**State Performance Plan / Annual Performance Report: Part C**

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

**For reporting on
FFY 2020**

**Virginia**



**PART C DUE
February 1, 2022**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

Additional information related to data collection and reporting

**General Supervision System**

**The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.**

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

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

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

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

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

A system of enforcements is also in place. Enforcements are imposed when noncompliance extends beyond one year. Targeted technical assistance is required for all local systems that do not correct areas of noncompliance in a timely manner. The focus of the targeted technical assistance is on capacity building and overcoming barriers to compliance. Since noncompliance beyond one year affects the local system’s annual determination status, additional enforcements may be imposed based on their determination. Enforcement options available to the State Lead Agency include, but are not limited to, the following:
- Conduct on-site activities (training, technical assistance, record reviews, meetings with staff and/or providers, etc.) with the Local System Manager as needed and appropriate;
- Conduct on-site activities that include the Local System Manager's supervisor;
- Conduct on-site activities that include the local lead agency's administration;
- Complete focused monitoring site visit(s) on area(s) of noncompliance;
- Increase frequency of improvement plan status check-ins;
- Require targeted technical assistance and/or training;
- Require development/revision of the local system's annual staff development plan to include professional development related to the area(s) of noncompliance;
- Require the Local System Manager to collect and analyze data and review it with their Technical Assistance and/or Monitoring Consultant at a frequency determined with the State Lead Agency;
- Require the local system to complete additional record reviews at a frequency determined with the State Lead Agency and with verification by the State Lead Agency;
- Link to another local system that demonstrates promising practices in the identified area(s) of noncompliance;
- Require a meeting with the local lead agency administration and the State Part C Program Manager, Technical Assistance and Monitoring Consultants to discuss barriers to compliance, improvement plan strategies, and how the State Lead Agency can further assist the local system;
- Report noncompliance to the administration of the local lead agency explaining that it may be necessary to redirect or withhold funds if timely improvement is not shown;
- Conditionally approve the local contract;
- Require the local lead agency to direct use of Part C funds to areas that will assure correction of noncompliance;
- Withhold a percentage of the local system's funds;
- Recover funds;
- Withhold any further payments to the local lead agency;
- Terminate the contract with the local lead agency.

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

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

**Technical Assistance System:**

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

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

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

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

**Professional Development System:**

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

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

**Broad Stakeholder Input:**

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

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

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

YES

**Number of Parent Members:**

81

**Parent Members Engagement:**

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

The State Lead Agency used a variety of mechanisms for engaging parents in setting targets, analyzing data, developing improvement strategies and evaluating progress in FFY 2020 and significantly increased the number of parents engaged compared to previous years. Because the COVID-19 pandemic prevented in-person meetings and activities, virtual platforms, social media and written options were used instead.

The State Lead Agency contracts with the Arc of Virginia to employ a New Path Family Support Director for early intervention. This individual participates on workgroups associated with the State Systemic Improvement Plan, helps identify and support other parents to participate on the state ICC and on workgroups, and gathers input from other parents to bring to workgroups and meetings. This year, she and a few other individual parents worked with the State Lead Agency to analyze family survey response rate data and identify strategies to increase responses. The State Lead Agency also collaborated with the New Path Family Support Director to hold two family input sessions on Zoom and (simultaneously) Facebook Live to analyze child and family outcome data, evaluate progress over time and prioritize areas for improvement. These sessions were advertised through the New Path listserv, website and Facebook page. Information about the sessions and a later reminder were also sent to all local system managers with a request that they disseminate to all families The Facebook Live sessions were recorded and remained available to be viewed later on the New Path Facebook page.

Although several parents participated in the Zoom input sessions, there were fewer than hoped. Several local system managers reported receiving feedback that families in early intervention wanted to participate but were overwhelmed due to COVID-related stressors and found it hard to commit to meetings. The State Lead Agency sought input from the State ICC, local system managers, the New Path Family Support Director and Virginia’s Parent Training and Information Center, PEATC, on possible alternate methods for engaging families and getting input. Based on those recommendations, the State Lead Agency did the following:
- Collaborated with PEATC to develop and implement a new strategy for engaging parents. PEATC also was experiencing challenges with parents participating in meetings and recommended a call-to-action and brief survey seeking input from families on improvement strategies and seeking parents who were interested in participating on state workgroups and leadership teams. PEATC staff developed the wording for the call-to-action and the survey; and they advertised the survey through their E-Newsletter and social media, sent it to their early childhood mailing list, and shared it through early childhood boards and networks. The survey also was widely disseminated by the State Lead Agency, the New Path Family Support Director and the Center for Family Involvement at Virginia Commonwealth University;
- Asked ICC parent representatives to use the same survey questions to gather input from their networks of parents to share at an upcoming ICC meeting; and
- Posted a feedback/input pop-up on the Infant & Toddler Connection of Virginia website.

At each quarterly meeting in FFY 2020, the State ICC engaged in discussions about targets, data, developing improvement strategies and/or evaluating progress. During a state ICC meeting on December 8, 2021, ICC members reviewed data on each indicator and discussed and approved targets for each performance indicator through FFY 2025. The State ICC includes 9 parent representatives, one of whom is the new ICC Chairperson.

Through these various mechanisms, 81 parents provided direct input. In some cases, these 81 parents had gathered input from other families and reflected that additional information in their feedback. The Facebook Live sessions were viewed by over 100 people, but there is no way to confirm whether they were all parents.

The parent engagement strategies used in FFY 2020 also resulted in identifying five parents to participate on the State Leadership Team for Virginia’s new SSIP. In this role, they will partner with the State Lead Agency and other stakeholders on the team to develop the SSIP and oversee implementation and evaluation of the plan. These parent representatives constitute one-third of the full leadership team membership.

**Activities to Improve Outcomes for Children with Disabilities:**

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

The family engagement strategies discussed in the previous section were intended to increase not only the number of parents engaged in this work but also to increase the diversity of parents engaged and providing input. Those who participated and provided input in FFY 2020 represented all regions of the Commonwealth, parents whose children are currently in early intervention and those who graduated within the last few years, and at least five race/ethnicity groups. The survey developed by PEATC was available in Spanish, and the Center for Family Involvement used cultural brokers to gather input from other traditionally under-represented groups.

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

**Soliciting Public Input:**

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

A previous section of the Introduction identifies the varied methods used to solicit broad stakeholder input. The primary mechanism for soliciting public input for setting targets, analyzing data, developing improvement strategies and evaluating progress is the Infant & Toddler Connection of Virginia website. The Monthly Update is posted there and routinely includes information about SSIP strategies, progress and contact information for questions/input. There is a dedicated SSIP section on the website. This section includes workgroup meeting notes, draft documents and evaluation reports for public review. This year, an idea pop-up was added on the website’s home page for about four weeks requesting input on improvement strategies. Users were able to submit ideas directly to the State Lead Agency by clicking on the pop-up. Annnually, following the December meeting of the state ICC, the draft SPP/APR and SSIP are posted to the Infant & Toddler Connection of Virginia website and available for public comment for a minimum of 2 weeks prior to those reports being finalized.

Opportunities for public input also are frequently publicized through the New Path website and social media outlets.

**Making Results Available to the Public:**

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

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

During development and implementation of the SSIP, summaries of stakeholder input and evaluation results are posted to the SSIP section of the website along with decisions made based on that input and evaluation data. For instance, in FFY 2020, Virginia provided multiple opportunities for a variety of stakeholders to share input on the SiMR and improvement strategies for the new 6-year SSIP. A summary of stakeholder input on the SiMR and a summary of stakeholder input on improvement strategies were posted to the SSIP section of the website.

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

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2019 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 2019 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 2019 APR in 2021, is available.**

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

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

## Intro - Prior FFY Required Actions

**Response to actions required in FFY 2019 SPP/APR**

## Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted on its form that it prepared and elected to submit its own annual report (in lieu of the SPP/APR submitted by the State lead agency). OSEP accepts the SICC 2022 annual report.

## 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 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 72.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 98.60% | 97.24% | 96.94% | 96.77% | 95.73% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 677 | 838 | 95.73% | 100% | 99.05% | Did not meet target | No Slippage |

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

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

153

**Provide reasons for delay, if applicable.**

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

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

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

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

Data for FFY 2020 is based on monitoring data from all 40 local Part C early intervention systems in Virginia.
The records of children who had an initial, periodic or annual IFSP developed on or after October 1, 2020 but no later than December 31, 2020 were reviewed to determine compliance with the requirement for timely start of services. The State Lead Agency randomly selected the children whose records were to be reviewed by the local system. The number of records to be reviewed was based on the local system's annual child count for the period 12/2/19 - 12/1/20:

- Annual count 0 - 200, reviewed 14 records
- Annual count 201 - 800, reviewed 22 records
- Annual count over 800, reviewed 30 records

The total number of infants and toddlers in the record review pool with an initial IFSP or an annual or periodic IFSP with new services added was 838.

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

Although Virginia reported less than 100% compliance with this indicator in FFY 2019, the state did not identify any findings of noncompliance (see table below). The nine local systems that were below 100% compliance at the time of the FFY 2019 annual record review were able to document (and the State verified) their correction of that noncompliance prior to the State issuing a finding of noncompliance. Verification of this pre-finding correction included verification that, based on updated data, the local system was now implementing the regulatory requirement correctly and that each individual case of noncompliance had been corrected.
- The State Lead Agency selected a random sample of either 3 or 5 records (depending on the size of the local system) of children with recent IFSPs and IFSP reviews with new services added, and the local system submitted the documentation from those records showing start of services and the reasons for any delay in meeting the 30-day timeline for timely start of services. State staff members reviewed the documentation in order to verify that these EIS programs are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008; and
- State Part C staff used record review data documenting the actual start date for each service to verify that for each instance of noncompliance at the time of the annual record review, the child did begin receiving the services listed on his/her IFSP, though late. The State Lead Agency has verified that each of these EIS programs initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program , consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **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 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2019 SPP/APR**

Although Virginia reported less than 100% compliance with this indicator in FFY 2019, the state did not identify any findings of noncompliance (see table below). The nine local systems that were below 100% compliance at the time of the FFY 2019 annual record review were able to document (and the State verified) their correction of that noncompliance prior to the State issuing a finding of noncompliance. Verification of this pre-finding correction included verification that, based on updated data, the local system was now implementing the regulatory requirement correctly and that each individual case of noncompliance had been corrected.
- The State Lead Agency selected a random sample of either 3 or 5 records (depending on the size of the local system) of children with recent IFSPs and IFSP reviews with new services added, and the local system submitted the documentation from those records showing start of services and the reasons for any delay in meeting the 30-day timeline for timely start of services. State staff members reviewed the documentation in order to verify that these EIS programs are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008; and
- State Part C staff used record review data documenting the actual start date for each service to verify that for each instance of noncompliance at the time of the annual record review, the child did begin receiving the services listed on his/her IFSP, though late. The State Lead Agency has verified that each of these EIS programs initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program , consistent with OSEP Memorandum 09-02, dated October 17, 2008.

## 1 - OSEP Response

## 1 - 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.

# 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 (E*MAPS*)).

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 99.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= | 98.00% | 98.00% | 98.00% | 98.00% | 98.00% |
| Data | 98.71% | 99.92% | 99.96% | 93.75% | 94.23% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 98.00% | 98.00% | 98.00% | 98.00% | 98.00% | 98.00% |

**Targets: Description of Stakeholder Input**

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 9,513 |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Total number of infants and toddlers with IFSPs | 9,800 |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 9,513 | 9,800 | 94.23% | 98.00% | 97.07% | Did not meet target | No Slippage |

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

The total count of children reported under Section 618 in Virginia, and listed in the pre-populated data above, includes children under age 3 served under Part B with an IEP. However, Virginia's targets for each year are based on the count of those children served under Part C with an IFSP. Using that data, the number of infants and toddlers with IFSPs who primarily receive early intervention services in the home and community-based settings was 9361, the total number of infants and toddlers with IFSPs was 9361, and Virginia's percentage for Indicator 2 for FFY 2020 is 100%.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 2 - Required Actions

# Indicator 3: Early Childhood Outcomes

**Instructions and Measurement**

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

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

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication); and

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

 A. Positive social-emotional skills (including social relationships);

 B. Acquisition and use of knowledge and skills (including early language/communication); and

 C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

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

**Measurement for Summary Statement 1:**

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

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

**Measurement for Summary Statement 2:**

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

**Instructions**

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

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

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

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

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

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

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

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

## 3 - Indicator Data

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

NO

**Targets: Description of Stakeholder Input**

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A1** | 2018 | Target>= | 69.50% | 64.10% | 64.10% | 66.00% | 64.94% |
| **A1** | 64.93% | Data | 64.07% | 66.05% | 66.28% | 64.93% | 63.78% |
| **A2** | 2018 | Target>= | 66.40% | 63.30% | 63.30% | 65.00% | 57.55% |
| **A2** | 57.54% | Data | 63.28% | 60.71% | 60.05% | 57.54% | 54.27% |
| **B1** | 2018 | Target>= | 74.70% | 68.30% | 68.30% | 70.00% | 68.74% |
| **B1** | 68.73% | Data | 68.29% | 70.10% | 69.96% | 68.73% | 68.04% |
| **B2** | 2018 | Target>= | 55.30% | 51.50% | 51.50% | 54.00% | 46.93% |
| **B2** | 46.92% | Data | 51.53% | 49.62% | 48.69% | 46.92% | 44.63% |
| **C1** | 2018 | Target>= | 78.70% | 70.70% | 70.70% | 73.00% | 68.57% |
| **C1** | 68.56% | Data | 70.69% | 70.38% | 70.16% | 68.56% | 67.59% |
| **C2** | 2018 | Target>= | 56.40% | 55.20% | 55.20% | 57.00% | 50.74% |
| **C2** | 50.73% | Data | 55.23% | 53.84% | 54.10% | 50.73% | 49.99% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1>= | 64.94% | 64.94% | 64.94% | 64.94% | 64.94% | 65.78% |
| Target A2>= | 57.55% | 57.55% | 57.55% | 57.55% | 57.55% | 59.54% |
| Target B1>= | 68.74% | 68.74% | 68.74% | 68.74% | 68.74% | 70.04% |
| Target B2>= | 46.93% | 46.93% | 46.93% | 46.93% | 46.93% | 48.92% |
| Target C1>= | 68.57% | 68.57% | 68.57% | 68.57% | 68.57% | 69.59% |
| Target C2>= | 50.74% | 50.74% | 50.74% | 50.74% | 50.74% | 51.99% |

 **FFY 2020 SPP/APR Data**

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

6,569

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

| **Outcome A Progress Category** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 6 | 0.09% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,930 | 29.38% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,283 | 19.53% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,826 | 27.80% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 1,524 | 23.20% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 3,109 | 5,045 | 63.78% | 64.94% | 61.63% | 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 | 3,350 | 6,569 | 54.27% | 57.55% | 51.00% | Did not meet target | Slippage |

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

Virginia’s statewide data system does not provide the data necessary to conclusively identify the specific reason(s) for the decline in results from FFY 2019 to FFY 2020. Based on anecdotal information reported by local system managers, providers (including service coordinators), and families, a number of pandemic-related factors impacted families’ engagement with early intervention and outcomes for children, including the following:
- Although local systems prioritized in-person services for families who preferred that method and in any circumstance where the child was not making progress via telehealth, there were times during the year (due to local COVID numbers and protocols) when services had to be delivered by telehealth to ensure safety. Telehealth worked better for some families than others.
- Infants and toddlers entering early intervention during the pandemic have tended to have more significant delays and disabilities. Children with milder delays were more likely to not be identified (due to missed well child visits or lack of social gatherings that can help families notice delays compared to other children) or their families chose to wait to receive services.
- Families continued to face tremendous stressors due to the pandemic, including financial stress, isolation, lack of child care and older children learning remotely from home. As a result, some families took breaks from early intervention services and some reduced the frequency and/or length of early intervention sessions. Sometimes families found it challenging to consistently implement the strategies they developed with their service provider, no matter how well-embedded these were within their daily routines and activities.
- Likely due to the same stressors described in the previous point, the percentage of children exiting early intervention because they were lost to contact increased from 7.8% in FFY 2019 to 21.3% in FFY 2020. Given that those lost to contact were more often children with milder delays, this may have impacted the child outcome results in FFY 2020. This trend often also shortened the time children were enrolled in early intervention, potentially reducing the impact early intervention was able to have on child outcomes.

Recognizing the limitations of the existing statewide data system, the State Lead Agency has purchased a customizable data system that will facilitate more thorough analysis of factors impacting child outcome results in the future. The new data system will be implemented statewide in FFY 2021.

**Provide reasons for A2 slippage, if applicable**

Please see A1

**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 | 3 | 0.05% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 2,053 | 31.25% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,853 | 28.21% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 2,031 | 30.92% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 629 | 9.58% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 3,884 | 5,940 | 68.04% | 68.74% | 65.39% | 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 | 2,660 | 6,569 | 44.63% | 46.93% | 40.49% | Did not meet target | Slippage |

**Provide reasons for B1 slippage, if applicable**

Please see A1

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

Please see A1

**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 | 6 | 0.09% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 2,154 | 32.79% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,476 | 22.47% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 2,252 | 34.28% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 681 | 10.37% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 3,728 | 5,888 | 67.59% | 68.57% | 63.32% | Did not meet target | Slippage |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 2,933 | 6,569 | 49.99% | 50.74% | 44.65% | Did not meet target | Slippage |

**Provide reasons for C1 slippage, if applicable**

Please see A1

**Provide reasons for C2 slippage, if applicable**

Please see A1

**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 | 9,647 |
| The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program. | 2,476 |

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |

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

YES

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

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

AT ENTRY AND EACH ANNUAL IFSP: The assessment narrative section of Virginia's IFSP is organized by the three child outcome areas. The service coordinator facilitates the team summary of assessment results in terms of the three child outcomes (positive social relationships, acquiring and using knowledge and skills, and use of appropriate behaviors to meet needs) and determination and documentation of entry ratings for the three child outcomes for all eligible children.
- Assessment information is derived from multiple sources - results from developmental instruments and observation; the family, including information about the child’s performance in relation to the three child outcomes across situations and settings and with different people; and any other source (e.g., child care provider, medical records, etc.).
- Considering the information above and functional skills of same-aged peers, the team determines the appropriate rating statement for each of the three child outcomes. Beginning September 2018, teams are required to use the Decision Tree in determining the appropriate rating.
- The assessment process and documentation of assessment results are the same for all children; however, child outcome rating numbers (1-7) that correspond to the child outcome rating statements are only required to be recorded in ITOTS, the statewide data system, for children who are new to early intervention and who are 30 months or younger at the time of the initial IFSP. This includes children who have received early intervention from other states, but who are new to early intervention in Virginia.
- The entry ratings recorded in ITOTS follow the child. A child who moves within Virginia from one early intervention system to another will already have entry assessment data, and the new local system does not need to do a new entry-level assessment. If a child is discharged from the Infant & Toddler Connection system and returns within 6 months of leaving the system, then the initial child outcome ratings continue to be used as the entry ratings. If the child is out of the system for more than six months but returns to the system when he/she is still 30 months old or younger then new entry child outcome ratings are completed.

AT EXIT: The service coordinator ensures exit ratings on all three child outcomes (positive social relationships, acquiring and using knowledge and skills, and use of appropriate behaviors to meet needs) are done prior to exit for all children who had an entry rating AND who have been in the system for 6 months or longer since their initial IFSP (i.e., there have been 6 months between the initial IFSP and the exit assessment). The rating must be done no more than 6 months prior to exit from early intervention. To complete the exit ratings:
- Using information from parent report, an assessment instrument, observation and other sources, and the Decision Tree, determine the child’s status (rating) for each of the three child outcomes. A formal assessment is not required. Instead, the provider(s) determines the child’s functional status on the three child outcomes through ongoing assessment (which can occur over multiple sessions). The provider must document the child’s abilities by filling in an assessment instrument (such as the HELP, ELAP, etc.). The reason for documenting what has been observed through ongoing assessment on an assessment tool is not to generate age levels but to serve as an anchor for the assessment and to provide a standard measure to be used in combination with other assessment sources for determining the child’s functional status on the three child outcomes in relation to same-age peers. It is not necessary to use the same instrument that was used for the entry assessment. -OR- Obtain entry ratings from the local school division to use as the exit ratings for the Infant & Toddler Connection system. If Part B entry assessment data is being used for the early intervention exit assessment data, then that Part B assessment information must be available prior to the child’s discharge from early intervention.
- The IFSP team considers information from the sources listed above to determine the child’s status in relation to same-age peers for all three child outcomes. Unless the exit ratings are being determined and documented as part of an annual IFSP, document the child’s functional status on the three child outcomes (including the child outcome rating statement) in a contact note or on an IFSP Review page. Also document the sources of information used in the assessment process. When documenting whether the child has made progress for each child outcome (in order to respond to the yes/no progress question in ITOTS), remember that the answer to that question must always be based on the child’s progress since the initial assessment, even if there have been one or more interim assessments. Information to support the yes/no answer to whether the child has made progress may be documented on an IFSP Review page, an annual IFSP or in a contact note(s).
- Since the ratings reflect the child’s status at the time of the assessment, it is important to time the exit assessment/rating as close to exit as possible in order to capture results for the full time the child was receiving early intervention services. This may mean using ongoing assessment information to update the ratings just before exit, even if there was an annual IFSP developed within the last 6 months.

The date of the exit assessment is one of the following:
- The last date on which assessment information was collected (e.g., date of the last visit during which ongoing assessment information was documented);
- If completed within the 6 months prior to the child’s discharge and it reflects the most up-to-date assessment information available, then the date of the most recent IFSP in which the child outcome ratings were documented; or
- If completed within the 6 months prior to the child’s discharge and they reflect the most up-to-date assessment information available and they are available to the local early intervention system by the date of the child’s discharge, the date that child outcome entry ratings were determined by the local school division.

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

Approach to Target Setting: The Indicator 3 targets for FFY 2020 are equal to the targets for FFY 2019. The targets for FFY 2025 were determined by using the meaningful differences calculator developed by DaSY to determine the increase necessary to show a meaningful improvement from the actual results achieved in FFY 2019 or, if that is lower than the FFY 2020 target, then a meaningful increase from baseline. Interim targets are maintained at the FFY 2020 target level. Once Virginia has met a target and maintained that target level for one year, increases in the targets for the remaining years of the SPP/APR cycle will be considered.

Other information: As the COVID pandemic continues, Virginia is working to mitigate the impact on infants, toddlers and families enrolled in Part C. The State Lead Agency routinely shares resources about and discusses with local systems the potential mental health and developmental impacts of the pandemic. Service coordinators and providers are focused on meeting individual child and family needs through telehealth and/or in-person services (as appropriate based on local COVID protocols and numbers) and are connecting families to community resources to help address basic needs (e.g., health, safety, financial, food, etc). Caregiver coaching and natural learning environment practices have remained the evidence-based practices used to support families in helping their children develop and learn, whether early intervention services are delivered via telehealth or in person. Recognizing the impacts of the pandemic on mental health and social-emotional development, Virginia will be shifting the Commonwealth’s State Systemic Improvement Plan (SSIP) focus from Indicator 3C (using appropriate behaviors to meet needs) to Indicator 3A (positive social-emotional skills, including social relationships) beginning in 2022. Further information about the SSIP is provided in Indicator 11.

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 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** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2011 | Target>= | 76.40% | 76.40% | 76.40% | 80.00% | 76.12% |
| A | 72.30% | Data | 77.47% | 79.55% | 76.01% | 76.12% | 74.98% |
| B | 2011 | Target>= | 74.40% | 74.40% | 74.40% | 77.00% | 73.59% |
| B | 70.30% | Data | 74.57% | 75.65% | 74.34% | 73.59% | 71.88% |
| C | 2011 | Target>= | 84.90% | 84.90% | 84.90% | 88.00% | 85.44% |
| C | 81.90% | Data | 85.70% | 88.66% | 85.74% | 85.44% | 85.85% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 74.98% | 74.98% | 74.98% | 74.98% | 74.98% | 77.98% |
| Target B>= | 71.88% | 71.88% | 71.88% | 71.88% | 71.88% | 75.88% |
| Target C>= | 85.85% | 85.85% | 85.85% | 85.85% | 85.85% | 88.85% |

**Targets: Description of Stakeholder Input**

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 8,303 |
| Number of respondent families participating in Part C  | 1,664 |
| Survey Response Rate | 20.04% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 883 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 1,154 |
| 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 | 844 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 1,154 |
| 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 | 996 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 1,154 |

| **Measure** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 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) | 74.98% | 74.98% | 76.52% | 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) | 71.88% | 71.88% | 73.14% | 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) | 85.85% | 85.85% | 86.31% | Met target | No Slippage |

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

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

Virginia’s Indicator 4 family outcome data is based on results from an annual administration of the NCSEAM survey. A survey is sent to all families enrolled on December 1. A second mailing is sent about 2-1/2 weeks later to those families who did not respond to the first mailing. Finally, the contract agency attempts to contact by phone families who have not yet responded to the survey and who reside in localities that have fewer than 15 completed surveys after the second-wave mailing.

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

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

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

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

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

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

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

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Survey Response Rate | 19.92% | 20.04% |

**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 FFY 2020, state Part C staff began working with the Virginia Part C New Path Family Support Director on a series of opportunities to engage with stakeholders, especially families, about strategies to improve the family survey response rate. The flyer that went to all families enrolled in early intervention announcing the 2021 family survey included a box stating, “We are working to increase the number of people who complete the survey and your thoughts and ideas are needed. If you are interested in participating in a small group to discuss the survey and help plan improvements, please call (804) xxx-xxxx. Please leave your name and number and let us know that you are interested in the family survey group.” The New Path Family Support Director also reached out to families seeking input. The plan was to work with stakeholders to review family survey procedures, response rates, methods of response (paper, online or phone) and demographic data to identify new strategies for increasing the overall response rate and ensuring the responses are representative of those served. Because of the many COVID-related stressors on local systems, providers and families, it was difficult to engage stakeholders in this work over the past year and only a small stakeholder group could be identified. As a result, this work will continue into calendar year 2022, and the original goal of implementing recommended strategies with the 2022 family survey will move to 2023.

The State Lead Agency also will engage additional individuals and organizations in this work, including the following:
- Virginia’s Parent Training and Information Center, PEATC;
- The Center for Family Involvement at Virginia Commonwealth University, whose cultural brokers may be of particular assistance in considering strategies to increase the response rate for traditionally underrepresented groups;
- National Technical Assistance Centers (ECTA and/or DaSY); and
- A Masters in Social Work student who is doing an internship with the State Lead Agency.

Virginia will continue to participate in the Family Outcomes Data Community of Practice facilitated by the Early Childhood Technical Assistance Center (ECTA) to learn from national technical assistance providers and other states. This community of practice is currently focusing on response rate, representativeness and equity.

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

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

Surveys were mailed to all families who were receiving early intervention supports and services as of December 1, 2020. Surveys were returned (via mail, online submission or phone) by 1,664 families receiving early intervention services. This represents a response rate of 18.8%. When the number of surveys sent is reduced by the number returned due to bad or insufficient addresses, the response rate is 20.0%. This year’s response rate was almost identical to last year’s and likely impacted by the COVID-19 pandemic again. Because the previous year’s survey distribution was delayed by four months (due to shutdowns at the contracted university), families who were still in early intervention received this year’s survey only 8 months after the previous one. Anecdotal information also suggests survey fatigue (with many child and family-serving programs surveying families about the impact of COVID) and other overwhelming family responsibilities/circumstances likely impacted the response rate during this difficult time. COVID-19 did not impact the representativeness of responses received.

Families have the choice of receiving the survey by email or mail. Surveys are sent by email/mail in two waves that are sent out approximately 1 months apart. A total of 386 completed surveys were returned from the first wave mailing efforts (4.4% of all families). Another 301 completed surveys were returned from the second wave mailing (an additional 3.4% of all families). A total of 854 families completed the web-based version of the survey (9.6% of families). Finally, families in localities with fewer than 15 completed surveys after the second wave mailing received follow-up calls for an additional 123 surveys completed via telephone.

The survey is available in seven languages other than English. Six of these languages were available for the first time in FFY 2019 and were added to reflect the languages spoken by families served in Virginia’s early intervention system. In FFY 2020 a total of 106 surveys were completed in Spanish, representing 66% of the families the statewide data system indicated should receive the survey in Spanish. Of the other six languages available for the survey, a total of five surveys were completed, representing 20% of the families the statewide data system indicated should receive a survey in these languages.

In addition to those families whose primary language was something other than English or Spanish, parents who identified their child as Black/African-American also were less likely to respond to the survey than those in other race/ethnicity groups. Although Virginia does not collect data to verify this, it also is reasonable to hypothesize the group of non-responders was more likely to include parents with a lower reading level or literacy challenges than the group of responders since the family survey is distributed in writing and has a fairly high reading level.

Virginia takes a number of steps to reduce any nonresponse bias and promote survey responses from a broad cross- section of families that received Part C services:
- The survey is available in the languages spoken by families in Virginia’s early intervention system;
- There are multiple methods for distributing and returning the survey;
- Families completing the survey are entered into a drawing to win one of three $100 gift cards;
- Phone surveys are attempted in those local systems with fewer than 15 completed surveys after the second wave mailing to ensure representation from all areas of the Commonwealth; and
- Results on the family outcomes are based on a sample of the total responses to ensure the data is representative of the race/ethnicity of families served in Virginia’s early intervention system.

As the State Lead Agency works with stakeholders to evaluate Virginia’s family survey tool and process (as described in a previous section), attention will be given to addressing potential nonresponse bias and strategies to promote equitable survey access and response rates from the full cross-section of families served.

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

The demographics of families responding to the FFY 2020 survey were representative of the demographics of infants, toddlers and families served in Virginia’s Part C system in a number of ways:
- Geographically: All 40 local systems were represented;
- Gender of the child: Sixty-one percent (61%) of survey respondents had a male child compared to 62% of the population served; 37% were female, compared to 38% of the population served
- Race/Ethnicity of the child, for most races/ethnicities: The percent of respondents whose child was White was 58.5% compared to 55.4% of the population served in Virginia’s Part C system. Hispanic was 9.0% compared to 10.3% served; Asian was 3.4% compared to 4.9% served; American Indian or Alaskan Native was 0.2% compared to 0.1% served; and Pacific Islander or Hawaiian Native was 0.3% compared to 0.2% served.

For the remaining race/ethnicity categories, the families responding to the survey were not representative of the families served in Part C. Families who identified their child as two or more races were slightly over-represented in the survey responses received (13.9% of responses compared to 9.8% of families served in Virginia’s Part C early intervention system). Families who identified their child as Black/African-American were under-represented in the survey responses received (13.6% of responses compared to 19.4% served for Black/African-American).

To ensure the family outcome data is representative of the population served, Virginia uses a representative sample of the total responses received in order to calculate the state results for all parts of Indicator 4. From the 1,664 responses to the FFY 2020 Family Survey, a random sample of 1,154 families reflecting the distribution of race/ethnicity in the population served in early intervention was selected for data analysis. The race/ethnicity of children in the representative sample was 55.4% White (matching the percent served), 19.4% Black/African-American (matching the percent served), 10.3% Hispanic/Latino (matching the percent served), 9.8% two or more races (matching the percent served), 4.9% Asian (matching the percent served), 0.1% American Indian or Alaskan Native (matching the percent served, and 0.2% served Pacific Islander or Hawaiian Native (matching the percent served). Although not selected specifically for gender, the representative sample was also representative of the gender of children receiving services under Part C in Virginia (Male 60.9% of representative sample; Female, 37.0%). In addition, the representative sample includes families representing all local early intervention systems in Virginia. The sample of 1,067 families exceeds the minimum number required for an adequate confidence level based on established survey sample guidelines, providing a high degree of confidence that the results of the survey accurately reflect the degree to which families have achieved the outcomes in Indicator 4.

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

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

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

Approach to Target Setting – The Indicator 4 targets for FFY 2020 are equal to the actual results achieved in FFY 2019. The targets for FFY 2025 were determined by using the meaningful differences calculator developed by DaSY to determine the increase necessary to show a meaningful improvement from the actual results achieved in FFY 2019. Interim targets are maintained at the FFY 2020 target level. Once Virginia has met a target and maintained that target level for one year, increases in the targets for the remaining years of the SPP/APR cycle will be considered.

## 4 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

**Response to actions required in FFY 2019 SPP/APR**

The required response information is provided in the Indicator Data section.

## 4 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

## 4 - Required Actions

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

# 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*DFacts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

**Measurement**

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

**Instructions**

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

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

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 0.51% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 1.20% | 1.20% | 1.20% | 1.26% | 1.58% |
| Data | 1.47% | 1.38% | 1.50% | 1.58% | 1.83% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 1.44% | 1.64% | 1.83% | 1.83% | 1.83% | 1.90% |

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 1 with IFSPs | 1,317 |
| 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, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 1 | 97,752 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,317 | 97,752 | 1.83% | 1.44% | 1.35% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Slippage on the percent of Virginia’s birth to 1 population served in Part C early intervention is due to the extraordinary impact of the COVID-19 pandemic. Most referrals to early intervention come from physicians and families.
- Statistics indicate that during this time period, well child visits were down significantly (for example, down 30% for children under 2 with Medicaid). Physicians were not seeing children and, therefore, were unable to identify delays/concerns early and make referrals.
- The pandemic created isolation for families, often eliminating opportunities to see family and friends, attend church, child care or other group activities. As a result, parents did not have the usual opportunity to see their child with same-age peers or for others to see their child and notice potential delays or atypical development.
- Sometimes parents of children referred with milder delays opted to “wait and see” given the many stressors and needs they faced because of the pandemic.
- The December 1, 2020 child count, which is the basis for the Indicator 5 data, occurred prior to vaccine availability and during a significant surge in COVID cases. Most early intervention services were being provided by telehealth at that time and some families who were referred to early intervention declined eligibility determination or declined to move ahead with services.

As COVID restrictions have eased, referrals have rebounded and the number of children served has increased in FFY 2021 compared to FFY 2020.

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

Approach to Target Setting –

FFY 2020: Data available at the beginning of FFY 2020 showed child count down about 12% for 0-1 in Virginia. At that time, the child count numbers were still declining and COVID-related restrictions were still in place. Given the Virginia trends, data from Part C in other states, statistics about missed vaccinations/well child visits (down 30% for children under 2 with Medicaid), it was realistic to project that by 12/1/2020 the 0-1 child count was likely to be down by at least 20% over the previous year. The FFY 2020 target was set accordingly, in recognition of the extraordinary circumstances posed by the COVID-19 pandemic.

FFY 2021: Recognizing continued impacts from the pandemic as well as the importance of increasing child count numbers back toward pre-pandemic results, the target for FFY 2021 was set at 90% of Virginia’s FFY 2019 results on this indicator. This represents getting halfway back to pre-pandemic child count levels from the FFY 2020 target.

FFY 2022: The FFY 2022 target is equal to the FFY 2019 actual results (i.e., back to pre-pandemic level).

In order to determine the FFY 2025 target, Virginia examined projections based on the 2020 Census for Virginia's under 4 population and Virginia Department of Health statistics on birth rate. University of Virginia researchers predict, based on the 2020 Census, Virginia’s under 4 population will increase by 8.2% by 2030. Given that 2025 marks the halfway point of that 10-year growth projection, a 4.1% increase is a reasonable estimate on which to base the FFY 2025 target. The FFY 2025 target shows a 4.1% increase from the FFY 2019 data for Indicator 5. Virginia Department of Health statistics indicate that Virginia's birth rate declined in each of the last five years. These birth rate statistics further support projecting a conservative increase in the targets for Indicator 5 by FFY 2025.

Interim targets are maintained at the FFY 2022 target level. Once Virginia has met a target and maintained that target level for one year, increases in the targets for the remaining years of the SPP/APR cycle will be considered.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 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 (E*MAPS*)) and Census (for the denominator).

**Measurement**

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

**Instructions**

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

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

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.72% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 2.76% | 2.76% | 2.89% | 2.89% | 3.54% |
| Data | 2.97% | 3.18% | 3.29% | 3.54% | 3.62% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 3.20% | 3.43% | 3.62% | 3.62% | 3.62% | 3.77% |

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 3 with IFSPs | 9,800 |
| 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, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 3 | 297,991 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 9,800 | 297,991 | 3.62% | 3.20% | 3.29% | Met target | No Slippage |

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

Approach to Target Setting –

FFY 2020: Data available at the beginning of FFY 2020 showed child count down about 6% for 0-3 in Virginia. At that time, the child count numbers were still declining and COVID-related restrictions were still in place. Given the Virginia trends, data from Part C in other states, statistics about missed vaccinations/well child visits (down 30% for children under 2 with Medicaid), it was realistic to project that by 12/1/2020 the 0-3 child count was likely to be down by 10% over the previous year. The FFY 2020 target was set accordingly, in recognition of the extraordinary circumstances posed by the COVID-19 pandemic.

FFY 2021: Recognizing continued impacts from the pandemic as well as the importance of increasing child count numbers back toward pre-pandemic results, the target for FFY 2021 was set at 95% of Virginia’s FFY 2019 results on this indicator. This represents getting halfway back to pre-pandemic child count levels from the FFY 2020 target.

FFY 2022: The FFY 2022 target is equal to the FFY 2019 actual results (i.e., back to pre-pandemic level).

In order to determine the FFY 2025 target, Virginia examined projections based on the 2020 Census for Virginia's under 4 population and Virginia Department of Health statistics on birth rate. University of Virginia researchers predict, based on the 2020 Census, Virginia’s under 4 population will increase by 8.2% by 2030. Given that 2025 marks the halfway point of that 10-year growth projection, a 4.1% increase is a reasonable estimate on which to base the FFY 2025 target. The FFY 2025 target shows a 4.1% increase from the FFY 2019 data for Indicator 6. Virginia Department of Health statistics indicate that Virginia's birth rate declined in each of the last five years. These birth rate statistics further support projecting a conservative increase in the targets for Indicator 6 by FFY 2025.

Interim targets are maintained at the FFY 2022 target level. Once Virginia has met a target and maintained that target level for one year, increases in the targets for the remaining years of the SPP/APR cycle will be considered.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 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 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 7 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 98.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 99.56% | 99.91% | 97.51% | 99.70% | 96.88% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,891 | 2,394 | 96.88% | 100% | 98.71% | Did not meet target | No Slippage |

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

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

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**Provide reasons for delay, if applicable.**

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

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

State database

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

Data reflects all children referred from October 1, 2020 through December 31, 2020 and evaluated and assessed and for whom an IFSP meeting was required to be conducted.

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

Although the data collected for FFY 2020 were from the second quarter of the fiscal year, Virginia has determined that these data accurately reflect data for infants and toddlers with IFSPs for the full fiscal year based on the following:
- The Commonwealth's compliance percentage was similar each year from FFY 2008 through FFY 2012 (97% - 99%) when data were collected in the second quarter of the fiscal year as they were in FFY 2007 (98%) when data were from the fourth quarter. There appears to be no difference in performance at different times of the year.
- The data collected in FFY 2020 included all children who were referred in the given quarter who were evaluated and assessed and for whom an initial IFSP meeting was required to be conducted. Therefore, the data is representative of all local systems and of the population of children served in Virginia's Part C system in terms of race/ethnicity, gender, age and reason for eligibility.

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

In order to verify that the local system is correctly implementing the regulatory requirements for Indicator 7, the State Lead Agency reviewed data from ITOTS, the state Part C data system, for either 3 or 5 (depending on the size of the local system) state-selected, eligible infants and toddlers who were referred to the given local system during a recent 1-month period, and for whom an initial IFSP meeting was required to be conducted, to determine whether the initial evaluation, assessment and IFSP meeting were held within the required 45-day timeline. To confirm the accuracy of the ITOTS data used for verification of correction, local systems were required to submit (or state staff view on site) the documentation from the records of these children showing completion of the initial evaluation, assessment and IFSP meeting and documenting the mitigating circumstances if the timeline was exceeded.

The State Lead Agency has verified that, based on updated data, the EIS program with noncompliance identified in FFY 2019 and reported by Virginia under this indicator in the FFY 2019 APR is correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

For the local system with a finding of noncompliance on Indicator 7, state Part C staff used the statewide data system to verify that for each instance of noncompliance involved in the FFY 2019 finding, the child did have an initial evaluation, assessment and IFSP meeting, though late. The State Lead Agency has verified that the EIS program with noncompliance identified in FFY 2019 and reported by Virginia under this indicator in the FFY 2019 APR has held an initial evaluation, assessment and IFSP meeting for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2019 SPP/APR**

Data and other information on correction of FFY 2019 noncompliance is provided in the Indicator Data section.

## 7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2020 - June 30, 2021). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 7 - Required Actions

Because the State reported less than 100% compliance for FFY 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.

# Indicator 8A: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 86.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 84.90% | 82.85% | 96.19% | 97.79% | 97.60% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 442 | 509 | 97.60% | 100% | 98.43% | Did not meet target | No Slippage |

**Number of documented delays attributable to exceptional family circumstances**
**This number will be added to the “Number of children exiting Part C who have an IFSP with transition steps and services” field to calculate the numerator for this indicator.**

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**Provide reasons for delay, if applicable.**

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

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

Data for FFY 2020 is based on monitoring data from all 40 local systems in Virginia and was gathered through record reviews. The State Lead Agency randomly selected the children whose records were to be reviewed for each local system from those children who exited early intervention between August 1, 2020 and December 31, 2020. The number of records to be reviewed was based on the number of children in the local system who exited early intervention between August 1, 2020 and December 31, 2020 with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined.
- 0-9 children exited, reviewed all records
- 10-20 children exited, reviewed 10 records
- 21-100 children exited, reviewed 15 records
- 101-300 children exited, reviewed 20 records
- Over 300 children exited, reviewed 30 records

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **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 | 2 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

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

The State Lead Agency has verified that based on updated data, all EIS programs with noncompliance identified in FFY 2019 and reported by Virginia under this indicator in the FFY 2019 APR are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

For each local system with a finding of noncompliance on Indicator 8A, state Part C staff used record review data to verify that for each instance of noncompliance involved in a FFY 2019 finding, the child had transition steps and services added to the IFSP, though late, unless the child had already transitioned out of the Part C early intervention system by the time the noncompliance was identified. The State Lead Agency has verified that each EIS program with noncompliance identified in FFY 2019 and reported by Virginia in the FFY 2019 APR has added transition steps and services in the IFSP for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 8A - Prior FFY Required Actions

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

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

**Response to actions required in FFY 2019 SPP/APR**

Data and information on the correction of FFY 2019 noncompliance is provided in the Indicator Data section.

## 8A - OSEP Response

## 8A - 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.

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 89.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 92.48% | 93.16% | 96.39% | 96.20% | 97.30% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 470 | 509 | 97.30% | 100% | 94.76% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

In some cases local systems were late in sending both LEA and SEA notifications; in others, the delays were only in SEA notification. In all local systems with delays in transition notification, the primary issue was communication challenges within the local system and/or between the local system and the LEA due to remote work arrangements necessitated by the pandemic. These challenges included the following:
- Because local system managers and service coordinators were not working in the same space, there was less oversight of the notification process and timeline by the local system manager and less communication from service coordinators to local system managers to send the SEA notification.
- Lack of access to documents or fax capability.
- Uncertainty about where/to whom/how to send LEA notifications when LEA staff were working remotely.

Of the 14 local systems with noncompliance on this indicator at the time of the record review, 12 were able to demonstrate correction of noncompliance prior to notification of a finding and another has since corrected.

**Number of parents who opted out**

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

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**Provide reasons for delay, if applicable.**

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

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

Data for FFY 2020 is based on monitoring data from all 40 local Part C systems in Virginia and was gathered through local record reviews. The number of records reviewed and the process for selecting local records for review are described below in the section on methods used to select EIS programs for monitoring.

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

YES

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

YES

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

Data for FFY 2020 is based on monitoring data from all 40 local systems in Virginia and was gathered through local record reviews. The State Lead Agency randomly selected the children whose records were to be reviewed by the local system from those children who exited early intervention between August 1, 2020 and December 31, 2020. The number of records to be reviewed was based on the number of children in the local system who exited early intervention between August 1, 2020 and December 31, 2020 with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined:
- 0-9 children exited, reviewed all records
- 10-20 children exited, reviewed 10 records
- 21-100 children exited, reviewed 15 records
- 101-300 children exited, reviewed 20 records
- Over 300 children exited, reviewed 30 records

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **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 | 2 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

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

The State Lead Agency has verified that based on updated data, all EIS programs with noncompliance identified in FFY 2019 and reported by Virginia under this indicator in the FFY 2019 APR are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

For each local system with a finding of noncompliance on Indicator 8B, state Part C staff used record review data to verify that for each instance of noncompliance involved in a FFY 2019 finding, transition notification occurred, though late, unless the child had already transitioned out of the Part C early intervention system by the time the noncompliance was identified. The State Lead Agency has verified that each EIS program with noncompliance identified in FFY 2019 and reported by Virginia in the FFY 2019 APR has completed the transition notification for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 8B - Prior FFY Required Actions

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

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

**Response to actions required in FFY 2019 SPP/APR**

Data and information on the correction of FFY 2019 noncompliance is provided in the Indicator Data section.

## 8B - OSEP Response

## 8B - 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.

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8C - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 87.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 88.62% | 79.01% | 97.43% | 98.39% | 98.68% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 182 | 509 | 98.68% | 100% | 98.08% | Did not meet target | No Slippage |

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

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

249

**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.**

73

**Provide reasons for delay, if applicable.**

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

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

Data for FFY 2020 is based on monitoring data from all 40 local systems in Virginia and was gathered through local record reviews. The State Lead Agency randomly selected the children whose records were to be reviewed by the local system from those children who exited early intervention between August 1, 2020 and December 31, 2020. The number of records to be reviewed was based on the number of children in the local system who exited early intervention between August 1, 2020 and December 31, 2020 with a transition destination of public school/Part B eligible or Part B Referral, Eligibility Not Yet Determined:
- 0-9 children exited, reviewed all records
- 10-20 children exited, reviewed 10 records
- 21-100 children exited, reviewed 15 records
- 101-300 children exited, reviewed 20 records
- Over 300 children exited, reviewed 30 records

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **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 | 2 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

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

The State Lead Agency has verified that based on updated data, all EIS programs with noncompliance identified in FFY 2019 and reported by Virginia under this indicator in the FFY 2019 APR are correctly implementing the specific regulatory requirements (100% compliance), consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

For each local system with a finding of noncompliance on Indicator 8C, state Part C staff used record review data to verify that for each instance of noncompliance involved in a FFY 2019 finding, the transition conference occurred, though late, unless the child had already transitioned out of the Part C early intervention system by the time the noncompliance was identified. The State Lead Agency has verified that each EIS program with noncompliance identified in FFY 2019 and reported by Virginia in the FFY 2019 APR held a transition conference for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2019 SPP/APR**

Data and information on correction of FFY 2019 noncompliance are provided in the Indicator Data section.

## 8C - OSEP Response

## 8C - 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.

# 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 (E*MAPS*)).

**Measurement**

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

**Instructions**

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

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

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

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

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

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

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

## 9 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

YES

**Provide an explanation of why it is not applicable below.**

Virginia has not adopted Part B due process procedures.

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

OSEP notes that this indicator is not applicable.

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

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

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

**Data Source**

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

**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 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1 Mediations held | 0 |
| SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= |  |  |  |  |  |  |

**FFY 2020 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 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  |  |  | N/A | N/A |

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

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

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2020. 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 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

***Updated Data:*** In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 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 2020 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 2020 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., April 1, 2021). 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 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 11 - Indicator Data

**Section A: Data Analysis**

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

As a result of implementing the SSIP, Virginia will increase the statewide percentage of infants and toddlers with IFSPs (exiting early intervention at age level) who demonstrate improved use of appropriate behaviors to meet their needs.

**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)**

NO

**Please provide a link to the current theory of action.**

 https://static1.squarespace.com/static/59a023cfbe42d6bbb81d66a5/t/607dc905a2046575e2511a9a/1618856197843/SSIP+-+Theory+of+Action.pdf

Progress toward the SiMR

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

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2018 | 50.73% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 50.74% | 50.74% | 50.74% | 50.74% | 50.74% | 51.99% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| # 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 | # of infants and toddlers with IFSPs assessed | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 2,933 | 6,569 | 49.99% | 50.74% | 44.65% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Virginia’s statewide data system does not provide the data necessary to conclusively identify the specific reason(s) for the decline in results from FFY 2019 to FFY 2020. Based on anecdotal information reported by local system managers, providers (including service coordinators), and families, a number of pandemic-related factors impacted families’ engagement with early intervention and outcomes for children, including the following:
- Although local systems prioritized in-person services for families who preferred that method and in any circumstance where the child was not making progress via telehealth, there were times during the year (due to local COVID numbers and protocols) when services had to be delivered by telehealth to ensure safety. Telehealth worked better for some families than others.
- Infants and toddlers entering early intervention during the pandemic have tended to have more significant delays and disabilities. Children with milder delays were more likely to not be identified (due to missed well child visits or lack of social gatherings that can help families notice delays compared to other children) or their families chose to wait to receive services.
- Families continued to face tremendous stressors due to the pandemic, including financial stress, isolation, lack of child care and older children learning remotely from home. As a result, some families took breaks from early intervention services and some reduced the frequency and/or length of early intervention sessions. Sometimes families found it challenging to consistently implement the strategies they developed with their service provider, no matter how well-embedded these were within their daily routines and activities.
- Likely due to the same stressors described in the previous point, the percentage of children exiting early intervention because they were lost to contact increased from 7.8% in FFY 2019 to 21.3% in FFY 2020. Given that those lost to contact were more often children with milder delays, this may have impacted the child outcome results in FFY 2020. This trend often also shortened the time children were enrolled in early intervention, potentially reducing the impact early intervention was able to have on child outcomes

Recognizing the limitations of the existing statewide data system, the State Lead Agency has purchased a customizable data system that will facilitate more thorough analysis of factors impacting child outcome results in the future. The new data system will be implemented statewide in FFY 2021.

**Provide the data source for the FFY 2020 data.**

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

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

Virginia’s SiMR is the same as Indicator 3C, summary statement 2. Procedures used to assess each child’s functional skills and progress in the area of using appropriate behaviors to meet needs are described in Indicator 3 of this report. Based on those procedures, entry and exit data are entered into the state early intervention data system. Virginia analyzes data quality using the pattern checking tools recommended by national technical assistance centers. The current state data system does not allow for effective analysis of SiMR results based on demographic factors and collects no delivered service data to use in further analysis. The State Lead Agency has purchased a customizable data system that will facilitate more thorough analysis of factors impacting child outcome results in the future. The new data system will be implemented statewide in FFY 2021.

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

YES

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

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

Virginia has also collected and monitored family survey data to assess progress toward the SiMR. Specifically, Virginia has examined data on family survey questions that align with the evidence-based practices identified in the theory of action as critical to achieving the SiMR: Over the past year early intervention services have helped my family (1) understand our child’s needs; (2) be able to evaluate how much progress my child is making; (3) understand the roles of the people who work with my child and family; (4) do things with and for my child that are good for my child’s development; (5) feel that my efforts are helping my child; and (6) feel more confident in finding ways to meet my child’s needs.

For most of these survey items, the percent of families strongly or very strongly agreeing that early intervention helped their family achieve the selected survey statement was maintained or slightly increased from baseline in FFY 2015 through FFY 2018. There were then some decreases in FFY 2019, likely due to the impact of COVID-19, but no further decreases in FFY 2020. The percent of families agreeing at any level (agree, strongly agree or very strongly agree) has been maintained at or slightly increased to a very high level (at or above 94%) for each of these family survey items from FFY 2015 through FFY 2020.

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

NO

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

YES

**If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.**

Likely due to the variety of stressors families experienced from the ongoing pandemic, the percentage of children exiting early intervention because they were lost to contact increased from 7.8% in FFY 2019 to 21.3% in FFY 2020. As a result, the percentage of children who received services for at least 6 months and for whom there were entry and exit scores on the child outcomes dropped from 93.9% in FFY 2019 to 91.6% in FFY 2020. When children are lost to contact, it increases the chance that exit scores are not collected. Given that those lost to contact were more often children with milder delays, this may have impacted the child outcome results in FFY 2020. Virginia’s SiMR data is based on all children who receive services for at least 6 months and for whom there is complete data (rather than using sampling), which helps to mitigate the impact of the small decrease in data completeness.

Section B: Implementation, Analysis and Evaluation

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

NO

**Describe how the data support the decision not to make revisions to the evaluation plan. Please provide a link to the State’s current evaluation plan.**

The evaluation plan implemented in 2021 did not differ from last year’s submission and can be found within the SSIP posted here: https://static1.squarespace.com/static/59a023cfbe42d6bbb81d66a5/t/607dc7d0af4c1a450dd7a7d9/1618855889151/SSIP+-+Revised+2021-03.pdf.

The State Lead Agency and stakeholders have found that the information and data collected and analyzed through the existing evaluation plan are helpful in understanding the impact of improvement activities and making decisions about the need to revise the plan. The current evaluation plan is also manageable and efficient given the finite resources (people and money) available. Additional data that would be helpful in evaluating the SSIP will be available once Virginia’s new statewide data system is implemented in 2022.

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

Professional Development and Personnel:
Since April 2021, Virginia’s professional development focus remained on developing resources for and providing support to local system managers and practitioners for use of the selected evidence-based practices via telehealth as well as transitioning to in-person service delivery when it was safe to do so. Two webinars, a blog post, articles in the ITCVA monthly Update and the Integrated Training Collaborative’s Newsletter, a short video chat series, and a Resource Pop-Up session addressed tips for telehealth, engaging caregivers in the child outcome summary process virtually and coaching fidelity observation. Ongoing technical assistance was provided through well-attended statewide video-conference meetings with local system managers, every 4-6 weeks. The purpose of the statewide meetings was to share information, problem-solve and support the use of evidence-based practices via telehealth and to prepare for and resume delivery of in-person services.

To ensure practitioners, families, referral sources and the general public easily can find the information they need about Virginia’s early intervention system, the Infant & Toddler Connection of Virginia launched a new website in May 2021. The website is modern and mobile-friendly, and the For Practitioners section of the site includes special pages (accessible from the drop-down menu) that align with the evidence-based practices targeted in Virginia’s SSIP. These pages for Child Outcomes/Functional Assessment and Coaching/Natural Learning Environment Practices put key resources and information at the fingertips of those who need them when they need them.

While the ability to use telehealth service delivery mitigated the impact of provider shortages during the pandemic, efforts continued this year to address these shortages in a more sustainable way. The professional development team continued to participate on an EI/Preservice Consortium with faculty from 5 universities, meeting monthly to share resources, support preservice development for future early interventionists and assist with field placements in early intervention. This year, the group held focus groups with local system managers and program supervisors to learn how universities can better support student placements in early intervention programs. The participating universities are reviewing their processes based on the feedback received. In addition, the Infrastructure Stakeholder Work Group began considering ways that local systems may be able to share providers or create hubs to increase access to low incidence providers and/or those provider types impacted by shortages.

Governance/Fiscal:
Two activities were implemented to support local leadership development. A “Dare to Lead” leadership book study for local system managers and program supervisors began in late 2021, and an ECHO (Extensions for Community Health Outcomes) on leadership for local system managers was completed. During the six monthly sessions, ECHO members discussed the difference between managing and leading, strategic planning, mentoring staff, and virtual supervision. Each ECHO session included an expert sharing information and a case study presentation shared by a participant, with support and problem-solving by the group.

The Infrastructure Stakeholder Work Group, in addition to considering infrastructure changes to address personnel shortages, reviewed early intervention paperwork and processes for opportunities to streamline and discussed opportunities for shared efforts around system components (training, public awareness, child find, etc.) to maximize existing personnel and fiscal resources. The group also emphasized the need to increase reimbursement rates for early intervention services and to make permanent the option for reimbursable telehealth service delivery.

The State Lead Agency provided to the State Medicaid Agency documentation of the need for and effectiveness of telehealth as a service delivery option for early intervention services, and worked with Medicaid staff to define the parameters for its use beyond the public health emergency created by COVID. Similarly, the State Lead Agency continued to communicate the need to raise the Medicaid reimbursement rate for all early intervention services.

Data:
In July 2021, the State Lead Agency completed the procurement process started in 2020 and signed a contract to purchase and customize a statewide data system for early intervention in Virginia. The new data system will have case management and electronic health record capabilities and support improved billing and fiscal reporting. State staff, consulting with subject matter experts as needed, are meeting multiple times per week with the vendor to identify any data elements Virginia needs that are not already captured in the vendor’s off-the-shelf early intervention data system and to develop data migration and training plans. Stakeholders have the opportunity to see demonstrations and provide input as sections of the system are customized for Virginia. The new data system will go live in 2022.

**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.**

Virginia regularly monitored completion of activities and release of products, reviewing evaluation data related to specific activities when available. Beyond these short-term indicators of success, Virginia primarily uses an annual provider implementation survey to measure the impact of the SSIP infrastructure improvement strategies. A full report on provider survey results is available on Virginia's website, https://static1.squarespace.com/static/59a023cfbe42d6bbb81d66a5/t/61eaeb6f6be1ed110966376a/1642785648352/2021+SSIP+Virginia+Provider+Implementation+Survey+Report+-+FINAL.pdf. Ongoing stakeholder feedback and anecdotal data are also critical sources of evaluation information

Professional Development and Personnel:
Provider survey results indicate significant increases from baseline (2016) in the amount of professional development completed on Virginia's selected evidence-based practices. Survey results also indicate that local personnel are using and finding helpful the types of professional development Virginia is building. This is reinforced by evaluation data for specific activities, which shows the professional development implemented this year was widely accessed by relevant personnel with very high satisfaction ratings. Feedback on the new website was overwhelmingly positive and indicates users are better able to find the information and resources they need to support their work. As discussed in a later section, these strategies are positively impacting provider practices, helping to sustain system improvement efforts and fidelity. Research also shows that strong professional development helps recruit and retain personnel.

Governance/Fiscal:
Provider survey data from 2021 shows slight decreases from 2019 (pre-pandemic) in the availability of some sources of local support for and monitoring of provider use of evidence-based practices. This is not surprising given the competing priorities posed by COVID. Over 90% of respondents still indicated that someone was available to provide ongoing support if they requested it. In addition, local systems completed required fidelity assessment and reported the many ways they used fidelity data to address needed provider and system improvements. Survey results reinforce the importance of activities that strengthen local system capacity since ongoing feedback from a program supervisor or local system manager and information, training or support through local staff or team meetings were identified by survey respondents as two of the three most helpful resources that support use of the selected evidence-based practices. Evaluation of the Leadership ECHO completed in 2021 indicated 98% of participants learned skills they can use in their practice and received guidance and tools related to leadership skills and challenges. Leadership is a critical driver of implementation science, supporting and sustaining system improvements.

The State Medicaid Agency has included early intervention in their new telehealth supplement, which specifies policies for the permanent use of telehealth. These new policies offer an exciting opportunity to maximize the accessibility of early intervention services. In addition, the State Medicaid Agency has temporarily increased the reimbursement rate for early intervention services by 12.5% through June 20, 2022, and this increase may become permanent. Increased reimbursement not only helps ensure adequate funding for early intervention but also helps with recruiting and retaining personnel.

Data:
An improved data system is essential to ensuring the State and local systems have the most effective and efficient mechanism for oversight and support of the evidence-based practices identified in Virginia’s SSIP. Further, such a system will provide the data necessary to conduct the thorough analysis of factors impacting child outcome results that cannot be achieved with Virginia’s current data system. Once implemented, the new data system will allow the State Lead Agency and local systems to understand who is and is not benefiting from our efforts to improve child outcomes, what accounts for differences and how to promote equitable outcomes.

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

NO

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

Beginning in FFY 2021 Virginia’s SSIP will focus on a new SiMR. However, a number of the existing infrastructure improvement strategies will carry over and continue. Data and stakeholders continue to identify professional development, personnel, and the data system as key components of the system framework that impact provider practices and, ultimately, child and family outcomes. More information about Virginia’s new SSIP is provided later in this report.

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

Functional assessment, the child outcome summary process, coaching and natural learning environment practices

**Provide a summary of each evidence-based practice.**

Functional Assessment and the Child Outcome Summary (COS) Process: Functional assessment is a continuous collaborative process that combines observing, asking meaningful questions, listening to family stories, and analyzing individual child skills and behaviors within naturally occurring everyday routines and activities across multiple situations and settings. In the Child Outcome Summary Process, a team of individuals who are familiar with a child (including parents) consider multiple sources of information about his/her functioning, including parent/provider observation and results from functional assessment in order to summarize a child’s functioning compared to same-age peers. Since the last SSIP submission, a stakeholder group worked with State staff to develop a fidelity checklist to support evidence-based functional assessment and child outcome summary practices. The checklist aligns with Virginia’s Child Outcomes Booklet and is being piloted as an optional tool at this time. In addition, the professional development team developed a blog post on successfully engaging caregivers in the COS process virtually.

Coaching and Natural Learning Environment Practices: As defined by Dathan Rush and M’Lisa Shelden, coaching is “An adult learning strategy in which the coach promotes the learner’s ability to reflect on his or her actions as a means to determine the effectiveness of an action or practice and develop a plan for refinement and use of the action in immediate and future situations.” In Virginia, practitioners are expected to implement the early childhood coaching approach described by Rush and Shelden to focus on building the caregiver’s capacity to enhance the child’s development using everyday interactions and activities. Practitioners support caregivers during EI visits by joining family activities and coaching caregivers as they practice using intervention strategies with their children during everyday routines and activities. In 2021, SSIP activities in this area focused on professional development to support continued use of these practices via telehealth and promote fidelity through supports and training for fidelity observers. Virginia had planned to pilot practice-based coaching as a tool for ongoing support but was unable to identify enough participants due to competing priorities for local systems during the pandemic.

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

As detailed in Virginia's Theory of Action, if providers are consistently using the targeted evidence-based practices then (1) outcome measures for children using appropriate behaviors to meet needs will be accurately and consistently determined through functional assessment and (2) families will receive the coaching necessary to support their child in improving use of appropriate behaviors to meet their needs during everyday routines and activities and based on functional outcomes that address the family's priorities for their child. The improvement activities in Virginia’s SSIP are designed to impact the SiMR by building the state-level expectations (policies) for use of the targeted evidence-based practices, the capacity (knowledge and skills) of providers to implement these evidence-based practices, the capacity of local systems to deliver ongoing support to providers in using these practices, and the fidelity measures necessary to know these practices are being delivered as intended.

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

Virginia evaluates and monitors fidelity and practice change primarily through an annual Provider Implementation Survey and a statewide coaching fidelity assessment process. Full reports on provider survey and fidelity assessment results are available on Virginia's website athttps://www.itcva.online/ssip. Other data used included anecdotal reports from providers and local system managers and evaluation results from specific professional development activities.

Functional Assessment and Child Outcome Summary Process - The percent of survey respondents reporting use of evidence-based functional assessment and child outcome summary practices with all children increased in 2021 for most practices included on the survey, especially the use of multiple sources of information and consideration of the child’s functioning across settings and situations. Compared to previous years, there also were marked increases in 2021 in the reported use of evidence-based functional assessment and child outcome summary practices with all children at exit. There were decreases in the percent of respondents reporting the process always matched their understanding of how it was supposed to work. Anecdotal data indicates this was due to flexibilities and adjustments sometimes necessary during COVID (e.g., family challenges with other children at home, technology challenges, etc.).

Coaching and Natural Learning Environment Practices – Provider survey and fidelity assessment results indicate increases in the use of evidence-based coaching and natural learning environment practices since baseline. Modeling a strategy, the one coaching practice that decreased when telehealth started, increased significantly in 2021 as providers expanded their understanding of and strategies for modeling beyond being hands-on with the child. In addition, fidelity assessment indicates increased use of observation by providers prior to offering a strategy. The percent of provider survey respondents reporting universal use of some evidence-based coaching practices decreased slightly from 2020 to 2021 but was still higher than in 2019 (pre-pandemic). These practices were beginning the visit by asking the parent/caregiver what had worked well or not well in implementing the joint plan from the last visit and giving the parent/caregiver an opportunity to practice a strategy while the provider observed. Fidelity observations also found a slight decrease in the percent of providers observed to reference the joint plan from the pervious visit and use it to check in/begin the current session, but no decrease was noted in observed use of giving the parent/caregiver the opportunity to practice a strategy. Survey results identified a decrease from 2020 in the percent of respondents who strongly agreed that the parent/caregiver was actively engaged with the child during the early intervention visit. Anecdotal data suggests this may reflect that telehealth visits, which were widely used in 2020, required the parent to interact with the child since the provider was remotely located; whereas the return to more in-person services in 2021 may have resulted in less universal parent/caregiver engagement. Survey results were still higher in 2021 than in 2019 (pre-pandemic).

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

N/A

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

While the evidence-based functional assessment, child outcome summary process, coaching and natural learning environment practices will continue to be used and supported, Virginia will be focusing on a new SiMR and additional evidence-based practices beginning in 2022. More information about Virginia’s new SSIP is provided later in this report.

**Describe any changes to the activities, strategies, or timelines described in the previous submission 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.**

In addition to implementing the remaining planned activities in the current SSIP, Virginia used 2021 to complete data and infrastructure analyses with stakeholders to evaluate whether to continue with the same SiMR or choose a different SiMR. As a result of this work, Virginia has selected a different SiMR and revised the SSIP for implementation beginning in FFY 2021. The new SiMR will focus on increasing the percentage of infants and toddlers who substantially increase their rate of growth in the area of positive social-emotional skills (including social relationships) by the time they exit early intervention. The primary factors stateholders and state staff identified in making this selection were as follows:
- While Virginia’s results in Indicator 3A – Summary Statement 1 have been equal to the national average, they are lower than Virginia’s results for Summary Statement 1 on Indicators 3B and 3C;
- Research has widely documented the pandemic’s impact on the social-emotional well-being of children and families and highlighted how critical positive social-emotional skills and social relationships are to progress in other developmental areas;
- Virginia is already prioritizing and investing in infant and early childhood mental health initiatives within and beyond early intervention;
- There are extensive national resources available to support this work; and
- There are evidence-based practices that specifically address positive social-emotional skills and social relationships. The general evidence-based practices selected and implemented in Virginia’s original SSIP improved practices but did not result in achieving the SiMR. Having an evidence-based practice that specifically addresses the SiMR was a top priority for the new SSIP.
Additional information about the analysis conducted to establish the new SiMR will be provided in the FFY 2021 SPP/APR since the new SiMR and associated SSIP activities will be implemented beginning in FFY 2021.

Virginia’s new SSIP, which includes the evaluation plan, and the new Theory of Action can be found at https://eivirginia.squarespace.com/ssip, under SSIP 2022-2028 Core Documents. Summaries of stakeholder input on the SiMR selection and improvement strategies also can be found in the same section of the website.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

The State Lead Agency has had in place and has used for several years multiple mechanisms for sharing data with and soliciting broad stakeholder input on targets in the SPP/APR and the development and implementation of Indicator 11 (SSIP):
- Quarterly State Interagency Coordinating Council (ICC) meetings;
- Every other month statewide meetings and monthly regional meetings of local system managers;
- The New Path Family Support Network through the Arc of Virginia, which uses a newsletter, blog, Facebook page and webinars to share information with and solicit feedback from families who have or had children in Virginia's early intervention system;
- A monthly Update that is disseminated to a wide range of stakeholders, including service providers, and includes information every month about the SPP/APR or SSIP and how to submit ideas and feedback;
- Meetings with local lead agency executives and supervisors;
- The Infant & Toddler Connection of Virginia website, where drafts and supporting documentation are posted and available for stakeholder review and input;
- Webinars and teleconferences; and
- Work groups and leadership teams for specific projects and initiatives related to the SSIP, the family survey/outcomes and broader infrastructure improvements. Members for these groups always include representation from families, providers, local system managers and state ICC members with attention to ensuring varied expertise and experiences, different local system structures and different areas of the state.

By using these mechanisms again in FFY 2020, a wide variety of stakeholders (e.g., families, other state agencies, individuals working in personnel preparation, service providers, local system managers, local lead agency administrators, etc.) received information and had the opportunity to provide input and partner with the State Lead Agency in decision-making.

This year, Virginia added a number of additional mechanisms for soliciting broad stakeholder input on the SPP/APR, including the SSIP. Most of these new mechanisms were intended to increase engagement with and input from families:
- An idea pop-up that appeared on top of the home page when anyone went to the Infant & Toddler Connection of Virginia website. The pop-up announced input was sought, briefly described the topic and allowed the user to submit ideas directly to the State Lead Agency by clicking on the pop-up;
- Two Zoom and Facebook Live sessions for families;
- A brief survey for families requesting input on improving child outcomes;
- Collaborating with Virginia’s Parent Training and Information Center, PEATC, and the Center for Family Involvement at Virginia Commonwealth University to increase the number and diversity of families engaged in data analysis and improvement planning;
- Deepening the level of engagement by partner programs and groups, like home visiting and early childhood mental health, with meetings and joint planning sessions held at least quarterly.

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

Stakeholders remained actively engaged in Virginia’s SSIP work. Mechanisms for ongoing communication include a SSIP section on the state website and written monthly updates. Beyond being informed of SSIP work, stakeholders served on work groups, review groups and State Leadership Teams that were involved with implementing SSIP activities and evaluating progress. Participants included families, service providers, service coordinators, local system managers, local lead agency administrators, state agencies, institutes of higher education faculty and state ICC members. Stakeholder group meeting notes were posted in the SSIP section on the Infant & Toddler Connection of Virginia website and available for stakeholder review and input.

The Virginia Interagency Coordinating Council (VICC) was updated on and discussed SSIP implementation at each of their quarterly meetings. As detailed in the Introduction of this report, DBHDS collaborated with the Arc of Virginia, PEATC (Virginia’s Parent Training and Information Center) and the Center for Family Involvement to support family engagement in the SSIP beyond the family members on the VICC, significantly increasing the number families engaged this year. Local system managers and early intervention service providers and service coordinators also participated in this year's SSIP work. Mechanisms to support their engagement included discussion and work sessions during statewide and regional meetings, participation on stakeholder groups and opportunities for evaluation/feedback via surveys and web discussions.

Among other activities over the past year, stakeholders have reviewed and provided input on new/revised resources; collaborated with DBHDS in evaluating the current local system infrastructure for early intervention in Virginia and identifying opportunities to streamline processes; and participated in the process of developing the new SSIP. Stakeholders reviewed and discussed data, provided recommendations and rationale and evaluated pros and cons that led to the selection of a new SiMR. They also submitted suggested improvement strategies that were synthesized into the four broad improvement strategies to address the new SiMR. A State Leadership Team of stakeholders, one-third of whom are parents, then worked with the State Lead Agency to develop the revised SSIP, with specific activities, timelines, resources and an evaluation plan.

Evaluation data related to completion of this year’s SSIP activities and from the annual provider survey and fidelity assessment also were widely shared with all stakeholders and used by stakeholder groups throughout the year to monitor progress and evaluate the need for modifications to the SSIP.

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

NO

**Additional Implementation Activities**

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

N/A

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

N/A

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

No new barriers have been identified. However, the COVID-19 pandemic remains a challenge and may present new barriers depending on its course. Primarily, the pandemic has the potential to draw resources (personnel, time, money, attention) away from planned priorities and activities. Virginia will continue to use strong communication and engagement with stakeholders to identify and mitigate these impacts if they occur, adjusting the SSIP as needed.

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

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 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.**

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