding process. Where Spanish quotes are provided throughout the report, an English translation is provided in square brackets immediately following the original text. A complete list of all open-ended responses is provided in Appendix C. All identifying information (e.g., names) have been removed from the comments to ensure confidentiality.

The State utilizes a number of steps and strategies to address identified bias. This year the majority of the surveys were conducted via email, where in the past we depended on the responses to be provided via phone conversations. It was found that by using email, families were more readily able to participate. Moving forward, the State has determined that utilizing infographics distributed electronically and at outreach events to promote better participation of parents in the survey. The outreach events specifically target the underserved populations of Delaware such as the Hispanic, Haitian/Creole and military population. The State has created a new infographic which will be distributed quarterly to all parents who have children with active IFSPs. The infographic indicates that the parents should be prepared for potential contact from the CRESPP program to participate in the survey. It is the intention of this process to have the parents be more aware of the survey, the need of the survey and the availability of the survey.

The State acknowledges at this time that we are unable to provide a deeper analysis of non-response bias due to the nature of the blind survey. In previous years it was decided to not include specific identifiable information due to the parent's fears of punitive measures should coordinators become aware of their answers to the survey. We intend to work with the University of Delaware's CRESPP program to establish a means to capture information in a non-identifiable way to better gather information for analysis.

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

Based on the Child Count and Settings report compared to the Family Survey, data on race were 18.89% (21.1% Family Survey) of the population was Hispanic, .17% (<.1% Family Survey) were American Indian / Alaska Native, 3.08% (5% Family Survey) were Asian, 26.37% (24% Family Survey) Black, .17% (0% Family Survey) NH/PI, 47% (48.27% Family Survey) Ca, 4.33% (8.38% Family Survey) of more than one race. Our Child Count report shows that 8.49% of the children were Birth to 1 years, the Family Survey shows that 1.2% of children were represented. For the one – two year population of 28.87%, the Family Survey showed that 23% were represented. For the two to three year population of 62.65%, the report showed that 55.5% of the population was represented.

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

The confidence intervals for data from FFY 2020 and FFY 2021 are as follows: Parents know their rights, FFY 20 ± 1.23%, and FFY 21 ± 1.69%. Qualitative questions were asked which helped us to determine that continued training of the Family Service Coordinators helped them to discuss and assist parents with understanding and knowing their rights. For parents being able to effectively communicate their child's needs – FFY 20 ± 1.94% and FFY 21 ± 1.75% which is not a significant difference. Lastly, for parents who feel they can help their child develop and learn, FFY 20 - ± 1.76% and FFY 21 ± 1.03% which is a significant difference.

Geographic Location

The family outcomes federal reporting requirement for Part C programs requires that states report on the percent of families for whom their participation in early intervention services has helped their family know their rights, effectively communicate their children's needs, and helped families help their children develop and learn. Families overwhelmingly indicated (92%-97% agree or strongly agree) that early intervention services (i.e., the Regional Program - CDW program) has helped their family in these areas. Most families also reported positive experiences with the B23/CDW admission process. Similar to last year, families had mixed perceptions about the transition process, with some families reporting struggles with the transition process out of B23. Families' experiences with their Family Service Coordinators and Early Intervention Providers were highly rated. Approximately one-quarter of families surveyed indicated that they experienced a change in their family service coordinator over the past year. Families reported mixed perceptions related to the changes in their coordinator. Although most families responded positively to survey items, tests of significance revealed differences between families living in New Castle County and families living in Sussex and Kent Counties. Specifically, New Castle participants scored some items lower than participants from Kent/Sussex Counties. While analyses revealed that there were significant differences between families' scores, the means for all items remained in the '3' range (where 1= Strongly Disagree and 4= Strongly Agree). As such, it's important to note that most families are satisfied with the services they are receiving.

A Kruskal-Wallis test was used to compare whether families living in New Castle, Sussex, and Kent Counties answered items significantly differently. The tests indicated that families living in different counties scored significantly differently on only one item, "Helped me know about my family's rights", $H(2)=10.34$, $p=.006$. Pairwise comparisons revealed that there were significant differences between New Castle County and Kent County $H(2)=41.50$, $p=.004$. A comparison of group means indicates that families from Kent County ($M= 3.68$, $SD=.508$) rated this item higher than families from New Castle County ($M= 3.38$, $SD=.641$). None of the other comparisons were significant.

Nine open-ended responses referenced the fact that the B23/CDW program has helped them (and their family) know how to help their child develop and learn. Relatedly, 13 families reported that B23/CDW services have helped their child develop and learn. A couple of these quotes are highlighted below.

Provide additional information about this indicator (optional).

The survey tool underwent significant revision last year for the 2020-2021 iteration of the survey. During last year's revision, the research team conducted exploratory factor analysis, a jurisdictional scan of available Part C Family Outcome Surveys, and a review of previous final reports on the B23/Family Outcomes Surveys. In addition, the research team collaborated with staff members from Delaware's Department of Health and Social Services (DHSS), and staff from Birth to Three Early Intervention Program Child Development Watch to inform the survey's development.

This year (2021-2022), the survey underwent additional revision and refinement to reflect the opinions of the ICC. The research team met with stakeholders from the ICC twice on November 17, 2021 and December 1, 2021. During the first meeting, the 2020-2021 survey was reviewed and the stakeholders discussed potential areas for further refinement. Stakeholders suggested revisions to (a) remove items that were redundant or lacking in

value, (a) refine questions to reduce confusion, (c) add items where stakeholders perceived they were needed.

After the first meeting, members of the research team revised the survey based on the stakeholders' feedback and submitted the revised tool to the stakeholders for review. During the second meeting, proposed changes were discussed and voted on by the stakeholder group.

The revised survey has eight sections of information collection and a demographic section for use during the analysis of responses. Several question formats were used in the survey. The demographic section includes a checklist response to questions. Sections one to six were set up as a 4-point Likert scale to establish "degree of alignment" with the statement made (1 = strongly disagree; 2 = disagree; 3 = agree; 4 = strongly agree). Sections seven and eight of the survey were set up as open-ended questions to allow respondents to describe issues that are important to them. In addition, section 4a includes an open-ended question to allow respondents to describe their experiences with changes to their Family Service Coordinator. The eight revised survey sections are as follows:

1. Demographics (4 questions)
2. Federal Reporting Requirements (3 questions)
3. The B23/CDW admissions process (3 questions)
4. Families' experiences with their family service coordinator (10 questions)
 - a. Families' experiences with changes to their Family Service Coordinator (if applicable) (3 questions)
5. Families' experiences with their Early Intervention Provider(s) (7 questions)
6. Families' experiences during the transition process (6 questions)
7. Families' perceptions about their experiences with the B23/CDW program (1 question)
8. Families' perceptions about how B23/CDW can improve its services (1 question)

See attached Family Survey Report.

4 - Prior FFY Required Actions

None

4 - OSEP Response

In its description of its FFY 2021 data, the State did not describe strategies that will be implemented to increase the response rate year over year for those groups that are underrepresented, as required by the Measurement Table.

The State analyzed the response rate to identify potential nonresponse bias; however, the State did not identify steps to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities, as required by the Measurement Table.

OSEP notes that the State submitted verification that the attachment complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the attachments included in the State's FFY 2021 SPP/APR submission are not in compliance with Section 508.

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.98%

FFY	2016	2017	2018	2019	2020
Target >=	1.02%	1.04%	1.05%	1.06%	0.50%
Data	1.14%	1.03%	0.83%	0.89%	0.50%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	0.60%	0.70%	0.80%	0.90%	1.00%

Targets: Description of Stakeholder Input

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birthtothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHD) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team.

The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP)

they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware’s CRESP program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state’s improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	102
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	10,280

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
102	10,280	0.50%	0.60%	0.99%	Met target	No Slippage

Provide additional information about this indicator (optional)

DHSS collaborated with the Department of Education (DOE) and the Office of Early Learning (OEL) by adding an Ages and Stages Questionnaire (ASQ) link to the Birth to Three website. This is to offer families an additional opportunity to access developmental screenings. Birth to Three – Administration continues to contract with Help Me Grow/211 to ensure that any ASQ screenings that come through the Birth to Three – Administration portal are processed timely so that parents are aware of their child’s current developmental needs. Should a screening indicate the need for further evaluation, a referral is sent to the Regional Program – CDW. The governor has approved legislation, that beginning July 2023, all licensed childcare providers must conduct Ages and Stages screenings on the children enrolled in the childcare programs in order to maintain their licensure. This will mean an increase in the number of referrals that the CDWs will receive. Birth to Three - Administration is working with the DOE/OEL Developmental Screening Technical Assistant team to determine the impact that the new legislation may have on our programs. Birth to Three staff continue to attend core leadership team meetings as well as community of practice meetings in conjunction with the school districts to collaborate on resources and mechanisms to put into place when the 2023 timeline starts.

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	2.94%

FFY	2016	2017	2018	2019	2020
Target >=	2.73%	2.74%	2.75%	2.76%	2.97%
Data	3.31%	3.31%	3.27%	3.50%	2.97%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	3.00%	3.03%	3.06%	3.09%	3.12%

Targets: Description of Stakeholder Input

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birththreetothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHDI) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team. The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP) they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware’s CRESPP program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state’s improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	1,202
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 3	31,412

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,202	31,412	2.97%	3.00%	3.83%	Met target	No Slippage

Provide additional information about this indicator (optional).

DHSS collaborates with the Department of Education (DOE) and, within the DOE, the Office of Early Learning (OEL) by adding an Ages and Stages Questionnaire (ASQ) link to the Birth to Three website. This is to offer families an additional opportunity to access developmental screenings. Birth to Three – Administration continues to contract with Help Me Grow/211 to ensure that any ASQ screenings that come through the Birth to Three – Administration portal are processed timely so that parents are aware of their child’s current developmental needs. Should a screening indicate the need for further evaluation, a referral is sent to the Regional Program – CDW. The governor has approved legislation, that beginning July 2023, all licensed childcare providers must conduct Ages and Stages screenings on the children enrolled in the childcare programs in order to maintain their licensure. This will mean an increase in the number of referrals that the CDWs will receive. Birth to Three - Administration is working with the DOE/OEL Developmental Screening Technical Assistant team to determine the impact that the new legislation may have on our programs. Birth to Three staff continue to attend core leadership team meetings as well as community of practice meetings in conjunction with the school districts to collaborate on resources and mechanisms to put into place when the 2023 timeline starts.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	89.90%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	89.67%	82.11%	92.67%	86.78%	97.71%

Targets

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

FFY 2021 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
58	100	97.71%	100%	81.00%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

With the onset of the 10% increase in referrals in FFY 2021, timely multidisciplinary evaluations became a challenge for one of the CDWs. The Regional Program – CDW with the challenge of not being able to provide a timely multidisciplinary evaluation which led to a late initial IFSP meeting has since

revised their processes. Because of the revised processes and upon continued monthly review of Indicator 7 data, so far for FFY 2022, the regional program in question is in 100% compliance.

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.

23

Provide reasons for delay, if applicable.

Data indicated that 58% (58/100) of families had an IFSP meeting conducted within 45 days, and a total of 42 (42%) of families did not receive an initial IFSP meeting within 45 days of the referral date. Of those 42 families, 23 (23% of the 100 records reviewed) had initial IFSP meetings beyond the 45-day timeline due to documented exceptional family circumstances. Those reasons were indicated as one family cancelled the initial IFSP meeting, three families had an illness which prevented the initial IFSP meeting to be conducted timely, three families requested that the initial IFSP meeting be rescheduled, six families requested that the initial IFSP meeting be conducted outside of the 45 day timeline, two families did not show for the initial IFSP meeting and service coordinators lost contact with eight families which caused a delay in the initial IFSP meeting. The remaining 19 families who did not receive an initial IFSP meeting within the 45 days were due to circumstances not surrounding exceptional family circumstances; those being 18 multi-disciplinary evaluations being scheduled late by the Regional Program causing the initial IFSP to be conducted late, and one child did not have an initial IFSP meeting within the timeline due to the service coordinator scheduling late.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Both Regional Programs – CDW (Kent/Sussex and New Castle) -- are monitored annually via the statewide data system.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	1	1	0

FFY 2020 Findings of Noncompliance Verified as Corrected

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

As required by OSEP Memo 09-02, Administration verified that both CDWs were now correctly implementing the requirement that the multidisciplinary evaluation and assessment, and the initial IFSP meeting must be conducted within 45 days of referral unless there was a delay due to a documented exceptional family circumstance. On a monthly basis, Administration reviewed data for each through its DHSSCares database to determine whether the Regional Program had achieved 100% compliance with the 45-day timeline. In order for Administration to find that a Regional Program had achieved systemic correction, the Regional Program needed to have 100% compliance for two consecutive months. Through this process, Administration determined that one of the two CDWs achieved 100% compliance for two consecutive months (the months of December 2020 and January 2021) within one year of the January 4, 2021 finding of noncompliance. The other Regional Program also achieved 100% compliance for two consecutive months (the months of July and August 2022) but beyond the one-year timeline.

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

During the annual chart review process, Administration was able to determine based on progress notes and data entry into the statewide data system, that while late, the initial IFSP meeting did occur for each child whose initial IFSP meeting was delayed for a reason other than a documented exceptional family circumstance..

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

7 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

As noted above, only findings made for Indicator 7 were the FFY 2020 findings of noncompliance made on January 4, 2021. There were no previous reports, and subsequent reports continued the findings made on January 4, 2021 rather than making new findings.

7 - OSEP Response

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

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

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

Instructions

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

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

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

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

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

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

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

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	85.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%

Data	88.57%	94.85%	100.00%	100.00%	99.15%
------	--------	--------	---------	---------	--------

Targets

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

FFY 2021 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
52	52	99.15%	100%	100.00%	Met target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

Provide reasons for delay, if applicable.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

DHSS monitors both CDWs every year for all compliance indicators via the statewide data system.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

8A - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

No finding of noncompliance was made in any FFY. Although FFY 2020 data for one Regional Program - CDW were less than 100%, the Regional Program - CDW demonstrated individual and systemic correction before the monitoring report was issued.

Regarding the one toddler for whom, as reflected in the FFY 2020 data of 99.15%, transition steps and services were not included in the IFSP at least 90 days before the child's third birthday had left the Part C program before the individual noncompliance could be corrected. although late, by adding transition steps and services to the IFSP.

DHSS verified systemic correction before the October 27, 2021 issuance of the monitoring report based on the FFY 2020 data, based upon two consecutive months of 100% compliance for the months of April and May of 2021.

8A - OSEP Response

The State did not provide valid and reliable data for this indicator. These data are not valid and reliable because the State did not report whether the data only include 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. Therefore, OSEP could not determine whether the State met its target.

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

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

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

Instructions

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%

Data	100.00%	100.00%	100.00%	100.00%	100.00%
------	---------	---------	---------	---------	---------

Targets

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

FFY 2021 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,284	1,284	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.

0

Provide reasons for delay, if applicable.

Describe the method used to collect these data.

An Operations Agreement exists between the Department of Health and Social Services, Division of Public Health and the Delaware Department of Education. This agreement specifically defines the roles of the two regional Department of Education (DOE)/Regional Program - CDW liaisons that are employed by DOE. These individuals act as liaisons between the CDWs and the local school districts in order to facilitate transition.

This year, notification reports were sent through the DOE liaisons to the local school districts on 100% of the 1284 children identified as potentially eligible for Part B services.

Notification is distributed on directory information for children who reside in each LEA (local school district) and will shortly reach the age of eligibility for preschool services under Part B, according to regulations under 303.209(b)(1) and to the SEA. Delaware included these requirements of IDEA 2004 and associated regulations when updating the Interagency Agreement for the Early Intervention System under Part C of the Individuals with Disabilities Education Improvement Act of 2004.

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

NO

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

State database

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

The process for ensuring compliance with the notification process is described above. This process provides data for all toddlers, in both CDWs, who are potentially eligible for Part B preschool special educational services and have reached the age of 33 months for the full FFY 2021 (July 1, 2021 through June 30, 2022.)

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

The process for ensuring compliance with the notification process is described above. This process provides data for all toddlers who are potentially eligible for Part B preschool special educational services and have reached the age of 33 months for the full FFY (July 1, 2021 through June 30, 2022.)

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

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

8B - Prior FFY Required Actions

None

8B - OSEP Response

The State reported in its narrative that "Notification is distributed on directory information for children who reside in each LEA (local school district) and will shortly reach the age of eligibility for preschool services under Part B, according to regulations under 303.209(b)(1) and to the SEA"; however, the State did not report under the FFY 2021 SPP/APR Data section whether the data include notification to both the SEA and LEA. The State must respond to the prompt.

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

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

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

Instructions

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	75.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%

Data	88.41%	81.23%	93.33%	97.06%	91.21%
------	--------	--------	--------	--------	--------

Targets

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

FFY 2021 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
75	75	91.21%	100%	100.00%	Met target	No Slippage

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

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

0

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.

0

Provide reasons for delay, if applicable.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

During FFY2021 charts were randomly reviewed for each program. A total of 75 charts were reviewed, 25 for Regional Program New Castle and 50 charts for Regional Program Kent/Sussex.

Of the 75 charts reviewed 100% (75/75) families had transition conferences conducted within 9 months to 90 days of the child's third birthday.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	1	1	0

FFY 2020 Findings of Noncompliance Verified as Corrected

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

As required by OSEP Memo 09-02, Administration verified that both CDWs were now correctly implementing the requirement for timely transition conferences. On a monthly basis, Administration reviewed data for each through its DHSSCares database to determine whether the Regional Program had achieved 100% compliance for timely transition conferences. In order for Administration to find that a Regional Program had achieved systemic correction, the Regional Program needed to have 100% compliance for two consecutive months. Through this process, Administration determined that one of the two CDWs achieved 100% compliance for two consecutive months (the months of December 2020 and January 2021) within one year of the January 4, 2021 finding of noncompliance. The other Regional Program also achieved 100% compliance for two consecutive months (the months of December 2021 and January 2022) but beyond the one-year timeline.

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

During the annual chart review process, Administration was able to determine based on progress notes and data entry into the statewide data system, that while late, transition conferences did occur.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

8C - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

As noted above, only findings made for Indicator 8C were the FFY 2020 findings of noncompliance made on January 4, 2021. There were no previous reports, and subsequent reports continued the findings made on January 4, 2021 rather than making new findings.

8C - OSEP Response

The State did not provide valid and reliable data for this indicator. These data are not valid and reliable because the State did not report that 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. Therefore, OSEP could not determine whether the State met its target.

8C - Required Actions

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below.

The state has adopted Part C due process procedures.

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birthtothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHDI) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team. The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP) they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware's CRES program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state's improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

Historical Data

Baseline Year	Baseline Data
0	0.00%

FFY	2016	2017	2018	2019	2020
Target>=			0.00%	.00%	
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 SPP/APR Data

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

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

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

Additional Implementation Activities

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

11 - Indicator Data

Section A: Data Analysis

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

Delaware will increase the number and percentage of infants and toddlers who enter early intervention programming below age expectations in the in the area of Social-Emotional (SE) development and increase their rate of growth by the time they turn three or exit the program

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

NO

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

NO

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

YES

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

Originally, our Theory of Action contained five strands: Collaboration, Assessment practices, Professional Development, Family Involvement and Monitoring and Accountability. Last year, the Birth to Three Administration chose to focus on the Assessment Practices and Professional Development strands as both the Assessment Practices and Professional Development strands incorporate collaboration, family involvement and monitoring and accountability practices. Monitoring and accountability, collaboration and family involvement cross over all areas of assessment practices and professional development. Therefore, it was determined that they would be embedded within each of the two primary categories (Assessment Practices and Professional Development) rather than having them stand apart. Our updated Theory of Action reflects this thinking. While the updated Theory of Action may look different, the philosophy and integrity of it remain the same. In order to strengthen the implementation of the Theory of Action, our two stakeholder groups continue to meet (at least 3 times/month) to discuss current activities and to update on any progress made. As of the writing of last year’s report, the Theory of Action on our website had not been updated. It has now. A copy of this updated Theory of Action will be uploaded with this APR.

Please provide a link to the current theory of action.

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2008	46.63%

Targets

FFY	2021	2022	2023	2024	2025
Target>=	61.50%	61.75%	62.00%	62.25%	62.50%

FFY 2021 SPP/APR Data

		FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage

422	723	61.25%	61.50%	58.37%	Did not meet target	Slippage
-----	-----	--------	--------	--------	---------------------	----------

Provide reasons for slippage, if applicable

During evaluations to determine eligibility, the State did not see an increase in social emotional developmental delays. However, once services started, the interventionists found that children who were initially identified as having delays in other developmental areas were showing social emotional delays as well. It is suspected that, due to the restrictions of COVID, children were unable to participate in activities with peers. The lack of peer interaction may have made an impact on the potential progress of the children. There was slippage because of the difficulty in observing social emotional delays when restricted to virtual intervention visits. Therefore, we suspect that social emotional concerns were not being addressed, hence children were not making as much progress in this area.

Provide the data source for the FFY 2021 data.

The data captured for the FFY 2021 was extracted from the statewide data system, DHSSCares.

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

It is the responsibility of the Regional Programs to enter the data into the statewide data system, DHSSCares, with validity and reliability. Administration and the Regional Programs worked collaboratively through September 2022 to ensure that all data that could be collected from the early intervention service providers were completed. Once the data were entered and subsequently extracted, the Part C Data Manager in Administration ran the calculations to determine of the total children captured (723) for Indicator 3 (A1), how many had entered the program below age expectations in Positive Social Emotional Skills substantially increased their rate of growth by the time they exited the program (422) resulting in a 58.37% total.

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

NO

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

YES

Describe any data quality issues, unrelated to COVID-19, specific to the SiMR data and include actions taken to address data quality concerns.

DHSSCares continues to capture the quantitative and qualitative data from the Regional Program-Child Development Watch COS liaisons who have been trained to appropriately review and determine progress or regression in a child's skills. They work collaboratively with the early intervention service providers through the Child Outcome Summary process to obtain clinical opinions and assessment ratings for the initial and exit COS. The collection of data was not so much affected as the quality of the results. It was determined, through review of progress notes provided by EIS providers that children were challenged in making progress in this outcome due to the inability to interact with other children because of the complexity of the COVID situation. With COVID numbers decreasing and more opportunities for interaction becoming available, it is our prediction that the data next year will show an increase in progress and the probability of meeting our target. Also, with new early intervention service providers coming on board through new contracts, the Birth to Three Program intends to continue to provide updated trainings to ensure a more consistent and targeted look at all subcategories under Indicator 3, with a specific focus on Indicator 3, Outcome A, Statement 1.

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

NO

Section B: Implementation, Analysis and Evaluation

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

https://dhss.delaware.gov/dhss/dph/birthtothree/files/SSIP_Implementation_Evaluation_Plan_2022.pdf

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

YES

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

This is our first submission of the Evaluation Plan.

https://dhss.delaware.gov/dhss/dph/birthtothree/files/SSIP_Implementation_Evaluation_Plan_2022.pdf

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

Birth to Three staff, together with stakeholders, made a concentrated effort to solidify the implementation plan, which then allowed us to develop ways to measure progress in an evaluation plan. https://dhss.delaware.gov/dhss/dph/birthtothree/files/SSIP_Implementation_Evaluation_Plan_2022.pdf

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

We have established and maintained two robust SSIP Workgroups comprised of Birth to Three staff, EI providers, Family Service Coordinators, ICC members, and interested parties. These workgroups are instrumental in the implementation plan for training on, and statewide use of, the Behavioral Assessment of Baby's Emotional and Social Style (BABES) toolkit. Implementation of the BABES tool (which begins in January 2023) represents a change in the Multi-Disciplinary Assessment (MDA) and Family-Directed Assessment (FDA) process; the assessment will be given (with parental agreement) to all newly eligible infants and toddlers, and again at each six-month review, to identify social emotional concerns and monitor progress in addressing them. Together with our SSIP workgroups, we have put evaluation strategies in place to measure progress as we implement this new tool. We have provided professional development and technical assistance to our Family Service Coordination (FSC) staff who will be using the tool. We have endeavored to increase FSCs' and providers' knowledge of and access to community resources, particularly ones that support social-emotional learning and development. We are partnering with PIC (Parent Information Center, Delaware's PTI), not only to reach diverse families, but to conduct family focus groups centered around social emotional development and concerns. Additionally, we are working with the University of Delaware, who conducts our annual Family Outcomes surveys, to collect more information related to social emotional learning as part of the Family Outcomes Survey

process. The surveys are conducted each spring, and so Birth to Three will be able to report further on these data in next year's report. We are also revising the IFSP section in our new data system to facilitate the collection and interpretation of data related to social emotional concerns. This new data system will offer the opportunity for a smoother flow from the MDA and Family-Directed Assessment process into the development of functional IFSP goals that are specifically directed toward social emotional outcomes. In collaboration with our SSIP workgroups, we have created an infographic for parents that explains what social-emotional learning is and why it is important. It will be distributed this winter.

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

The Program's SSIP short-term and intermediate outcomes are fully described in the attached Implementation Plan and below are a few highlights: All current Family Service Coordinators and their Supervisors have been trained to administer the BABES assessment. The statewide implementation begins January 1, 2023.

The SSIP workgroups have designed numerous progress measures including pre-and post-training surveys, periodic check-in surveys, and parent focus group questions that are now incorporated into the new Evaluation Plan.

We have created a list of community resources related to social-emotional concerns and have posted this list on our website for FSCs and families to access.

We are engaging with stakeholders to increase communication and transparency through our SSIP workgroups, as well as through regularly providing progress updates and seeking feedback, advice, and assistance at our quarterly ICC meetings as well as our ICC committee meetings.

As noted above, we have a major data system improvement process underway that will support the collection of accurate IFSP and service delivery data.

An Evaluation Plan has been developed and evaluative activities are underway to ensure that we are tracking adherence to our plan and measuring impact.

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

YES

Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

The Birth to Three Program has made many new infrastructure improvements this past year. A few of the key improvements are:

The Program developed training for Regional Program staff and early intervention service providers to ensure consistent and efficient implementation of the policies and procedures.

Additional trainings have been implemented to further strengthen Delaware's early intervention system.

The Program has increased performance monitoring and continuous review of important requirements and regulations which has allowed the program to prepare for fuller implementation of best practices while maintaining compliance according to federal regulations, state law, and policies and procedures.

The Program executed updated contracts with external early intervention service providers to ensure increased compliance with federal regulation, state law, and program policies and procedures. The updated contracts included stronger communication with the single line of authority.

The Program has executed a contract for a new data system that will provide more robust data, improve timely data entry, and capture more detailed data that will improve the overall delivery of early intervention services and collection of data.

The Program has made a strong financial commitment to obligate and track the state and federal funds being used to support these systemic changes.

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

The Program's SSIP short-term and intermediate outcomes are described in the attached Implementation Plan and below are a few highlights:

Through a contract with PIC, there is a concerted effort underway to increase engagement with diverse families to ensure that the early intervention program is responsive to all Delaware families.

The Program will launch the new data system in Summer 2023 which is expected to improve data entry, collection, monitoring, and accountability. It also creates a flow for development of functional outcomes that will influence the services provided to families which will be monitored through development of the EIS provider progress notes. We can then monitor for quality and family enrichments.

The Program's training modules are going to be housed in the online learning platform for state agencies. To maximize training, we will begin to transition to the state's learning management system, Delaware Learning Center (DLC), in 2023. This will aid administration in creating a uniformed training hub where staff can complete asynchronous training modules, register for training opportunities, and add trainings such as webinars or conferences to their training transcripts. This will assist administration in running transcript reports, having a platform for staff to read and acknowledge new policies and procedures, and provide real time training data to requestors.

The Program will continue to partner in the statewide screening initiative with childcare centers to improve early identification of young children with developmental concerns, including social emotional issues.

The SSIP Workgroups will be engaged with state staff to update COS training, thereby making it more efficient and timelier for new EIS providers and FSCs.

Beginning January 1, 2023, the BABES will be implemented statewide per guidelines developed by Administration.

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

The SSIP workgroups researched potential assessments and ultimately decided to adopt the BABES assessment as a method to measure progress with regards to social-emotional learning and development of children and families within the program.

We have trained staff on the purpose and use of the BABES assessment and have created an implementation plan (to begin January 2023).

We have collected provider feedback via ECTA's "Vision and Direction in Leadership Checklist" and the "Child Social-Emotional Competence Checklist" based on the DEC Recommended Practices. Baseline data have been collected and are currently being analyzed to determine next steps.

Provide a summary of each evidence-based practice.

The BABES is going to be used to assist the assessment teams and FSCs to identify with families their areas of concerns, especially related to social emotional development within the context of natural environments and everyday routines, activities, and places.

The Division of Early Childhood Recommended Practices function as tools that practitioners use to promote development of young children, ages 0 to 5. These practices also guide families to improve practices in partnership with practitioners.

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

We anticipate that the BABES assessment will allow for more in-depth and meaningful conversation between families and Family Service Coordinators about social-emotional learning, progress, and concerns. It will more clearly reveal parental expectations for their infant or toddler and allow Coordinators to discuss to what degree those expectations are realistic. The tool will identify social-emotional concerns to be addressed, social-emotional progress and strengths to be celebrated, and facilitate monitoring of social-emotional development.

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

In collaboration with our SSIP workgroups, we have developed surveys to monitor progress toward our SiMR: a pre-and post-training survey was administered to all attendees of our BABES trainings, and a periodic check-in survey will be administered quarterly to all Family Service Coordinators once the BABES assessment has been implemented (January 2023). As previously stated, we intend to incorporate questions about social-emotional concerns into our annual family surveys conducted by UD. We are also collaborating with the workgroups on developing questions for the family focus groups PIC will facilitate. Because these focus groups will be most informative if they occur after the BABES tool has been fully implemented, they will likely not take place until fall of 2023. However, it is our intention to have PIC conduct family focus groups for the purposes of collecting baseline data sooner than that. These fidelity measures are described in the attached Evaluation Plan.

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

N/A this year.

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

Please refer to the attached Implementation Plan. https://dhss.delaware.gov/dhss/dph/birthtothree/files/SSIP_Implementation_Evaluation_Plan_2022.pdf

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

NO

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

We plan to engage in continuous improvement. Since this is going to be the first year of implementing the EBPs we will evaluate their effectiveness and may, if necessary, make changes to activities, strategies, or timelines that are included in the current SSIP. The evaluation data that are described in our Evaluation Plan will be analyzed by the SSIP staff and workgroups on a regular basis throughout the year to determine if modifications are needed.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Administration continues to solicit ongoing stakeholder discussion and input from groups on setting of priorities, development and tracking of data measures, as well as methods for ensuring family awareness, and continues to engage in valuable partnerships. These partners include the members of the Interagency Coordinating Council (ICC), the Parent Information Center (PIC), and various stakeholder and topical work groups.

Delaware's ICC continues to play an integral part in how Administration shares federal and state level reporting data with stakeholders. During the ICC meetings held in January, July, September and October, Administration shared with members and stakeholders the following data presentations; annual chart review (monitoring) data utilized in the SPP/APR Compliance Indicators 1, 7,8A, 8B, and 8C; the Family Outcomes Survey report which is used to calculate Indicator 4 information, along with Child Count and Setting results that the Family Outcomes Survey uses to appropriately capture race/ethnicity and gender comparison data; exit data which contributes to Indicator 8B, Child Outcomes data pertaining to Indicator 3 targets, and the compiled Part C Annual Performance Report prior to the February Submission. In addition to the ICC, program information is shared at statewide meetings with the DECC, DDOE/OEL, GACEC, DPH/CDW staff during regional staff meetings. Additional information and copies of previous reports are available on the Birth to Three website <https://dhss.delaware.gov/dhss/dph/birthtothree/index.html>.

Administration conducts weekly Executive Interagency Coordinating Council committee "opportunity" calls to allow for continuous engagement with stakeholders. Each call is led with an abbreviated agenda that allows for discussions to occur organically. Stakeholder input is then recorded and utilized in the decision-making process. A summary of these activities and issues discussed in these opportunities calls are shared during the ICC quarterly meetings.

Administration actively participates on the Delaware Early Childhood Council (DECC), whose goal is to support the development of a comprehensive and coordinated early childhood system, birth to eight, which provides the highest quality services and environment for Delaware's children and their families. Administration collaborates with the Early Childhood Comprehensive Systems (ECCS) initiative whose primary aim is to increase the age-appropriate developmental skills among the State's three-year old children. In addition, Birth to Three – Administration Part C Coordinator collaborates with and is an active participant in Early Hearing Detection and Intervention Advisory Board (EHDI) meetings and The Governor's Advisory Council for Exceptional Citizens (GACEC).

The Assistant Part C Coordinator provides quarterly updates to ICC members regarding the State Systemic Improvement Plan (SSIP) and seeks ICC advice and assistance in advancing the State-identified Measurable Result (SiMR) to increase social emotional outcomes (SEO) for Part C-eligible infants, toddlers and their families. The SSIP focuses on improving SEO, so the SSIP team coordinated with local and statewide parent advocacy groups through the ICC, Parent Information Center (PIC) and SSIP activity strand workgroups to develop an SSIP Core Leadership Team. The SSIP Professional Development and Assessment Practices Teams represent stakeholder networks that are critical to SSIP success in increasing social emotional outcomes. The team met virtually and continued the established bi-weekly meeting. The Administration staff also met with PIC leaders to align parent involvement and devise a detailed plan for gathering parent input on the Division of Early Childhood (DEC) Recommended Practices (RP) they observe in practice with their children.

Whenever there was an opportunity to involve individual parents and advocates, Administration staff sent invitations to and through the Interagency Coordinating Council (ICC), Parent Information Center (PIC), and other family networks to engage families and providers in meaningful ways to understand the current needs of families. Stakeholder groups will continue to meet on a monthly basis in order to develop and monitor strategic improvement plans ensuring that the families continue to receive the best services and provisions available to them. It has been a challenge to seek diverse stakeholders, especially parents. In the coming year, we plan to conduct more focus groups specifically targeting those parents who are part of underserved populations in our collaboration with PIC.

The State is committed to working with the ICC and ICC subcommittees to address the need for outreach to underserved populations in hopes of gaining, not only more parent involvement, but also to ensure that any disparities within the state may be addressed. We are currently looking at our data to determine our most underserved populations to target where our resources need to be allocated. In order to address any possibility of inequity, specifically regarding Indicator 4, Birth to Three – Administration continues to collaborate with the University of Delaware's CRESPP program to revisit the outreach strategies used, in order to capture more participation from underserved populations. By doing so, it is the hope that more parents will be encouraged to participate in stakeholder-involved activities. The State will leverage partnerships with community agencies such as PIC, Children and Families First, Child Inc, La Colectiva, La Red etc. in order to intensively engage diverse families to gain their insights into how to better ensure equitable EI services in the state and to enrich input in the state's improvement efforts.

Through training provided to Family Service Coordinators and Early Intervention Staff, Administration encourages their discussions with parents about their parental rights and to endorse participation in improving Part C services and outcomes for their children.

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

SSIP workgroups, comprised of stakeholders (FSCs, supervisors, and CDW EI assessors, representatives from EIS provider agencies, and ICC members), meet at least three times/month for the purposes of SSIP planning, providing feedback on action steps and timelines, and progress monitoring. Detailed, action-oriented agendas for these workgroup meetings are distributed in advance along with any materials members need in order to prepare for the meeting. Facilitated by Birth to Three staff, these meetings address collaborative planning and problem-solving. For example, the Assessment Practices workgroup was instrumental in editing and streamlining our Parent Infographic by providing thoughtful feedback on the language and layout. These groups have helped to identify any needs for more training and have assisted in the development of evaluation methods. Notes are taken at each meeting and shared with all members of both workgroups.

The ICC has been regularly updated on SSIP related activities and developments at ICC quarterly meetings, as well as via email communication. ICC members advise and assist the Birth to Three program's ongoing SSIP work.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

We created a second, practical, hands-on training on the BABES assessment that incorporated the feedback from our workgroups as well as attendee feedback (in the post-training survey).

We also provided live access to a webinar on functional outcomes (Writing Functional Outcomes on the IFSP- presented by the Division for Early Childhoods Early Intervention Service Coordination and Family Partnerships Communities of Practice), as well as posting a recording of this webinar on our TEAMS channel for FSCs.

The workgroup also advised and assisted us with the development of our implementation timeline and evaluation methods.

Additional Implementation Activities

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

Activities the state intends to implement in the next fiscal year related to the SiMR include:

*strategic and guided implementation of the BABES tool;

*periodic check-in surveys to be administered to FSCs at least bi-annually;

*analysis of survey results;

*parent focus groups; and

*ongoing support training as necessary (determined by the results of the periodic check-in surveys, BABES scores, and parent feedback).

For further detail, please see the attached Implementation Plan.

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

Please see the details in the attached Implementation and Evaluation Plan.

https://dhss.delaware.gov/dhss/dph/birthtothree/files/SSIP_Implementation_Evaluation_Plan_2022.pdf

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

One barrier is a lack of representation of race, ethnic, socio-economic and cultural diversity among our stakeholder families. We plan to seek the advice and direction of PIC as well as the ICC to determine the best steps to increase diversity among our stakeholder families.

Another barrier is a shortage of EI Providers that have expertise in the area of social-emotional development. In order to combat this barrier, we hope to explore focused recruitment strategies.

Since, during the current RFP, no providers with SE specialties submitted bids, Administration intends to conduct a more direct approach in recruiting agencies outside of the RFP. Talking with and gathering resources through individual child psychologists and social workers along with meetings with advocacy agencies such as Delaware Guidance Services, Children and Families First and Child Inc will offer more opportunities to recruit qualified providers for social emotional interventions for our families.

Administration will encourage EIS Provider agencies to hire Early Childhood Educators with specialized backgrounds in social emotional development. By sharing resumes and curriculum for potential ECE candidates with Administration, EIS Provider agencies will be better able to meet professional development standards specifically surrounding social emotional development.

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Designated Lead Agency Director

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

Name:

Nicole Topper

Title:

Delaware Part C Coordinator

Email:

nicole.topper@delaware.gov

Phone:

302-739-2738

Submitted on:

04/25/23 3:13:16 PM