

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The Oregon Department of Education (ODE) Office of Enhancing Student Opportunities is responsible for Oregon's 197 school districts and 35 Early Intervention/Early Childhood Special Education (EI/ECSE) programs that serve students eligible for IDEA services. The State works collaboratively with districts and programs to support improved academic and functional results for children with disabilities. The State supports and monitors its districts and programs via the following processes: General Supervision System; Technical Assistance System; Professional Development System; Stakeholder Involvement; and Reporting to the Public. These systems are designed to facilitate high expectations and college and career readiness (CCR) for the State's students with disabilities.

The State has a Technical Assistance System that utilizes technology and personnel to provide districts and programs timely access to data and activities that ensure compliance, as well as improved academic and functional outcomes for students with disabilities. Education specialists serve as single points of contact for districts and programs. In addition, a web-based system provides access to data and on-demand technical assistance, to specialists, districts, and programs.

The State's Professional Development System leverages both IDEA discretionary funds and funds from the State Personnel Development Grant (SPDG) to provide every district and program the opportunity to receive direct technical assistance and professional development focusing on the implementation of evidence-based practices for students with disabilities. Activities include: annual state-wide training on data collections and compliance and performance issues as informed by the state-wide, web-based System Performance Review & Improvement (SPR&I) application; workshops to parents of students with disabilities regarding procedural safeguards and navigating the IEP or IFSP; and support for programs to implement Multi-Tiered Systems of Support (MTSS). In addition, districts/programs can request individualized technical assistance from the State and every effort is made to provide the professional development on-site.

The State solicits stakeholder input as needed on Annual Performance Report (APR) target setting and the State Systemic Improvement Plan (SSIP) content. The State creates Special Education Report Cards for each of the 197 school districts and 35 Early Intervention/Early Childhood Special Education (EI/ECSE) county programs. These report cards display the indicators on the Annual Performance Report that is required for public reporting. Report cards are given to parents of children with disabilities and made available to the public on the State's website:

<https://www.oregon.gov/ode/schools-and-districts/reportcards/SpEdReportCards/Pages/default.aspx>.

Additional information related to data collection and reporting

The Covid-19 pandemic had an impact on ability of the State's EI/ECSE programs to collect indicator data. This biggest impact was on the ability of the EI/ECSE county programs to evaluate children for EI eligibility (C7) and assess exiting EI children for child outcome data (C3). Some of the EI eligibility evaluations were placed on hold during the initial months of the pandemic due to the inability of staff to access children in person or virtually to complete the elements of the evaluation until after the end of FFY 2019-20. A small number of eligible exiting EI infants and toddlers were not administered an exit AEPS I for child outcome data due to the inability to assess these children in person nor to administer the exit AEPS I virtually. The State is confident the data reported in these indicators remains complete and accurate despite these impacts.

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.

The State works collaboratively with nine contractors and 35 Early Intervention/Early Childhood Special Education (EI/ECSE) county programs on comprehensive data collection, analysis, performance reporting, improvement planning, implementation, and progress reporting.

The State's general supervision system is coordinated out of the Office of Enhancing Student Opportunities and includes data, monitoring, and legal components that are designed to identify noncompliance. Components are organized as follows:

System Performance Review & Improvement (SPR&I): All EI/ECSE programs in the State that receive IDEA funds are required to participate in the State's SPR&I system of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by the State and are evenly split between Early Intervention, Early Intervention Transition, and Early Childhood Special Education. Individual child procedural compliance data is collected by programs and submitted to the State electronically through the SPR&I database. The SPR&I system provides the State with the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR 303.700-708 are met by the State.

Complaints and dispute resolution: While the State oversees complaints, due process hearings, mediations, and other alternative dispute resolution activities as part of its general supervision responsibilities, only complaints and due process hearings result in findings of noncompliance.

The State uses independent contractors to conduct mediations and complaint investigations for the agency, with support, coordination, and additional assistance by the State's special education legal specialist. The State provides training and oversight for these complaint contractors. When a complaint final order identifies noncompliance and orders corrective action, State staff work with program staff to ensure completion of corrective action within required time lines. The State uses the same complaint resolution system and complaint contractors for Part B and Part C.

The State has a one-tier due process hearing system. All special education due process hearings are conducted by Office of Administrative Hearings (OAH) administrative law judges. OAH and the State have trained OAH administrative law judges to conduct special education hearings. When a due process hearing final order identifies noncompliance and orders corrective action, State staff work with program staff to ensure completion of corrective action within required time lines. The State uses the same due process hearing system and complaint contractors for Part B and 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 State provides Technical Assistance (TA) to the 35 Early Intervention/Early Childhood Special Education (EI/ECSE) county programs in several ways. The State makes use of a statewide, web-based cycle of continuous improvement mechanism called System Performance Review & Improvement (SPR&I). This system allows both programs and county contacts access to data and activities so that monitoring compliance and noncompliance can occur with regularity and accuracy and allows for timely corrective action to occur. In addition, the State provides training, as needed, that addresses data collection, and compliance and performance issues, as part of the SPR&I continuous improvement mechanism.

The State website (<https://www.oregon.gov/ode/students-and-family/SpecialEducation/earlyintervention/Pages/EI-ECSE-Contractor%27s-Information.aspx>) provides up-to-date forms, program operation guidelines, and information for parents and EI/ECSE contractors.

The State uses e-mail distribution lists to provide timely information and support to programs ensuring that critical information is received. The State and the nine EI/ECSE contractors who provide the direct services to the birth to 5 population provide regular supervision, training, and technical assistance to subcontractors with regards to compliance and other issues through bi-monthly meetings.

Other TA provided as needed may include: advice by experts; assistance in identifying and implementing professional development, instructional strategies, or methods of instruction that are based on scientifically based instruction; using experienced program coordinators and EI/ECSE Specialists to provide advice, technical assistance, and support; and collaboration with institutions of higher education, educational service agencies, national centers of technical assistance, and private TA providers.

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 has several systems in place to provide professional development to its 35 Early Intervention and Early Childhood Special Education (EI/ECSE) county programs throughout the state. The State supports the implementation of Collaborative Problem Solving (CPS), Early Childhood Positive Behavioral Interventions and Support (ECPBIS), and the Center on the Social and Emotional Foundation for Early Learning (CSEFEL) model for promoting social and emotional competence in young children receiving EI/ECSE services. State staff participate in statewide networks such as the Social Emotional Work Group and the Northwest Positive Behavioral Interventions and Support.

The State Interagency Coordination Council (SICC) brings together several agencies that serve infants, toddlers and preschoolers and provides a channel for information to be shared among programs and stakeholders that include the Early Learning Division, Early Head Start, Head Start, Preschool Promise, EI/ECSE providers, Migrant Head Start, Title V Program, Tribal Head Start, Early Childhood Mental Health (DHS), and the Homeless Liaison, among others. The State provides annual, state-wide training, on compliance and performance issues as informed by the statewide, web-based, cycle of continuous improvement mechanism called Systems Performance Review & Improvement. Additionally, ODE provides an annual week long Summer Institute on topics generated by the State and EI/ECSE providers, and Summer Institute partners: the Oregon Health Authority, Oregon State University, Early Learning and Wellness, and the Early Learning Division. The Coalition of Oregon School Administrators also has an EI/ECSE strand in their annual fall conference. In addition, the State contracts with the Family and Community Together (FACT) to provide six workshops per year to families in both English and Spanish. Topics include procedural safeguards, navigating the IFSP process and kindergarten transition.

Stakeholder Involvement:

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

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

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

YES

Reporting to the Public:

How and where the State reported to the public on the FFY 2018 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2018 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2018 APR in 2020, is available.

The State produces Special Education Report Cards annually. These report cards displayed the indicators required for public reporting and the corresponding data for each of the 35 Early Intervention/Early Childhood Special Education county programs. Additional report cards are produced for the Confederated Tribes of Warm Springs and a combined report card for Sherman, Gilliam, and Wheeler counties. In the past these Special Education Report cards were released to the public 60 days following the Annual Performance Report (APR) submission to the Office of Special Education Programs. Due to the COVID-19 pandemic, the 2020 release was delayed to May 21, 2020. For this 2020 release, the Report Cards were revised to fully on line Special Education Profiles which were much more compatible with electronic access to these data through laptops, tablets, and smartphones. The State requires that districts distribute the cards and profiles to all parents of students with Individualized Family Service Plans (IFSP). The State then makes all 35 Special Education Report cards available to the public via its website (Special Education Report Cards: <https://www.oregon.gov/ode/schools-and-districts/reportcards/SpEdReportCards/Pages/default.aspx>) in both Spanish and English, and the May 2020 release was fully accessible by the visually impaired. The public accessed these Special Education Profiles on this website by first selecting the Current At-A-Glance Special Education Profiles link, and typing in the name of the EI/ECSE program. Also, individual EI/ECSE programs provided these Special Education Profiles, or a link to these profiles on their own web pages.

A public announcement is sent via the statewide message system of the Deputy Superintendent of Public Instruction to major state and local news media. The State provides the current APR online (State Performance Plan and Annual Performance Report for Special Education:

<https://www.oregon.gov/ode/reports-and-data/SpEdReports/Pages/State-Performance-Plan-and-Annual-Performance-Report-for-Special-Education.aspx>).

The format of the public report (Special Education Profiles) has changed, and the State understands that further clarification of the format is required.

Targets:

The State is attaching an "At-A-Glance Profile IDEA E/ECSE Indicator Crosswalk" to the introduction section. The targets are displayed on the published profiles and the state will add numbers to the Profiles published for the next SPP/APR.

Intro - Prior FFY Required Actions

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

Response to actions required in FFY 2018 SPP/APR

Intro - OSEP Response

The State has not publicly reported on the FFY 2018 (July 1, 2018-June 30, 2019) performance of each EIS program or provider located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of the IDEA.

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	99.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	90.91%	85.62%	92.31%	92.86%	95.51%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
152	158	95.51%	100%	97.47%	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.

2

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).

During 2005-2006, ODE defined "timely manner" (based on guidance from OSEP) as the initiation date on the IFSP or ten days from when the parent provides consent for the IFSP service.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

System Performance Review and Improvement (SPR&I): All Early Intervention programs in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) SPR&I system of annual accountability and performance reporting. This system focuses on procedural compliance and indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by ODE and are evenly split between Early Intervention, Early Intervention Transition, and Early Childhood Special Education. Files are selected to match the individual race/ethnicity, disability, and gender distribution for each EI/ECSE program based on the December child count. Individual child procedural compliance data is collected by programs and submitted to ODE electronically through the SPR&I database. ODE works collaboratively with programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress. The SPR&I system provides ODE the mechanism for review of corrective actions, district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR 303.700-708 are met. Data are based on actual number of days. The early intervention services indicated on an Individual Family Service Plan (IFSP) are implemented by Early Intervention/Early Childhood Special Education (EI/ECSE) programs as soon as possible following parent consent for services; if there is any delay, the reason must be documented. As this is a compliance indicator, the target is 100%. In FFY 2019, Oregon was at 97.46% in providing early intervention services in a timely manner. This is a 1.95 percentage point increase from FFY 2018.

If needed, provide additional information about this indicator here.

The Covid-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

For FFY 2019 there were six incidents of delay of services. Two incidents were attributable to exceptional family circumstances and had been reported accordingly online. The reasons for the remaining four delays are listed below:

1. Two incidents were due to staff scheduling services after the start date on the IFSP
2. Two incidents had no documented reasons for the delay

Correction of Findings of Noncompliance Identified in FFY 2018

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	9		0

FFY 2018 Findings of Noncompliance Verified as Corrected

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

ODE verified through review and approval of correction data submitted by Early Intervention Programs in SPR&I, Oregon's online monitoring system, that 100% (9/9) of incidents of noncompliance in FFY 2018 were corrected within one year.

ODE verified through additional file reviews (of files created after the correction of individual noncompliance) submitted in SPR&I and reviewed and approved by ODE, that programs with noncompliance demonstrated current compliance and correct implementation of regulatory requirements [34 CFR §§ 303.20(c), 303.344(f)(1)].

The following steps were completed for the verification process for each individual noncompliance:

- The EI program provided the reason for each individual noncompliance through online submission into SPR&I, Oregon's monitoring system and
- ODE reviewed the reason for noncompliance and indicated corrective action needed and
- The EI program submitted the corrective action on the individual noncompliance in SPR&I and
- ODE reviewed the submitted corrective action and approved same.

Demonstration of correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §§ 303.20(c), 303.344(f)(1) was obtained through the following:

- For the identified area of noncompliance, the EI programs with noncompliance completed additional reviews of files that were developed after the original noncompliance in the area of the identified noncompliance and submitted these in SPR&I.
- The additional file reviews for each EI Program were reviewed and verified by ODE that each EI program with corrected noncompliance was in compliance and correctly implementing 34 CFR §§ 303.20(c), 303.344(f)(1).

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

ODE verified that 100% (9/9) of incidents of noncompliance in FFY 2018 were corrected within one year. EI programs submitted in SPR&I corrective actions and additional file reviews of files newly created after correction of noncompliance. ODE reviewed and verified corrective actions were completed and the additional file reviews demonstrated correct implementation of regulatory requirements.

- Nine programs had one incident of noncompliance each.

Reasons for noncompliance were as follows:

- Six instances of Related services being provided late due to staff scheduling conflicts
- Three instances of services scheduled after the start date on IFSP

These nine programs submitted in SPR&I an explanation for the delay in services and corrective actions. ODE verified completion of corrective actions and that services were provided to these nine children and that each noncompliance was corrected (100%, 9/9) unless the child was no longer within the jurisdiction of the EIS program.

Each program reviewed the practices that contributed to the noncompliance, and demonstrated compliance with regulatory requirements through submission of additional file reviews in SPR&I. The additional file reviews demonstrating correct implementation of 34 CFR §§ 303.20(c), 303.344(f)(1) for each EI Program were reviewed and verified as compliant and demonstrating correct implementation of regulatory requirements by ODE.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2017	11	11	0

FFY 2017

Findings of Noncompliance Verified as Corrected

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

In FFY 2017 there were 14 incidents of delay of services. Three incidents were due to exceptional family circumstances and had been reported accordingly online. The reasons for the remaining 11 incidents are listed below:

- One incident had no documented reason for the delay
- Ten incidents were due to staff scheduling services after the start date on the IFSP

In 2019, ODE verified through review and approval of correction data submitted by Early Intervention Programs in SPR&I, Oregon's online monitoring system, that 100% (11/11) of incidents of noncompliance in FFY 2017 were corrected within one year. EI programs submitted in SPR&I corrective actions and additional file reviews of files newly created after correction of noncompliance. ODE reviewed and verified corrective actions were completed. ODE reviewed, verified and approved that the additional file reviews (of files created after the correction of individual noncompliance) submitted in SPR&I demonstrated current compliance and correct implementation of regulatory requirements [34 CFR §§ 303.20(c), 303.344(f)(1)].

The following steps were completed for the verification process for each individual noncompliance:

- The EI program provided the reason for each individual noncompliance through online submission into SPR&I, Oregon's monitoring system and
- ODE reviewed the reason for noncompliance and indicated corrective action needed and
- The EI program submitted the corrective action on the individual noncompliance in SPR&I and
- ODE reviewed the submitted corrective action and approved same.

Demonstration of correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §§ 303.20(c), 303.344(f)(1) was obtained through the following:

- For the identified area of noncompliance, the EI programs with noncompliance completed additional reviews of files that were developed after the original noncompliance in the area of the identified noncompliance and submitted these in SPR&I.
- The additional file reviews for each EI Program were reviewed and verified by ODE that each EI program with corrected noncompliance was in compliance and correctly implementing 34 CFR §§ 303.20(c), 303.344(f)(1).

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

In 2019, ODE verified through review and approval of correction data submitted by Early Intervention Programs in SPR&I, Oregon's online monitoring system, that 100% (11/11) of incidents of noncompliance in FFY 2017 were corrected within one year. EI programs submitted in SPR&I corrective actions and additional file reviews of files newly created after correction of noncompliance. ODE reviewed and verified corrective actions were completed. ODE reviewed, verified and approved that the additional file reviews (of files created after the correction of individual noncompliance) submitted in SPR&I demonstrated current compliance and correct implementation of regulatory requirements [34 CFR §§ 303.20(c), 303.344(f)(1)].

The following steps were completed for the verification process for each individual noncompliance:

- The EI program provided the reason for each individual noncompliance through online submission into SPR&I, Oregon's monitoring system and
- ODE reviewed the reason for noncompliance and indicated corrective action needed and
- The EI program submitted the corrective action on the individual noncompliance in SPR&I and
- ODE reviewed the submitted corrective action and approved same.

Demonstration of correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §§ 303.20(c), 303.344(f)(1) was obtained through the following:

- For the identified area of noncompliance, the EI programs with noncompliance completed additional reviews of files that were developed after the original noncompliance in the area of the identified noncompliance and submitted these in SPR&I.

• The additional file reviews for each EI Program were reviewed and verified by ODE that each EI program with corrected noncompliance was in compliance and correctly implementing 34 CFR §§ 303.20(c), 303.344(f)(1).

1 - Prior FFY Required Actions

None

1 - OSEP Response

The State did not provide the reasons for delay, as required by the Measurement Table. Therefore, OSEP was unable to determine whether the State reviewed the reasons for delay.

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR information that the remaining 11 uncorrected findings of noncompliance identified in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02.

1 - Required Actions

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	81.00%

FFY	2014	2015	2016	2017	2018
Target>=	96.50%	96.50%	96.50%	96.50%	96.50%
Data	96.43%	97.54%	97.01%	98.15%	98.47%

Targets

FFY	2019
Target>=	96.50%

Targets: Description of Stakeholder Input

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	4,280
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	4,338

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,280	4,338	98.47%	96.50%	98.66%	Met Target	No Slippage

Provide additional information about this indicator (optional)

The Covid-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2015	Target>=	81.40%	82.00%	85.40%	85.40%	85.40%
A1	84.89%	Data	81.54%	84.89%	85.08%	84.83%	85.29%
A2	2015	Target>=	59.40%	60.00%	42.30%	42.30%	42.30%
A2	41.00%	Data	57.29%	41.00%	41.80%	42.11%	41.21%
B1	2015	Target>=	64.20%	64.30%	66.70%	66.70%	66.70%
B1	66.42%	Data	61.33%	66.42%	64.32%	61.85%	61.40%
B2	2015	Target>=	7.60%	8.00%	36.00%	36.00%	36.00%
B2	35.69%	Data	8.51%	35.69%	34.82%	34.39%	34.50%
C1	2015	Target>=	64.90%	65.00%	77.80%	77.80%	77.80%
C1	77.28%	Data	65.97%	77.28%	75.83%	75.75%	74.62%
C2	2015	Target>=	18.40%	18.50%	40.60%	40.60%	40.60%
C2	40.33%	Data	13.29%	40.33%	38.95%	36.61%	36.38%

Targets

FFY	2019
Target A1>=	85.40%
Target A2>=	42.30%
Target B1>=	66.70%
Target B2>=	36.00%
Target C1>=	77.80%
Target C2>=	40.60%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

2,556

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	77	3.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	252	9.82%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,248	48.64%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	759	29.58%

Outcome A Progress Category	Number of children	Percentage of Total
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	230	8.96%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	2,007	2,336	85.29%	85.40%	85.92%	Met Target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	989	2,566	41.21%	42.30%	38.54%	Did Not Meet Target	Slippage

Provide reasons for A2 slippage, if applicable

The State uses the AEPS I and II as its one statewide tool for determining the C3 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the Covid-19 pandemic, administering an exit AEPS was not possible. Subsequently, the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children's data were not available because they were in service for less than a year. These factors resulted in depressing the child outcome data for C3:A2.

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	41	1.60%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	800	31.18%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	911	35.50%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	460	17.93%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	354	13.80%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 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	1,371	2,212	61.40%	66.70%	61.98%	Did Not Meet Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	814	2,566	34.50%	36.00%	31.72%	Did Not Meet Target	Slippage

Provide reasons for B2 slippage, if applicable

The State uses the AEPS I and II as its one statewide tool for determining the C3 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the Covid-19 pandemic, administering an exit AEPS was not possible. Subsequently, the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children's data were not available because they were in service for less than a year. These factors resulted in depressing the child outcome data for C3: B2.

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	26	1.01%

Outcome C Progress Category	Number of Children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	566	22.06%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,105	43.06%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	657	25.60%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	212	8.26%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 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	1,762	2,354	74.62%	77.80%	74.85%	Did Not Meet Target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	869	2,566	36.38%	40.60%	33.87%	Did Not Meet Target	Slippage

Provide reasons for C2 slippage, if applicable

The State uses the AEPS I and II as its one statewide tool for determining the C3 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the Covid-19 pandemic, administering an exit AEPS was not possible. Subsequently the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children's data were not available because they were in service for less than a year. These factors resulted in depressing the child outcome data for C3: C2.

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	3,855
The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.	1,111

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)

NO

Provide the criteria for defining "comparable to same-aged peers."

In 2015, using a national AEPS data set from typically developing children, a review team considered 90%, 85% and 80% percentile cut offs against the national data results to decide the cut off level that best reflected the State's children in EI programs. The review team, State staff, the EI/ECSE Contractors and the EI/ECSE stakeholder group were all asked to analyze the percentile cut offs and determine the cut off level that the State should use for reporting to the EI child outcomes. The consensus was to use the 80% cut off level. This most closely represents the children who are eligible for Early Intervention programs and receive services in Oregon.

Child progress is measured using the following rubric:

If a child enters with a score below the normal range and stays the same or regresses at the next test administration, the child is categorized as (a) does not improve functioning. If the child makes progress and the ratio of how far below the normal level of development increases between test administrations, the child is categorized as (b) improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers. If the child makes progress but the ratio of how far below the normal level of development decreases between test administrations, the child is categorized as (c) improved functioning to a level nearer to the functioning of same-aged peers, but did not reach it. If a child enters with a score below the normal range and increases to reach or exceed the normal range at the next test administration, the child is categorized as (d) improved functioning sufficient to reach a level comparable to same-aged peers.

If a child enters with a score at or above the normal range and maintains their score at or above the normal range at the next test administration, the child is categorized as (e) maintains functioning at or above same age peers.

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

As of 2008, all EI/ECSE programs in the State are required to enter individual child assessment results from the Assessment, Evaluation, and Programming System (AEPS) into the Early Childhood Web (ecWeb). The aggregate results are utilized for reporting on indicators C3 and B7.

Provide additional information about this indicator (optional)

Effects of COVID-19:

1. Impact on data completeness, validity, and reliability for the indicator: As documented in the slippage statements, the emergence of the Covid-19 pandemic in March 2020 reduced the ability of EI/ECSE programs to complete exit AEPS 1 assessments resulting in reverting to the annual administration of the AEPS 1 as the exit data, or having no exit data at all, and resulting in the elimination of that child record from the data. This resulted in the reduction of the number of records submitted by programs for this indicator.
2. Explanation of how COVID-19 specifically affected the state's ability to collect the data for the indicator: The inability of the EI/ECSE programs to administer some of the exit AEPS I assessments resulted in reverting to the annual administration of the AEPS 1 as the exit data, or having no exit data at all and the elimination of that child record from the data. This resulted in the reduction of the number of records utilized for this indicator.
3. Any steps the state took to mitigate the impact of COVID-19 on the data collection: The State supplied its EI/ECSE programs with guidance and training materials concerning how to administer the AEPS 1 virtually, which helped some programs and practitioners gather accurate exit data for FFY 2019-20.

3 - Prior FFY Required Actions

None

3 - OSEP Response

The State did not report the number of infants and toddlers with IFSPs assessed, as required by the Measurement Table.

The State reported that the COVID-19 pandemic impacted the data for this indicator. Specifically, the State reported, "[t]he State uses the AEPS I and II as its one statewide tool for determining the C3 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the Covid-19 pandemic, administering an exit AEPS was not possible. Subsequently the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children's data were not available because they were in service for less than a year."

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

A. Percent = $\left[\frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family know their rights}}{\text{\# of respondent families participating in Part C}} \right] \times 100$.

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

C. Percent = $\left[\frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn}}{\text{\# of respondent families participating in Part C}} \right] \times 100$.

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2014	Target>=	89.63%	89.73%	89.83%	90.00%	91.00%
A	89.63%	Data	89.63%	91.42%	95.24%	89.69%	94.09%
B	2014	Target>=	89.50%	89.60%	89.70%	90.00%	91.00%
B	89.50%	Data	89.50%	89.67%	92.86%	92.07%	91.40%
C	2014	Target>=	92.09%	92.19%	92.29%	92.59%	93.09%
C	92.09%	Data	92.09%	92.72%	94.60%	90.25%	90.32%

Targets

FFY	2019
Target A>=	91.00%
Target B>=	91.00%
Target C>=	93.09%

Targets: Description of Stakeholder Input

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service

providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

FFY 2019 SPP/APR Data

The number of families to whom surveys were distributed	1,383
Number of respondent families participating in Part C	161
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	144
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	161
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	147
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	161
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	146
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	160

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	94.09%	91.00%	89.44%	Did Not Meet Target	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)	91.40%	91.00%	91.30%	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)	90.32%	93.09%	91.25%	Did Not Meet Target	No Slippage

Provide reasons for part A slippage, if applicable

Slippage may be due to the configuration of programs that were selected this year (as part of our sampling plan). Oregon does not survey every county every year and the difference in the rates this year compared to last year could be due to the fact that different counties were surveyed. Even though each year's sample is a good representation of the whole state in terms of demographics, we still could end up with one group of counties who are less involved than another group. In fact, last time this group of counties were surveyed (FFY2017), their Indicator 4A rate was 89.69% which is comparable to the 89.44% rate obtained this year. We have identified two programs in particular with the lowest scores on this indicator (4A) and will follow-up with them to determine what steps they could take to better help families know their rights.

While all programs receive a detailed report of their survey results and are encouraged to identify areas where they might improve, ODE plans to reach out to all programs to explore what they are doing (or not doing) to encourage parent involvement on all three sub-indicators.

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.

The sampling methodology is designed to choose a representative set of districts/programs each year that is reflective of the state's population as a whole. Within districts/programs the population is stratified by school, grade, race/ethnicity, primary disability, and gender in order to ensure the representativeness of the sample.

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

Question	Yes / No
If your collection tool has changed, upload it here	
The demographics of the families responding are representative of the demographics of infants, toddlers, and families 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.

Informed by Oregon’s participation in the Early Childhood TA Center (ECTA) & The Center for IDEA Early Childhood Data Systems (DaSy) Family Outcomes CoP, ODE continues to work with FACT (Oregon’s PTI Center) to support programs in collecting the following data to inform their parent involvement survey efforts:

1. Identify current communication and dissemination strategies programs are utilizing.
2. Collect program input as to why the response rate of parents of non-white students is low.
3. Identify additional communication and/or dissemination strategies for increasing the response rate of parents--especially, parents of non-white students.
4. Ask programs if there are actions ODE and/or its survey vendor could do in terms of survey design/format/administration that would increase the likelihood parents of non-white students responding.

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

Note: We used statistical significance testing to determine if one group was over- or under-represented in the response rate.

The representativeness of the Part C results was assessed by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of children with disabilities in the Part C population. This comparison indicates the results are generally representative by (1) age of the child and (2) primary disability of the child. For example, 48% of the population has a child who was age 2 as of December 1st, and 48% of the respondents had a child who was age 2 as of December 1st. Further, 91% of the population has a child with a developmentally delay, and 91% of the respondents had a child with a developmentally delay. Parents of white children were over-represented (the results indicate that 78% of parent respondents had a student with a race/ethnicity of white whereas 67% of children receiving Part C services are white) and parents of Hispanic students were under-represented. However, there were no significant differences in the positivity of responses on the survey itself between parents of white children and parents of children of other race/ethnicities, so we are confident that the overall results are representative of the State. Furthermore, results were weighted by program to ensure that the parent survey results reflected the population of parents. ODE will continue to encourage parents of children of all race/ethnicities to complete the survey. To that end, ODE plans to collect the following data to inform and support programs parent involvement survey efforts:

1. Identify current communication and dissemination strategies programs are utilizing.
2. Collect program input as to why the response rate of parents of non-white students is low.
3. Identify additional communication and/or dissemination strategies for increasing the response rate of parents--especially, parents of non-white students.
4. Ask programs if there are actions ODE and/or its survey vendor could do in terms of survey design/format/administration that would increase the likelihood parents of non-white students responding.

Provide additional information about this indicator (optional)

The state does not think COVID had an impact on the response rate given that the same process was used as before (mail). ODE has no reason to suspect that the COVID had an impact on the positivity of the survey responses. Two of the family survey rates stayed the same and one decreased from 2018-19 to 2019-20 and many item scores were similar to the previous year. ODE has no reason to believe that the change in scores was a function of COVID.

4 - Prior FFY Required Actions

None

4 - OSEP Response

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

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.75%

FFY	2014	2015	2016	2017	2018
Target >=	0.76%	0.76%	0.80%	0.80%	0.80%
Data	0.93%	0.91%	0.96%	0.94%	0.98%

Targets

FFY	2019
Target >=	0.80%

Targets: Description of Stakeholder Input

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	450
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	43,312

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
450	43,312	0.98%	0.80%	1.04%	Met Target	No Slippage

Compare your results to the national data

The FFY 2019 national data for C5 is 1.37 % and the 2019 data for C5 for the State is 1.04%, which is 0.33 percentage points below the national average. The difference between the State's C5 performance and the national C5 performance could be attributed to two factors:

1. The State is not an "at risk" state and only serves children in Part C who experience disability and meet eligibility requirements.
2. The State is among the 20 states with the most restrictive eligibility requirements.

Provide additional information about this indicator (optional)

The Covid-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	1.78%

FFY	2014	2015	2016	2017	2018
Target >=	2.20%	2.30%	2.30%	2.40%	2.40%
Data	2.59%	2.61%	2.74%	2.92%	3.17%

Targets

FFY	2019
Target >=	2.40%

Targets: Description of Stakeholder Input

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	4,338
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	132,800

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,338	132,800	3.17%	2.40%	3.27%	Met Target	No Slippage

Compare your results to the national data

The FFY 2019 national data for C6 is 3.70% and the 2018 data for C6 for the State is 3.27%, which is 0.43 percentage points below the national average. The difference between the State's C6 performance and the national C6 performance could be attributed to two factors:

1. The State is not an "at risk" state and only serves children in Part C who are eligible for a disability.
2. The State is among the 20 states with the most restrictive eligibility requirements.

Provide additional information about this indicator (optional)

The Covid-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	99.40%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.72%	99.56%	99.26%	99.39%	99.45%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
2,401	3,254	99.45%	100%	99.23%	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.

828

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).

7/2019-6/2020

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

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

The percentage was calculated using aggregated data collected monthly from all EI/ECSE programs in the state. Each monthly data report represents all children in the EI referral process from the second day of the previous month to the first day of the current month. Programs submit data completion status of EI evaluations, eligibility and initial IFSP meeting. Of those children, programs must document; (1) how many completed the process within 45 days of referral, (2) how many completed the process but not within 45 days of referral (these programs must submit a corrective action plan), (3) how many have not completed the process, and (4) how many discontinued the process and why.

Provide additional information about this indicator (optional)

Effects of COVID 19:

1) Impact on data completeness, validity, and reliability for the indicator: All programs submitted their monthly data and corrective action plans (CAPs) on time for the entire data collection period (7/19-6/20).

A new CAP template was created for April 2020 – June 2020 data in order for programs to document delays due to COVID. The delay was coded, "Exceptional Family Circumstances due to COVID-19."

These cases were included in this report with the "Number of documented delays attributable to exceptional family circumstances."

2) Explanation of how COVID-19 specifically affected the state's ability to collect the data for the indicator: All data was submitted, reviewed and summarized as normal for the entire data collection time period (7/19-6/20). Any steps the state took to mitigate the impact of COVID-19 on the data collection: Programs were encouraged to use informed clinical opinion and medical statements, rather than virtual or in-person evaluations, when possible. If a delay was due to COVID-19, programs used the new COVID CAP template with the reason for delay coded, "Exceptional Family Circumstances."

3) Any steps the state took to mitigate the impact of COVID-19 on the data collection: Programs were encouraged to use informed clinical opinion and medical statements, rather than virtual or in-person evaluations, when possible. If a delay was due to COVID-19, programs used the new COVID CAP template with the reason for delay coded, "Exceptional Family Circumstances."

Reasons for Delay:

For FFY 2019 there were 853 incidents of delay of services. 828 incidents were attributable to exceptional family circumstances and had been reported accordingly online. The reasons for the remaining 25 delays are listed below:

1. Three incidents were due to staff communication problems
2. Four incidents were due to staff illness
3. Ten incidents were due to the evaluation schedule being full due to staff shortage
4. Five incidents were due to data entry errors
5. Two incidents were due to staff training issues
6. One incidents were due to interpreter being ill

Correction of Findings of Noncompliance Identified in FFY 2018

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
23	23		0

FFY 2018 Findings of Noncompliance Verified as Corrected

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

EI/ECSE programs submit a corrective action plan (CAP) for any child for whom the 45-day timeline was not met. Included in the CAP: 1) the number of days needed to complete the referral, eligibility and initial IFSP meeting, 2) the child's initials and birth date, 3) the specific reasons for not meeting the 45-day timeline, 4) corrective actions based on an analysis of the problem(s), and 5) activities planned to address each problem identified.

In FFY 2018, 23 evaluations and initial IFSP meetings did not meet the 45-day timeline for the following reasons: staff communication problems (2), staff illness (2), evaluation schedule full (11), data entry error (1), specialist out of office (4), delay in audiology evaluation (2), and staff training issues (1). The programs with noncompliance developed and implemented CAPs detailing solutions for 100% compliance and submitted these to ODE for review and approval. The CAPs included staff training, development of alternative plans when staff became ill, and working with school districts to hire additional evaluators.

ODE verified that all programs with noncompliance correctly implemented 34 CFR §§303.310(a) and 303.342(a) and achieved 100% compliance based on a review of CAPs detailing the noncompliance, correction and review of subsequent monthly CAP plans for the program.

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

ODE verified that 100% (23/23) of the incidents of noncompliance in FFY 2018 were corrected within one year. All programs with noncompliance conducted the initial evaluation, assessment, and IFSP meeting, although late, for any child for whom the 45-day timeline was not met based on an ODE review of their Corrective Action Plans (CAPs) documenting each of the 23 cases of noncompliance (consistent with OSEP Memo 09-02).

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

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

7 - Prior FFY Required Actions

None

7 - OSEP Response

The State did not provide the reasons for delay, as required by the Measurement Table. Therefore, OSEP was unable to determine whether the State reviewed the reasons for delay.

7 - Required Actions

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	94.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	94.41%	96.58%	95.14%	94.63%	86.84%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
134	153	86.84%	100%	88.24%	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.

1

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All EI programs in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) System Performance Review & Improvement (SPR&I) system of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by ODE and are evenly split between Early Intervention, Early Intervention Transition, and Early Childhood Special Education. Files are selected to match the individual race/ethnicity, disability, and gender distribution for each EI/ECSE program based on the December child count. Individual child procedural compliance data is collected by programs and submitted to ODE electronically through the SPR&I database. ODE works collaboratively with programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress. The SPR&I system provides ODE the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR §303.700-708.

As part of the standard operating procedures through SPR&I, EI/ECSE programs:

- Engage in self-assessment through data collection, review, and analysis to inform meaningful improvement.
- Report to ODE on timely transition planning for a predetermined number of child files selected for review.
- Address noncompliance with timely transition steps and services through corrective action documented in SPR&I that includes verifying that services were provided to children, an explanation for the cause of the noncompliance, correction of practices that contributed to the noncompliance, and demonstration of current compliance through subsequent data collection.

Provide additional information about this indicator (optional)

The Covid-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

For FFY 2019 there were 19 findings. One finding was due to exceptional family circumstances and had been reported accordingly online. The reasons for the remaining 18 delays are listed below:

1. Three findings were due to adding the transition steps more than 9 months before the third birthday
2. Nine findings were due to adding the transition steps less than 90 days before the third birthday
3. Six findings were due to no documentation of transition steps being included.

For FFY 2018 there were 20 findings.

1. Seven findings were due to no documentation of transition steps being included
2. Nine findings were due to adding transition steps more than 9 months before the third birthday
3. Four findings were due to transition adding transition steps less than 90 days before the third birthday.

Correction of Findings of Noncompliance Identified in FFY 2018

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
20	20		0

FFY 2018 Findings of Noncompliance Verified as Corrected

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

In FFY 2018, 20 incidents of noncompliance resulted in 13 findings across 13 programs (four programs had two incidents each for a total of four findings; one program had four incidents for a total of one finding; and eight programs had one incident each for a total of eight findings).

ODE reviewed and verified corrective action data submitted in SPR&I by EI/ECSE programs with noncompliance; 100% (20/20) of incidents of noncompliance in FFY 2018 were corrected within one year. EI/ECSE programs with noncompliance demonstrated correction of practices that

contributed to the noncompliance as well as current compliance with 34 CFR §303.209 and 303.344(h) based on ODE's review, verification, and approval of corrective action data and new files created after the occurrence of noncompliance and submitted by EI/ECSE programs in SPR&I.

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

In FFY 2018, 86.84% (132/152) of child files reviewed for EI transition included transition steps at least 90 calendar days, and, at the discretion of the parties, up to nine months before the child's third birthday to support the child's transition to preschool and other appropriate community services. Twenty incidents of noncompliance resulted in 13 findings across 13 programs (four programs had two incidents each for a total of four findings; one program had four incidents for a total of one finding; and eight programs had one incident each for a total of eight findings).

ODE reviewed, verified, and approved corrective action data submitted by EI/ECSE programs to SPR&I; 100% (20/20) of incidents of noncompliance in FFY 2018 were corrected within one year and the programs with noncompliance developed an IFSP with transition steps and services for each child, unless the child was no longer within the jurisdiction of the EI program.

EI/ECSE programs with noncompliance demonstrated correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §303.209 and 303.344(h) based on ODE's review, verification, and approval of corrective action data and new files created after the occurrence of noncompliance and submitted by EI/ECSE programs in SPR&I.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8A - Prior FFY Required Actions

None

8A - OSEP Response

The State did not provide the reasons for delay, as required by the Measurement Table. Therefore, OSEP was unable to determine whether the State reviewed the reasons for delay.

8A - Required Actions

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

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

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
153	153	100.00%	100%	100.00%	Met Target	No Slippage

Number of parents who opted out

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

Describe the method used to collect these data

All EI programs in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) Systems Performance Review & Improvement (SPR&I) system of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by ODE and are evenly split between Early Intervention, Early Intervention Transition, and Early Childhood Special Education. Files are selected to match the individual race/ethnicity, disability, and gender distribution for each EI/ECSE program based on the December child count. Individual child procedural compliance data is collected by programs and submitted to ODE electronically through the SPR&I database. ODE works collaboratively with programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress. The SPR&I system provides ODE the mechanism for review of district/program policies, procedures, and systems to ensure the requirements set forth in 34 CFR §303.700-708 are met.

ODE is notified monthly via ecWeb, the state online IFSP data base, of all children transitioning from early intervention to early childhood special education. On the first day of every month, in ecWeb, an SEA/LEA Transition Notification report is generated and distributed to the SEA/LEA. These data comprise a list of all of the EI children in Oregon who are currently in process of transitioning to ECSE services.

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

NO

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All EI programs in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) Systems Performance Review & Improvement (SPR&I) system of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. Data are collected on a specified number of child files determined by ODE and are evenly split between Early Intervention, Early Intervention Transition, and Early Childhood Special Education. Files are selected to match the individual race/ethnicity, disability, and gender distribution for each EI/ECSE program based on the December child count. Individual child procedural compliance data is collected by programs and submitted to ODE electronically through the SPR&I database. ODE works collaboratively with programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress. The SPR&I system provides ODE the mechanism for review of district/program policies, procedures, and systems to ensure the requirements set forth in 34 CFR §303.700-708.

Provide additional information about this indicator (optional)

The Covid-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8B - Prior FFY Required Actions

None

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	87.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	97.20%	95.21%	97.22%	95.30%	89.47%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
140	153	89.47%	100%	92.16%	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.

0

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.

1

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All EI programs in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) System Performance Review & Improvement (SPR&I) system of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by ODE and are evenly split between Early Intervention, Early Intervention Transition, and Early Childhood Special Education. Files are selected to match the individual race/ethnicity, disability, and gender distribution for each EI/ECSE program based on the December child count. Individual child procedural compliance data is collected by programs and submitted to ODE electronically through the SPR&I database. ODE works collaboratively with programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress. The SPR&I system provides ODE with the mechanism for review of district/program policies, procedures, and systems to ensure the requirements set forth in 34 CFR §303.700-708 are met.

As part of the standard operating procedures through SPR&I, EI/ECSE programs:

- Engage in self-assessment through data collection, review, and analysis to inform meaningful improvement.
- Report to ODE on timely transition planning for a predetermined number of child files selected for review.
- Address noncompliance with timely transition steps and services through corrective action documented in SPR&I that includes verifying that services were provided to children, an explanation for the cause of the noncompliance, correction of practices that contributed to the noncompliance, and demonstration of current compliance through subsequent data collection.

Provide additional information about this indicator (optional)

The Covid-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

Reasons for Delay of Transition conferences:

For FFY 2019 there were 13 findings. One finding was due to exceptional family circumstances and had been reported accordingly online. The reasons for the remaining 12 findings are listed below:

1. Two findings were due to conducting the transition steps more than 9 months before the third birthday
2. Nine findings were due to conducting the transition conference less than 90 days before the third birthday
3. One finding had no documentation of the transition conference being held

For FFY 2018 there were 16 findings.

1. Five findings were due to no documentation of transition steps being included
2. Seven findings were due to adding transition steps more than 9 months before the third birthday
3. Four findings were due to transition adding transition steps less than 90 days before the third birthday.

Correction of Findings of Noncompliance Identified in FFY 2018

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
16	16		0

FFY 2018 Findings of Noncompliance Verified as Corrected

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

In FFY 2018, 89.47% (136/152) of child files reviewed for EI transition included evidence of a transition planning conference at least 90 calendar days, and, at the discretion of the parties, up to nine months before the child's third birthday. Sixteen incidents of noncompliance resulted in ten findings across 10 programs.

ODE reviewed and verified corrective action data submitted in SPR&I by EI/ECSE programs with noncompliance that 100% (16/16) incidents of noncompliance in FFY 2018 were corrected within one year. EI/ECSE programs with noncompliance demonstrated correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §303.209 and 303.344(h) based on ODE's review, verification and approval of corrective action data and new files created after the occurrence of noncompliance and submitted by EI/ECSE programs in SPR&I.

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

Sixteen individual incidents of noncompliance resulted in ten findings across ten programs. ODE required programs to provide the cause of the noncompliance and demonstrate correction of practices that contributed to the noncompliance through subsequent data submissions in SPR&I. ODE reviewed, verified and approved corrective action data submitted by EI/ECSE programs to SPR&I that 100% (16/16) of incidents of noncompliance in FFY 2018 were corrected within one year and that the programs with noncompliance conducted a transition conference for any child potentially eligible for Part B whose transition conference was not timely, unless the child was no longer within the jurisdiction of the EI program.

EI/ECSE programs with noncompliance demonstrated correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §303.209 and 303.344(h) based on ODE's review, verification, and approval; of corrective action data and new files created after the occurrence of noncompliance and submitted by EI/ECSE programs in SPR&I.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8C - Prior FFY Required Actions

None

8C - OSEP Response

The State did not provide the reasons for delay, as required by the Measurement Table. Therefore, OSEP was unable to determine whether the State reviewed the reasons for delay.

8C - Required Actions

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Select yes to use target ranges.

Target Range not used

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

NO

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/04/2020	3.1 Number of resolution sessions	0
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/04/2020	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

Historical Data

Baseline Year	Baseline Data

FFY	2014	2015	2016	2017	2018
Target>=					
Data					

Targets

FFY	2019
Target>=	

FFY 2019 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

There did not appear to be any impact on this indicator due to COVID-19.

9 - Prior FFY Required Actions

None

9 - OSEP Response

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

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

In Fall 2018, stakeholders participated in review of and submitted recommendations for Indicators B4A, B4B, and B17 as well as for the School Age and EI/ECSE Special Education Report Cards redesign. Among those invited were parents, and representatives of school districts, EI/ECSE service providers, education service districts, higher education, charter schools, virtual schools, private schools, and other agencies, including the State. Members of the State Interagency Coordinating Council (SICC) and the State Advisory Council for Special Education (SACSE) were also in attendance.

In Fall 2019, stakeholders comprised of all EI/ECSE contractors, subcontractors, and program coordinators participated in target setting for the FFY 2019 Annual Performance Report (APR).

Additionally, in Fall 2019, Winter 2020, and Spring 2020, stakeholders comprised of all EI/ECSE ODE Leadership Team, contractors, subcontractors, program coordinators, practitioner coaches, and members of the SICC were provided opportunities to submit feedback, ask questions, and review progress regarding activities outlined in the State Systemic Improvement Plan (SSIP)

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2014	2015	2016	2017	2018
Target>=					
Data		100.00%			

Targets

FFY	2019

Target>=	
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FFY 2019 SPP/APR Data

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

Provide additional information about this indicator (optional)

There did not appear to be any impact on this indicator due to COVID-19.

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Lead Agency Director

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

Name:

Kara Williams

Title:

Director of EI/ECSE and Regional Programs

Email:

kara.williams@ode.state.or.us

Phone:

15036895642

Submitted on:

04/26/21 4:53:00 PM