

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2020

Utah



PART C DUE
February 1, 2022

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

Role of Utah's Lead Agency:

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) oversees Early Intervention (EI) service activities in Utah for infants and toddlers with disabilities up to three years of age and their families. The BWEIP has multiple mechanisms in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to 15 local EI programs.

Lead Agency Engagement with Partners:

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

Quality Performance:

As a goal, the BWEIP remains determined to meet or exceed indicator target levels. Program policies and processes focus on data being timely, complete, and accurate. The BWEIP contracts with EI programs to provide services and requires them to address data needs and follow through to verify correction of non-compliance.

State-identified Measurements

The BWEIP tracks a State-identified Measurable Result (SiMR) indicator seeking to substantially increase the rate of growth in positive social-emotional skills (including social relationships) for culturally diverse infants and toddlers with disabilities in Utah by the time they exit Part C. In FFY 2020, this measure was determined using assessment tools (COS and BDI-2 NU) entry and exit raw scores/DQ. The calculation identified that 46.28 percent of children moved closer in functioning to that of same-aged peers, as reflected in Summary Statement 1.

Additional information related to data collection and reporting

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

Challenges that some EI programs have communicated related to the COVID-19 pandemic include financial impacts as caseloads/IFSPs decline and decreased service delivery options as many families do not desire virtual visits. The pandemic continues to result in decreased morale among some local EI program staff.

Specific impacts include the following:

- COVID-19 illness and hospitalizations impacting families attempting to maintain services
- COVID-19 prevention measures, cancellation policy, and illnesses impacting local EI program staff
- Local EI programs note many more children referred for communication concerns and social emotional delays than ever before.
- Local EI program staff, including transition coordinator, resignations causing staff shortages
- Local EI program staff ensuring timely and thorough documentation
- Local EI programs note a challenge to address social-emotional growth, especially after the past 18 months.
- COVID-19 and quarantining has led to a decrease in exposure (for our EI population) to everyday social situations.
- COVID-19 impact on children with greater isolation from peer activities and relationships with daycare, church attendance, family gatherings, etc.

Although these challenges exist, local EI programs are continuing to find creative solutions to adapt and successfully provide EI services. This is evident in our FFY 2020 APR data.

General Supervision System

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

As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) oversees Early Intervention (EI) service activities in Utah for infants and toddlers up to three years of age. During FFY 2020, BWEIP sub-contracted with 13 local EI programs and two EI program in-house under the Utah Department of Health to provide EI services throughout Utah. BWEIP maintains and enforces policies to ensure programs are aware of proper processes for services and data tracking. On an ongoing basis, the program performs surveillance and monitoring of EI services performed and program compliance with regulations and data requirements. BWEIP also evaluates family perceptions of the impact of EI services, as well as partners with stakeholders.

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

On-site monitoring refers to any BWEIP oversight activities of EI programs provided at their locations and that may identify noncompliance, low performance, the need for technical assistance, and/or correction and improvement strategies to ensure the programs are meeting required activities

and timelines set by BWEIP. Intensive activities may be necessary based on issues identified through general or focused monitoring activities, the complaints/resolution system, or other means. On-site monitoring activities include interviews, follow-up monitoring visits as needed, quality assurance reports developed by the local program, and any additional activities determined necessary by the BWEIP.

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

The BWEIP will ensure timely dispute resolution through resolution of administrative complaints, mediation and/or due process. All parties will be allowed to dispute any matter under Part C, including matters arising prior to the filing of a due process complaint, through a mediation process. The mediation process may be requested at any time, and may not be used to deny or delay a parent's right to a due process hearing or to deny any other rights afforded under Part C. Upon resolution by parties, a legally binding written agreement will be created to enforce confidentiality of all discussions that happened during the mediation process. The agreement will also prohibit the use of mediation documents to be used as evidence in any subsequent due process hearing or civil proceeding. This agreement will include signatures by the parent(s), as well as a representative from the BWEIP who is authorized to bind the agency. Finally, a written statement will be included, expressing that the written and signed agreement is enforceable in any state court of competent jurisdiction or in a district court of the United States.

Funding sources that support the BWEIP are the State Appropriation (State General Fund), IDEA Part C Grant Award, Medicaid, Children's Health Insurance Program (CHIP), and Family Cost Participation Fees. Utah ensures that Federal funds made available to the state under Part C are implemented and distributed in accordance with the provisions of Part C. The BWEIP provides grants to local programs in the state to support and carry out the purposes and requirements of Part C and state regulations. The BWEIP will utilize its established system of payments and fees for EI services under Part C, including a schedule of sliding fees. Fees collected from the child's family to pay for EI services under the BWEIP's system of payments will be considered as program income. Finally, if a child is eligible for Medicaid or CHIP, BWEIP can bill these public insurances for EI services received.

EI services, as specified in the child's IFSP, cannot be denied due to a parent's refusal to allow their public insurance to be billed for such services.

Technical Assistance System:

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

Lead Agency Technical Assistance. As the Utah Part C Lead Agency (LA), the Baby Watch Early Intervention Program (BWEIP) has multiple mechanisms in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to early intervention (EI) programs. The Utah Part C Program Manager is the official LA liaison for all 15 local EI programs and answers questions from program administrators related to Part C regulations and LA policy and procedures. LA staff are identified as points of contact based on their areas of knowledge and expertise and are the official contacts for program administrative and other staff to answer additional questions and concerns. The Part C Data Manager continues to support the processes used to collect and utilize valid and reliable data, and works with Utah's EI programs to provide program indicator data profiles, compliance indicator determinations, 618 data review, discussion on data/target-related changes, and other technical assistance. BWEIP also employs a Senior Business Analyst to support technical system processes and two Compliance and Monitoring Specialists to ensure programs receive necessary feedback on their operations.

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

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

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

Professional Development System:

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

TRAINING TO ENSURE EFFECTIVE SERVICES

The Baby Watch Early Intervention Program (BWEIP) maintains policies and procedures to ensure that local EI programs are aware of required regulations and service providers are qualified. These policies are available on <https://health.utah.gov/cshcn/programs/babywatch.html> and include the following:

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

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

3. The CSPD is comprised of five components including:

- a. Leadership, Coordination, and Sustainability: Coordination of training and resources with other early childhood special education agencies, including the Utah Division of Occupational & Professional Licensing (DOPL), the Utah State Board of Education (USBE), and institutions of higher education
- b. State Personnel Standards: An appropriate system of Utah EI standards, content, and support to assist programs in preparing qualified personnel
- c. Preservice Personnel Requirement: A minimum of a bachelor's degree from an accredited higher education institution in a field of study related to EI.
- d. In-service Personnel Development: An approved credentialing program for new employees, based on the DEC Initial Practice-Based Professional Preparation Standards for Early Intervention/Early Childhood Special Education.
- e. Recruitment and Retention: Training local EI programs to implement innovative employee recruitment and retention strategies and activities

EDUCATION AND LICENSING REQUIREMENTS

Baby Watch is responsible for ensuring that all EI employees have appropriate and adequate job training. The following education and licensing requirements are consistent with the requirements set by DOPL and USBE. The requirements for new direct service personnel include:

- a. As of October 1, 2016: before hire, direct service personnel must have a completed bachelor's degree in a field of study related to EI.
- b. Before hire, direct service personnel must have current licensure or certification as required in their respective disciplines from DOPL or USBE.

CREDENTIAL OPTIONS

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

1. EARLY INTERVENTION SPECIALIST (EIS)

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

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

2. EARLY INTERVENTION SPECIALIST (EIS): PROVISIONAL

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

3. PROFESSIONAL AUTHORIZATION

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

4. EARLY INTERVENTION ADMINISTRATIVE CERTIFICATE

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

5. EARLY INTERVENTION ADMINISTRATIVE CREDENTIAL

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

AUTHORITY

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

RELATED DIRECTIVE

Baby Watch Policy 1.A.2 Comprehensive System of Personnel Development (available on <https://health.utah.gov/cshcn/programs/babywatch.html>)

Broad Stakeholder Input:

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

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator's targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SIMR). Implication, impacts, and reasoning related to FFY 2020-2025 SIMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

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

YES

Number of Parent Members:

7

Parent Members Engagement:

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

Multiple presentations and discussion to workgroups and ICC. NCSEAM survey instrument revisions were discussed with stakeholders and parent members provided feedback on questions. Parents were always invited and encouraged to participate in discussions and ask questions.

Activities to Improve Outcomes for Children with Disabilities:

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

The ICC has several subcommittees that work on various tasks for the lead agency. There is cultural diverse parent representation from different geographical areas of the state and active participation on each of the subcommittees.

Soliciting Public Input:

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

Stakeholder and public comment is always formally requested during ICC meetings. During FFY 2019 and 2020, data was discussed during regularly scheduled meetings. During these meetings, targets for FFY 2020 through 2025 were discussed, data trends for APR indicators were analyzed and discussed, improvement strategies were vetted, and progress was evaluated.

Making Results Available to the Public:

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

Baby Watch maintains a thorough website (babywatch.utah.gov) which is updated regularly with early intervention data, policy, and program information. The folder Track our Progress shares information about our federal applications, annual SPP/APP submissions, SSIP data and findings, program determinations, Baby Watch determinations, corrective action plan, and many other important documents.

Reporting to the Public:

How and where the State reported to the public on the FFY 2019 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2019 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.

*The FFY 2019 SPP/APR has been posted on the BWEIP website at <https://health.utah.gov/cshcn/programs/babywatch.html> under the Track Our Progress tab, State Performance Plan/Annual Performance Report (SPP/APR).

*Local EI program profiles of indicator performance have been distributed to providers and posted to the BWEIP website under the local programs section in August 2021 at <https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202019%20ALL%20PROFILES.pdf>. Local BWEIPs received their program profiles, determinations, and notifications of noncompliance in August 2021.

*Utah's Part C determinations from OSEP are posted to the Baby Watch Website at <http://health.utah.gov/cshcn/programs/babywatch.html>.

Intro - Prior FFY Required Actions

Response to actions required in FFY 2019 SPP/APR

Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support the State lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report. OSEP accepts the SICC form, which will not be posted publicly with the State's SPP/APR documents.

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	98.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.90%	99.10%	99.10%	98.40%	98.63%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
5,505	5,842	98.63%	100%	98.51%	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.

250

Provide reasons for delay, if applicable.

Reasons for provider-caused delay were acquired through provider stakeholder feedback and review of child records. Feedback on this indicator during FFY 2020 included: Challenges with developing and implementing COVID-19 prevention measures and cancellation policies, staff shortages in local EI programs due to provider cancellations related to COVID-19, illness and hospitalizations impacting families attempting to maintain services, local EI program visit scheduling and coordination challenges, inaccurate family contact information or lack of necessary documentation in database, and inconsistent response from families to schedule visits.

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

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

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

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

State database

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

Full reporting period of July 1, 2020 - June 30, 2021

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSPs who have received their initial individual early intervention (EI) services from July 1, 2020 to June 30, 2021.

Provide additional information about this indicator (optional)

Improvement Activities Completed in FFY 2020: During FFY 2020, BTOTS function was discussed to potentially require that local EI programs document reasons for changing any visit dates/details and understand that the changes would be tracked and monitored. During FFY 2020, the APR 1 report was modified to ensure that family contacts where declined to schedule was entered for family delay. The report was distributed for local EI program use in assessing their program delays. Additional methodology revision was reviewed and anticipated during future SPP baselines and target establishment.

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

During FFY 2020, contact logs were utilized and deployed through the BTOTS Web database. The contact logs hold detailed information about family and provider circumstances, delays, and contact history. Additionally, input from providers and other stakeholders was utilized to reduce potential data entry error by modifying the database function to clarify visit information and document unique situations where families had declined to schedule a visit. Editing of records for exited children was restricted to certain criteria.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
85	85		0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

Corrected Findings of Noncompliance Identified in FFY 2019

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases be reviewed to determine causes. Noncompliant cases were identified in 12 of the 15 Utah early intervention programs during this period. The programs implemented quality assurance plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regulatory requirements identified through reports and documentations. BWEIP discussed, with local EI program administrators, individual cases

identified in FFY 2019 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. The FFY 2019 program determinations are available on the Baby Watch website at <https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202019%20ALL%20PROFILES.pdf> and the corrective action plans can be provided upon request.

FFY 2019 cases were also reviewed to identify any continued noncompliance. FFY 2020 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2019 were less likely to continue to be noncompliant in FFY 2020. Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements. Local EI programs participated in compliance and monitoring audits during 2020 and 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2019 data. The 85 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans include: data entry errors, staffing delays or needing to cancel/reschedule, and insufficient documentation of contact attempts or exceptional family circumstances.

The State has verified that each provider with each noncompliance reported by the State in FFY19 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2019 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2019

The Baby Watch Early Intervention Program (BWEIP) contacted each of the local early intervention programs to review data findings from FFY 2019. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response. Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY 2019 involved 85 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 85 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2019 SPP/APR

1 - OSEP Response

1 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory

requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	77.90%

FFY	2015	2016	2017	2018	2019
Target>=	92.00%	93.00%	94.00%	95.00%	95.00%
Data	95.70%	95.59%	94.42%	94.84%	95.24%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	95.00%	96.00%	96.00%	96.00%	96.00%	97.00%

Targets: Description of Stakeholder Input

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator's targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2020-2025 SiMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	4,165
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Total number of infants and toddlers with IFSPs	4,298

FFY 2020 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
4,165	4,298	95.24%	95.00%	96.91%	Met target	No Slippage

Provide additional information about this indicator (optional).

Table 1. Indicator 2 Targets and Actual Target Data for Previous Ten Fiscal Years FFY (December 1 Count) Indicator 2 Target Indicator 2 Actual Target Data

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

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

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

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

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

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

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

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

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

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

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

FFY 2020 (December 1, 2020) 96.00% 96.88%

The Baby Watch Early Intervention Program (BWEIP) Indicator 2 targets for reporting years FFY 2005 through FFY 2010 were based on “hand collected” data from years prior to the introduction of the Baby and Toddler Online Tracking System (BTOTS) database in 2005. For three of these ten reporting years (FFY 2006 through FFY 2008), the percentage of infants and toddlers with IFSPs receiving early intervention services primarily in home or community-based settings was static at approximately 71.00%. Since these early years, performance on this indicator has successfully increased.

The FFY 2020 percentage of infants and toddlers with IFSPs receiving early intervention services primarily in home or community-based settings (96.88%) exceeds the FFY 2019 percentage (95.24%) and the FFY 2019 target of 95.00 percent. This is the highest percentage, even over FFY 2013, FFY 2015, and FFY 2016 reporting percentages in reporting years FFY 2009 through FFY 2020.

2 - Prior FFY Required Actions

None

2 - OSEP Response

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

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator's targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2020-2025 SiMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

Historical Data

Outcome	Baseline	FFY	2015	2016	2017	2018	2019
A1	2013	Target>=	66.00%	67.00%	68.00%	69.00%	69.00%
A1	68.18%	Data	67.45%	63.11%	64.33%	64.04%	54.94%
A2	2013	Target>=	54.50%	55.00%	55.50%	56.00%	56.50%
A2	55.40%	Data	60.86%	57.91%	59.90%	60.50%	65.28%
B1	2013	Target>=	73.50%	74.00%	74.50%	75.50%	75.50%
B1	75.44%	Data	70.56%	68.72%	68.85%	68.36%	70.77%
B2	2013	Target>=	48.50%	49.00%	49.50%	51.00%	51.50%
B2	50.88%	Data	54.04%	52.87%	52.50%	51.71%	52.87%
C1	2013	Target>=	74.50%	75.00%	75.50%	76.20%	76.20%
C1	76.17%	Data	73.13%	71.31%	71.13%	70.56%	72.46%
C2	2013	Target>=	58.50%	59.00%	59.50%	60.00%	60.50%
C2	59.19%	Data	62.22%	60.88%	60.99%	61.19%	69.72%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A1>=	42.00%	42.25%	65.00%	66.00%	67.00%	68.25%
Target A2>=	69.00%	70.00%	70.50%	71.00%	71.50%	72.00%
Target B1>=	75.50%	75.50%	75.50%	75.50%	75.50%	75.50%
Target B2>=	54.00%	55.00%	55.50%	56.00%	56.50%	57.00%
Target C1>=	76.20%	76.20%	76.20%	76.20%	76.20%	76.20%

Target C2>=	71.00%	72.00%	72.50%	73.00%	73.50%	74.00%
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FFY 2020 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

1,417

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	39	2.75%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	321	22.65%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	69	4.87%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	172	12.14%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	816	57.59%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	241	601	54.94%	42.00%	40.10%	Did not meet target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	988	1,417	65.28%	69.00%	69.72%	Met target	No Slippage

Provide reasons for A1 slippage, if applicable

Reasons for slippage in indicator A1 (Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program), included several aspects. Between FFY 2019 and 2020, Indicator A1 outcome score category percentage changes led to an overall percentage decrease. The Baby Watch Early Intervention Program (BWEIP) analyzed the FFY 2019 and 2020 entry and exit data calculations for score computation errors and evaluated category changes. The proportion of children in Category A decreased (3.11% to 2.75%), Category B decreased (24.75% to 22.74%), Category C decreased (11.60% to 4.87%), and Category D decreased (19.66% to 12.15%) between these years. COVID-19 impacted local EI programs to switch from in-home to virtual services. Many families suspended or discontinued services, or were lost to follow-up during FFY 2020. As a result, more children left services during this timeframe without an exit score. In summary, the total number of children with entry and exit scores decreased during FFY 2020, and the children who fell into the applicable categories for outcome A1 (categories C and D) decreased as well. Utah Part C may decide to reset our baseline following 2-3 years of data collection during FFY 2022, with data collection and analysis solely through the BDI-2 NU.

BWEIP modified the method of calculating child functioning in the Baby & Toddler Online Tracking System (BTOTS) to determine entry and exit raw scores and developmental quotients. Historically, the COS assessment was the only tool used to determine child exit scores for children. For FFY 2020, child functioning was calculated using both COS and Battelle Developmental Inventory, Second Edition, Normative Update (BDI 2-NU). Therefore, ascertainment of a new baseline for this measure is not appropriate as this is not a new method of calculation. As expected, 2020 data reflected the downward impact of the switch to the BDI-2 NU, a standardized evaluation tool, to calculate entry and exit raw scores and developmental quotients. This tool is more objective than COS, a subjective assessment tool, which results in less valid and accurate outcomes. There are inherent challenges in obtaining accurate child race and ethnicity information. Although this information is typically reported by families at time of referral, BWEIP is currently developing additional methods of gathering this information prior to child exit. BWEIP will discontinue using the COS when the final group of children who received COS entry scores in FFY 2018 age out of service during late FFY 2021. BWEIP has continued to consult with the Interagency Coordinating Council (ICC) to gather input on the best way to transition from COS to BDI-2 NU child outcome measurements. We have revised indicator A1 targets to reflect improvement over the State's FFY 2013 baseline data. We intend to reestablish the baseline for indicator A1 in FFY 2022. This will be a result of fully transitioning from using the COS tool to using the BDI-2 NU to evaluate child progress.

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	10	0.71%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	278	19.62%

Outcome B Progress Category	Number of Children	Percentage of Total
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	363	25.62%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	384	27.10%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	382	26.96%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	747	1,035	70.77%	75.50%	72.17%	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	766	1,417	52.87%	54.00%	54.06%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	6	0.42%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	177	12.49%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	214	15.10%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	353	24.91%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	667	47.07%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	567	750	72.46%	76.20%	75.60%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	1,020	1,417	69.72%	71.00%	71.98%	Met target	No Slippage

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

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	4,768
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.	913

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

Instruments:

- 1- Child Outcome Summary (COS) Assessment: Historically, the COS assessment was the only tool used to determine child exit scores for children.
- 2- The Battelle Developmental Inventory, Second Edition, Normative Update (BDI 2-NU) was exclusively implemented in November 2018.

Procedures:

Although this information is typically reported by families at time of referral, BWEIP is currently developing additional methods of gathering this information prior to child exit. BWEIP will discontinue using the COS when the final group of children who received COS entry scores in FFY 2018 age out of service during late FFY 2021. BWEIP has continued to consult with the Interagency Coordinating Council (ICC) to gather input on the best way to transition from COS to BDI-2 NU child outcome measurements.

Provide additional information about this indicator (optional).

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

- 1) Discussion with stakeholders and programs
- 2) Change of tool used to complete the ECO rating
- 3) Emphasis on providing services to children whose functioning is at a level nearer to same-aged peers, but not quite meeting. BWEIP will continue to encourage conversation with parents to ensure that although their children may be meeting outcomes, parents are informed about their child's next developmental milestones and encouraged to utilize Utah's 12 months of eligibility.

3 - Prior FFY Required Actions

None

3 - OSEP Response

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

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2006	Target>=	85.00%	85.50%	86.00%	86.50%	90.00%
A	76.00%	Data	88.56%	88.69%	95.85%	96.01%	96.49%
B	2006	Target>=	82.50%	82.75%	83.00%	83.25%	88.00%
B	73.00%	Data	86.62%	87.19%	93.72%	93.49%	94.68%
C	2006	Target>=	92.20%	92.30%	92.40%	92.50%	93.00%
C	83.00%	Data	94.08%	93.31%	96.24%	96.43%	96.05%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A>=	93.00%	94.00%	94.50%	95.00%	95.50%	96.00%
Target B>=	76.00%	77.00%	77.50%	78.00%	78.50%	79.00%
Target C>=	85.00%	85.25%	85.50%	85.75%	86.00%	86.25%

Targets: Description of Stakeholder Input

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator’s targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2020-2025 SiMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

FFY 2020 SPP/APR Data

The number of families to whom surveys were distributed	4,107
Number of respondent families participating in Part C	2,134
Survey Response Rate	51.96%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,521
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,622
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs	1,247
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children’s needs	1,622
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,379
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,622

Measure	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	96.49%	93.00%	93.77%	Met target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	94.68%	76.00%	76.88%	Met target	No Slippage

Measure	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	96.05%	85.00%	85.02%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

Survey Response Rate

FFY	2019	2020
Survey Response Rate	45.15%	51.96%

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

To increase response rate over the FFY 2020-2025 period, Baby Watch will continue to plan and prepare for the family survey with local EI programs. Programs having the lowest response rates during the previous survey collection period will be focused on in order to improve response rate. Baby Watch will train as to the methodology of survey collection to limit biases and ensure that programs thoroughly know proper protocol, and potentially increase response rates among all families.

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

NCSEAM Survey Utilized for FFY 2020 Data Collection

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

Of the delivered survey links, over one-half (n=2,134, 52.0%) were accessed and language selected by the family members. Fewer surveys were applicable (1622, meaning they consisted of at least one response to NCSEAM survey questions. The response rate of applicable responses was 39.5 percent.

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

The demographics of responding families appear to be representative of actively enrolled children in the Baby & Toddler Online Tracking System (BTOTS). Geographic status of regions where programs serve was collected and analyzed, with results (Urban=66%, Rural=30%, Frontier=4%) similar to the FFY 2020 618 Child Count survey data assessed (Urban=72%, Rural=24%, Frontier=4%).

For the FFY 2020 survey, the instrument utilized child-level primary language (English/Spanish) demographics and race/ethnicity data collection. FFY 2020 survey data identified that the count of respondents with English as their primary language was 1518 (93.5%), compared with Spanish as their primary language (6.5%, n=106). The proportion of Spanish language respondents with applicable responses to the survey shows an increasing trend with 6.5 percent in 2020, compared with 5.9 percent in FFY 2019 and 4.5% in FFY 2018.

Additionally, the proportion of active children whose primary language was Spanish, and who meet criteria for electronic distribution of this survey as of April 27, 2021 (for FFY 2020) was higher (7.1%), a decrease from last year (8.3%), but an increase from 5.1 percent of families in FFY 2018.

Nearly one in four respondents (21.6%) reported that their child was of Hispanic, Latino, or Spanish origin; one in eight (12.6%) reported that their child's race was other than white. Utah's 2019 population estimates indicate that 14.4 percent of the population is Hispanic or Latino and that 9.4 percent are other than white race.

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

The ECTA response rate and representative calculator was utilized to apply proportional testing and determine if the surveys received were representative of the target population. Results show that data were representative by English (1% difference) and Spanish (0% difference) as the primary language. Results by race/ethnicity show that African American/Black (2% difference), American Indian or Alaska Native (1% difference), Asian (2% difference), Native Hawaiian or Pacific Islander (1% difference), More than one race (3% difference), and White (-2% difference) were representative. Hispanic (-5% difference) and not Hispanic (5% difference) were not representative; Additional data analyses were highlighted addressing geographic distribution of respondents reporting to the survey link designated for a particular local EI program (i.e., urban/rural/frontier) compared to the target group. Using the ECTA representative calculations, difference between the target population and respondents for urban local EI programs were not representative (-4% difference), though rural (3% difference) and frontier (1% difference) were representative.

Provide additional information about this indicator (optional).

The Baby Watch Early Intervention Program held stakeholder meetings regarding development of the survey instrument and revised the tool to include other parent-reported demographic data including race/ethnicity. This data was collected during FFY 2020.

Utah's NCSEAM method also includes program-specific survey links that are used when families do not receive an electronic survey and would like to participate. As virtual services were approved during COVID-19, an increased number of email addresses have been verified and collected.

Through June 2021, the Utah Department of Health, Baby Watch Early Intervention Program (BWEIP), implemented a multilingual electronic survey using a tool developed by the National Center for Special Education and Accountability Monitoring (NCSEAM) to assess perceptions from family members of children enrolled in Part C early intervention. A link to the survey was distributed through electronic mail or web link means to 4,107 families of Utah children meeting certain criteria: being ages birth to three, having disabilities or delays, being under an individualized family service plan as of April 27, 2021, and having a documented email address or a meeting to facilitate hand delivery of the survey.

In addition, the lead agency has supplemented the NCSEAM electronic survey analyses using RASCH during FFY 2020 as stakeholders support.

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

4A: A response of "agree," "strongly agree," or "very strongly agree" with this item on the NCSEAM survey's Impact of EI Services on Your Family scale: "Over the past year, Early Intervention services have helped me and/or my family: know about my child's and family's rights concerning Early Intervention services." A Rasch framework is used as the measurement approach by the NCSEAM. The percentages reported are calculated as the percent of families whose measures are at or above a standard that is specific to each indicator. In FFY 2020, 1,521 of 1,622 (93.77%) met or exceeded Rasch standards of agreement with this measure.

4B: A response of "agree," "strongly agree," or "very strongly agree" with this item on the NCSEAM survey's Impact of EI Services on Your Family scale: "Over the past year, Early Intervention services have helped me and/or my family: communicate more effectively with the people who work with my child and family." A Rasch framework is used as the measurement approach by the NCSEAM. The percentages reported are calculated as the percent of families whose measures are at or above a standard that is specific to each indicator. In FFY 2020, 1,247 of 1,622 (76.88%) met or exceeded Rasch standards of agreement with this measure.

4C: A response of "agree," "strongly agree," or "very strongly agree" with this item on the NCSEAM survey's Impact of EI Services on Your Family scale: "Over the past year, Early Intervention services have helped me and/or my family understand my child's special needs." A Rasch framework is used as the measurement approach by the NCSEAM. The percentages reported are calculated as the percent of families whose measures are at or above a standard that is specific to each indicator. In FFY 2020, 1,379 of 1,622 (85.02%) met or exceeded Rasch standards of agreement with this measure.

4 - Prior FFY Required Actions

None

4 - OSEP Response

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

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

(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 ED Facts Metadata and Process System (EMAPS)) and Census (for the denominator).

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.66%

FFY	2015	2016	2017	2018	2019
Target >=	0.85%	0.86%	0.87%	0.88%	1.05%
Data	1.01%	0.94%	1.03%	1.05%	1.11%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	1.15%	1.15%	1.20%	1.20%	1.20%	1.20%

Targets: Description of Stakeholder Input

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator's targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2020-2025 SiMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey;	07/08/2021	Number of infants and toddlers birth to 1 with IFSPs	516

Source	Date	Description	Data
Section A: Child Count and Settings by Age			
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020	07/08/2021	Population of infants and toddlers birth to 1	47,431

FFY 2020 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
516	47,431	1.11%	1.15%	1.09%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

According to IDEA 2020 Part C Child Count and Settings data (developed November 2021), the national average percentage of all children under the age of one receiving early intervention services was 1.14%. The percentage of infants birth to 1 receiving early intervention services in Utah in 2020 was 0.05 percent lower (1.09%). This percentage difference is lowest out of the last five years (2020 - 0.05%, 2019 - 0.26%, 2018 - 0.20%, 2017 -0.22%, 2016 - 0.30%). The average percentage of infants birth to 1 among the 18 states with similar eligibility criteria is 1.57 percent. Utah is 0.48 percent lower than the average, and is in 9th place out of this cohort.

Indicator data for FFY 2020 identified the second highest trended percentage of infants and toddlers birth to one with IFSPs (1.09%), as well as the highest target (1.15%). Despite challenges from COVID-19, the Baby Watch Early Intervention Program moved forward with its goal to increase referrals for this age group and worked with other programs to understand potential ways to be increasingly successful at finding children.

5 - Prior FFY Required Actions

None

5 - OSEP Response

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

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	1.90%

FFY	2015	2016	2017	2018	2019
Target >=	2.20%	2.25%	2.30%	2.35%	3.10%
Data	2.75%	2.79%	2.93%	3.06%	3.21%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	3.20%	3.20%	3.20%	3.30%	3.30%	3.30%

Targets: Description of Stakeholder Input

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator's targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2020-2025 SiMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers birth to 3 with IFSPs	4,298

Source	Date	Description	Data
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020	07/08/2021	Population of infants and toddlers birth to 3	141,867

FFY 2020 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
4,298	141,867	3.21%	3.20%	3.03%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Reasons for slippage in indicator 6 included several aspects. Between FFY 2019 and 2020, the number of infants and toddlers birth to 3 with IFSPs decreased by 8.3 percent (4689 to 4298). The denominator decreased by 2.8 percent over this time. COVID-19 has impacted counts of child birth to 3 with an IFSP. The Baby Watch Early Intervention Program (BWEIP) has continued to consult with local EI programs and the Interagency Coordinating Council (ICC) to gather input on child count measurements, and has analyzed FFY 2019 and 2020 child counts throughout FFY 2021.

Provide additional information about this indicator (optional).

According to IDEA 2020 Part C Child Count and Settings data (develop November 2021), the national average percentage of all children under the age of three receiving early intervention services was 3.20%. The percentage of infants birth to 3 receiving early intervention services in Utah in 2020 was 3.03%. Utah's 2020 percentage is 0.17 percent below the national average. This percentage difference is lower than each of the last five years (2019 – 0.26%, 2018 - 0.42%, 2017 - 0.34%, 2016 - 0.33%, and 2015 - 0.33%). The average percentage for infants and children birth to 3 among the 18 states with similar eligibility criteria is 4.10 percent. Utah is 1.07 percent lower than the average.

Data trends indicate that FFY 2020 was the third highest percentage of infants and toddlers birth to three with IFSPs (3.03%), behind 2019 (3.21%) and 2018 (3.06%). Utah has had success at increasing this over the past several years. The Baby Watch Early Intervention Program regularly collaborates with workgroups, the public, and service programs to develop targets and dedicate SSIP activities. These efforts may have increased referrals and retention of some families in the target population.

6 - Prior FFY Required Actions

None

6 - OSEP Response

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

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	96.60%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	99.47%	98.16%	98.95%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
4,646	5,200	98.95%	100%	99.58%	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.

532

Provide reasons for delay, if applicable.

Reasons for provider-caused delay were acquired through provider inquiry and review of child records. Feedback on this indicator during FFY 2020 included: Providers and managers admitted to losing track of required timelines due to the circumstances of the pandemic, staffing changes in local EI programs, staff member unavailability, local EI program transition to new office locations, COVID-19 illness among local EI program staff, EI program visit scheduling and coordination challenges, and inconsistent response from families to schedule visits.

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

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

State database

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

Full reporting period of July 1, 2020 to June 30, 2021

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby and Toddler Online Tracking System (BTOTS), and includes all newly-referred children who were found eligible and for whom an initial IFSP was required to be conducted during the time period July 1, 2020 through June 30, 2021.

Provide additional information about this indicator (optional).

Breakdown of delay by number of cases having properly documented established IFSP meetings, reflective of APR 7, was as follows: 1-8 days (55% of delays), 9-15 days (10% of delays), 16-24 days (15% of delays), and more than 25 days (20% of delays).

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
53	53		0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

Corrected Findings of Noncompliance Identified in FFY 2019

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases be reviewed to determine causes. Noncompliant cases were identified in 8 of the 15 Utah early intervention programs during this period. The FFY 2019 program determinations are available on the Baby Watch website at <https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202019%20ALL%20PROFILES.pdf> and the corrective action plans can be provided upon request.

The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regulatory requirements identified through reports and documentations. BWEIP discussed, with local EI program administrators, individual cases identified in FFY 2019 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. FFY 2020 cases were also reviewed to identify any continued noncompliance. FFY 2020 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2019 were less likely to continue to be noncompliant in FFY 2020.

Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements. Local EI programs participated in compliance and monitoring audits during 2020 and early 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2019 data.

The 53 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans included: Delay in contacting to schedule, holiday breaks resulting in late Initial IFSP's, inability to schedule sooner due to staff schedules, inadequate documentation of contact attempts or exceptional family circumstances and program's inability with current staff to meet the demand of completing intakes. The State has verified that each provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2019 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

Corrected Findings of Noncompliance Identified in FFY 2019

BWEIP contacted each of the local early intervention programs to review data findings from FFY 2019. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP

Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response. Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY19 involved 53 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 53 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

7 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2019 SPP/APR

7 - OSEP Response

7 - Required Actions

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

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

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	99.66%	99.75%	99.76%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3,664	3,702	99.76%	100%	98.97%	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.

0

Provide reasons for delay, if applicable.

Reasons for the 38 provider-caused delays were acquired through provider inquiry and review of child records. Reasons for the delays during FFY 2020 included: an increase in referrals and children served, COVID impact on staffing, local EI program lack of understanding and following of transition steps and services, local EI program documentation of transition planning, local EI program scheduling and coordination challenges, and inconsistent response from families to schedule visits. COVID-19 was identified as a factor impacting family health and willingness to meet and discuss transition steps and services.

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

State database

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

Full reporting period of July 1, 2020 to June 30, 2021.

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSPs who have received early intervention (EI) services from July 1, 2020 to June 30, 2021.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	10		0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

Corrected Findings of Noncompliance Identified in FFY 2019

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases be reviewed to determine causes. Noncompliant cases were identified in 3 of the 15 Utah early intervention programs during this period. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regulatory requirements identified through reports and documentations. BWEIP discussed, with local EI program administrators, individual cases identified in FFY 2019 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. The FFY 2019 program determinations are available on the Baby Watch website at <https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202019%20ALL%20PROFILES.pdf> and the corrective action plans can be provided upon request.

FFY 2020 cases were also reviewed to identify any continued noncompliance. FFY 2020 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2019 were less likely to continue to be noncompliant in FFY 2020. Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements. Local EI programs participated in compliance and monitoring audits during 2020 and early 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2019

data.

The 10 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans include: inadequate documentation of transition, inadequate data entry, service coordinator error, did not occur. The State has verified that each provider with each noncompliance reported by the State in FFY19 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2019 related to timely services on the IFSP.

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

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

Corrected Findings of Noncompliance Identified in FFY 2019

BWEIP contacted each of the local early intervention programs to review data findings from FFY 2019. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response. Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that transition steps and services occurred following delay/noncompliance. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY2019 involved 10 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 10 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY Required Actions

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

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

Response to actions required in FFY 2019 SPP/APR

8A - OSEP Response

8A - Required Actions

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

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

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	93.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3,563	3,702	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.

139

Provide reasons for delay, if applicable.

Describe the method used to collect these data.

The data for the FFY 2020 APR submission for this indicator includes all children where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers exiting Part C where these children that were at least 33 months old and exited EI from July 1, 2020 through June 30, 2021.

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

YES

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

YES

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

State database

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

Full reporting period of July 1, 2020 to June 30, 2021

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSPs who have received early intervention (EI) services from July 1, 2020 to June 30, 2021.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	86.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.10%	100.00%	99.52%	99.00%	99.07%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2,138	3,002	99.07%	100%	99.08%	Did not meet target	No Slippage

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

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

395

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.

445

Provide reasons for delay, if applicable.

Reasons for provider-caused delay were acquired through provider stakeholder feedback and review of child records. Feedback on this indicator during FFY 2020 included: Incorrect or missing documentation in the BTOTS data system, local EI program inability to timely coordinate with multiple school districts during holiday/summer timelines, COVID-19 illness among local EI program staff and/or families they serve, staff shortage in local EI programs, and local EI program visit scheduling and coordination challenges due to the circumstances of the pandemic.

A family circumstance causing a documented delay as the last point of contact was counted as "exceptional family delay". Reasons for documenting the cases as such were pulled from contact logs and visit notes. These findings indicate that reasons for family-caused delays include: Incorrect documentation entered into BTOTS by providers, availability to coordinate with LEA during holiday/summer timelines, COVID-19 illness among local EI program staff and/or families they serve, staff shortage in local EI programs, local EI program visit scheduling and coordination challenges, and inconsistent response from families to schedule visits related to COVID-19 quarantine and other reasons.

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

State database

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

Full reporting period of July 1, 2020 - June 30, 2021

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

The data was collected for this indicator for all Baby Watch Early Intervention programs through the statewide database, the Baby Toddler Online Tracking System (BTOTS), and includes all children with IFSPs who have received early intervention (EI) services from July 1, 2020 to June 30, 2021.

Provide additional information about this indicator (optional).

Range of delays for this indicator were as follows: 1-8 days (69% of delays), 9-15 days (15% of delays), 16-24 days (4% of delays), and more than 25 days (12% of delays).

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
28	28		0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

Corrected Findings of Noncompliance Identified in FFY 2019

The Baby Watch Early Intervention Program (BWEIP) reviewed compliance indicator data and developed profiles/reports outlining targets, percentages, necessity of corrections, and determined level of compliance for each of the early intervention programs to review and verify that noncompliant cases be reviewed to determine causes. Noncompliant cases were identified in 7 of the 15 Utah early intervention programs during this period. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. The program plans and following actions affirmed that they had corrected each case of noncompliance. The FFY 2019 program determinations are available on the Baby Watch website at <https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202019%20ALL%20PROFILES.pdf> and

the corrective action plans can be provided upon request.

Each of the cases were listed with identified reasons for the noncompliance, steps to correct the error(s), and agreement to correctly implement the specific regulatory requirements identified through reports and documentations. BWEIP discussed, with local EI program administrators, individual cases identified in FFY 2019 to verify that the program is correctly implementing regulatory requirements by satisfactorily fulfilling the agreed upon plan for improvement. FFY 2019 cases were also reviewed to identify any continued noncompliance.

FFY 2020 cases deemed to be provider-caused will be addressed during determinations and program compliance will be reviewed with plans for improvement. Analysis of indicator data suggested that service providers who were noncompliant in FFY 2019 were less likely to continue to be noncompliant in FFY 2020. Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that services occurred following delay/noncompliance. Regular compliance and monitoring with each of the local programs continues to address improvement activities toward fulfilling all regulatory requirements. Local EI programs participated in compliance and monitoring audits during 2020 and early 2021. Compliance components addressed during the audit included follow-up of corrective action plan findings and goals. Discussion identified that despite internal/external challenges (including due to COVID-19), programs maintain resolve to prevent future noncompliance as addressed based on FFY 2019 data.

The 28 UT findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI programs reported in their corrective action plans include: Data entry errors, inability to coordinate timely with preschool, lack of staffing due to holiday breaks, staff delays, and inadequate information documented.

The State has verified that each provider with each noncompliance reported by the State in FFY19 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Baby Watch monitored each program through the Baby and Toddler Online Tracking System (BTOTS), yearly program self-assessment, and on-site verification of data. The process included evaluating each program for an annual determination; notifying each program of any identified findings of non-compliance; and notifying each program of any required actions.

Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2019 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, the Lead Agency reviewed subsequent data that was 100% compliant to close each finding of non-compliance. As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

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

BWEIP contacted each of the early intervention programs to review data findings from FFY 2019. Noncompliant cases were reviewed to determine causes. The programs implemented plans to retain compliance, including regularly monitoring data reports and agreed to collaborate with the BWEIP Data Manager on future analyses and projects. Tracking determinations and showcasing compliance indicator data, targets, determination levels (1-5) to programs led to appropriate program response. Programs documented that they have corrected noncompliant cases, when possible, upon submission of their corrective action plans and discussion with the Lead Agency. The Lead Agency reviewed noncompliant FFY 2019 cases to verify that they had been corrected by the local programs. Updated data review of these cases indicated that transition conferences occurred following delay/noncompliance. The Lead Agency reviewed subsequent data and verified, based on that data, that previous noncompliance had been corrected. Corrected findings in FFY2019 involved 28 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 28 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). As a result of the review of subsequent or updated data, it was verified that 100% compliance was achieved.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8C - Prior FFY Required Actions

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

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

Response to actions required in FFY 2019 SPP/APR

8C - OSEP Response

8C - Required Actions

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

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

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below.

The state has not adopted Part B due process procedures.

9 - Prior FFY Required Actions

None

9 - OSEP Response

OSEP notes that this indicator is not applicable.

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator's targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2020-2025 SiMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

Historical Data

Baseline Year	Baseline Data
2005	0.00%

FFY	2015	2016	2017	2018	2019
Target>=	0.00%	0.00%	0.00%	0.00%	.00%
Data	0.00%	0.00%			

Targets

FFY	2020	2021	2022	2023	2024	2025
Target>=	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

FFY 2020 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	0	0		0.00%		N/A	N/A

Provide additional information about this indicator (optional)

No mediations were held during FFY 2020.

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2020. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

Targets: In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., April 1, 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

11 - Indicator Data

Section A: Data Analysis

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

Utah's SiMR is:

"To substantially increase the rate of growth in positive social-emotional skills (including social relationships) for culturally diverse infants and toddlers with disabilities in Utah by the time they exit Part C. These children will move closer in functioning to that of same-aged peers, as reflected in Summary Statement 1."

By FFY2021, Utah Part C will increase child social relationships (Child Outcome A) by substantially increasing the rate of growth (SS1) for children of culturally diverse backgrounds as measured by the Child Outcomes Summary (COS) and Battelle Developmental Inventory Second Edition, Normative Update (BDI 2-NU). Outcomes for children referred since 11/12/2018 are measured using the BDI-2 NU alone.

We have revised indicator 11 targets to reflect improvement over the State's FFY 2013 baseline data. We intend to reestablish the baseline for indicator 11 in FFY 2022. This will be a result of fully transitioning from using the COS tool to using the BDI-2 NU to evaluate child progress.

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

NO

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

NO

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

NO

Please provide a link to the current theory of action.

<https://health.utah.gov/cshcn/pdf/BabyWatch/2020%20Utah%20SSIP%20ToA%20ONLY.pdf>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2013	65.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target>=	40.00%	40.25%	62.00%	63.00%	64.00%	65.25%

FFY 2020 SPP/APR Data

Count of Child Outcomes in C and D	Count of Child Outcomes in A,B,C, and D	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
87	188	52.87%	40.00%	46.28%	Met target	No Slippage

Provide the data source for the FFY 2020 data.

The Baby & Toddler Online Tracking System (BTOTS) supports the Utah Babywatch Early Intervention Program. This database is the primary source for the program's data.

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

It provides secure access to child records for local Early Intervention providers as well as state monitoring and compliance access.

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

YES

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

General information about data collected that supports the SiMR are below. For detailed data measures and findings, please review Baby Watch's Evaluation Plan (LINK). FFY 2020 data suggests that:

- Baby Watch Compliance & Monitoring embedded various methods for collecting SiMR-related data into its FFY 2020 activities. The C&M team observed progress toward achieving Utah's SiMR in culturally diverse parent survey responses, IFSP record reviews, and observations of family-directed assessments, IFSP meetings, and IFSP services. Within the reporting period, local EI providers have also: applied relationship-based practices across the IFSP development process with families; delivered culturally sensitive services; identified family concerns/priorities; connected families to resources and supports; promoted parent/child attachment; and built parent capacity to support child learning in daily routines.
- Post-survey results of the Social-Emotional Development & Outcome online training suggested positive impact to the SiMR by increasing knowledge and changing provider practices to improve social-emotional relationships among all children and those from culturally diverse background.
- Providers and families developed IFSP outcomes with a SE component and children from culturally diverse backgrounds are receiving IFSP outcomes with a social-emotional component.
- Respondents representing a majority of local EI programs reported that they found the cultural diversity resources to be useful and that they would like to see new resources identified and distributed through the Baby Watch listserv on a monthly basis.
- Baby Watch T/TA online courses increased enrollment. Courses contain information on EBP including relationship-based practices, family-centered practices, social-emotional development and cultural understanding which will support understanding and practices.

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

NO

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

Data from stakeholders and families supports maintaining our present evaluation plan as measures in our plan continue to be implemented and assessed regularly. For example, Baby Watch collects data and discusses instrument questions and findings from the NCSEAM family survey annually with stakeholders. Baby Watch collects data regularly from monitoring activities and surveys, as well as a local EI program administrator survey, to meet outcomes. Outcomes that are met are modified in the evaluation plan for the following fiscal year. Please refer to the Evaluation Plan (https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202020%20Evaluation%20Plan%20Jan%206%202022%20EH2_GRLD.pdf) for more information. Baby Watch removed short- or intermediate-term outcomes that had been achieved from the Evaluation Plan for the current fiscal year and maintained outcomes that were continuing in FFY 2020.

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

Governance

Baby Watch conducted a cost study to address Utah's evolving EI system; a previous cost study was completed in 2015. The Cost Study period began in March 2020 and was extended to July 31, 2021 due to the COVID-19 pandemic. As a result, the Cost Study was able to capture information about the costs of both in-person and virtual service provision. The 2020-2021 Cost Study provided invaluable information about the true cost of providing EI services such as eligibility determination, service coordination, and travel to homes.

May 2020: Baby Watch revised its MOA with the Utah State Board of Education in order to clarify each agency's responsibilities related to each transition from Part C to Part B or community-based services.

July 2020: Baby Watch updated its MOA with the Utah Department of Human Services, Division of Child & Family Services to improve its ability to successfully respond to Child Abuse Prevention and Treatment Act (CAPTA) referrals.

Finance

The Baby Watch fiscal team provides fiscal monitoring for local EI programs on a regular and as-needed basis, as outlined in the Baby Watch sub-recipient agreements. The fiscal team conducted an in-person site visit, which included documentation review to ensure that the programs were in compliance with 2 CFR 200 and 34 CFR 300, as well as their contract provisions and Baby Watch policies.

Personnel/CSPD

Baby Watch CSPD made the credentialing process more convenient for early intervention direct service providers working virtually during the COVID-19 pandemic by offering its Self-Assessment and Individual Credential Plan assignments in both fillable PDF and interactive online formats. At the same time, the Self-Assessment was updated to align with the 2020 DEC Initial Practice-Based Professional Preparation Standards for Early Interventionists/Early Childhood Special Educators (EI/ECSE).

Data System

Baby Watch continued to maintain data infrastructure using the Baby & Toddler Online Tracking System (BTOTS). Baby Watch vetted and discussed all aspects related to maintaining an efficient database system, holding regular meetings with contractors and stakeholders to ensure accurate data and functionality. As an example, we vetted and improved child outcome data pulled from child summary reports. Baby Watch modified the Part B TEDI reconciliation process in order to produce more accurate and timely data, and updated the visit log "family decline to schedule". Baby Watch thoroughly discussed and prioritized data errors inhibiting BTOTS and discussed optional enhancements with contractors and stakeholders for capability to put into production.

Accountability & Quality Improvement

Baby Watch thoroughly discussed FFY 2020 targets and performance measures internally and among other stakeholders, including the ICC and several workgroups. Baby Watch developed and posted local EI program data profiles and reinforced measures during meetings. Baby Watch addressed noncompliance and instructed local programs to develop corrective action plans (CAP) in line with federal requirements. Baby Watch completed remote audits of all local EI programs, coordinated fiscal and programmatic monitoring activities, gathered data on fidelity of implementation of quality performance measures, and ensured compliance with CSPD policy.

Baby Watch provided T/TA for existing Quality Assurance Plans (QAPs) in ongoing support calls with program administrators, and by delivering virtual trainings on requested topics.

Quality Standards

Baby Watch CSPD was firm in enforcing the 2018 CSPD Policy (<https://health.utah.gov/cshcn/pdf/BabyWatch/CSPD%20policy.pdf>) requirement that all direct service providers (including service coordinators) have completed bachelor's degrees. A few local EI programs expressed frustration that this requirement was making it difficult for them to fill vacancies on their teams, especially in rural areas.

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

Governance

Short- and/or Intermediate-Term Outcomes: The Cost Study provides reliable information to determine the average cost per child for EI services. The updated MOA with DHS improves the CAPTA referral process. The updated MOA with USBE ensures ongoing improvement of transition from Part C to Part B.

Achievement Measures: Continue to analyze: Utah Part C funding formula; CAPTA referral, evaluation, and eligibility data; and transition data for all children enrolled in Utah Part C.

Strategies to Achieve SiMR: Baby Watch will: address ongoing funding needs to support quality EI services for the growing numbers of eligible children; improve the CAPTA referral process; and, ensure a smooth transition for all children from early intervention to preschool or community-based services.

Finance

Short- and/or Intermediate-Term Outcomes: Ensure local EI programs comply with 2 CFR 200 and 34 CFR 300, as well as their contract provisions and Baby Watch policies.

Achievement Measures: Ongoing monitoring of the use of Baby Watch funds by local EI programs.

Strategies to Achieve SiMR: Financial and programmatic audits.

Personnel/CSPD

Short- and/or Intermediate-Term Outcomes: Service providers complete initial and renewal credential training tasks and submit applications to Baby Watch on time (within 30 days of the deadline in BTOTS).

Achievement Measures: The percentage of service providers who submit credential applications before the deadlines in BTOTS. For the calendar year 2020, 90% of initial credentials and 95% of credential renewals were completed on time.

Strategies to Achieve SiMR: Reported 2020 credential timeliness data in the January 2021 SSIP Professional Development Workgroup. Created and distributed a 2021 CSPD Requirements handout including credential policy requirements, training time estimates, and troubleshooting suggestions. Presented at March 2021 Grantee Meeting, recommending that service providers (especially coaches and supervisors) complete credential renewals ahead of schedule in order to access the most up-to-date training information. Gave binders containing the Baby Watch Credential Workbook and Glossary & Acronyms documents to all coaches/supervisors with out-of-date training. Provided refresher training to SSIP Professional Development Workgroup members on how to access and run the BTOTS Credentials Due and Overdue Credentials reports. Encouraged local EI programs to communicate proactively with Baby Watch when extenuating circumstances prevent providers from completing credential training on time.

Data System

Short- and/or Intermediate-Term Outcomes: Local EI programs access Baby Watch's data guidance. Baby Watch continues data tracking of culturally diverse children, Compliance & Monitoring data trends, CSPD credentialing, and parent engagement/perception and stakeholder engagement.

Achievement Measures: BTOTS database maintenance, regular communication with BTOTS development team, inform local EI programs and stakeholders of data trends.

Strategies to Achieve SiMR: Maintain positive relationships with stakeholders. Communicate progress toward achieving the SiMR.

Accountability & Quality Improvement

Short- and/or Intermediate-Term Outcomes: Baby Watch: streamlines fiscal and programmatic reviews; ensures that local EI programs comply with CSPD policy; provides resources needed by local EI programs to meet quality performance indicators; partners with local EI programs to identify and correct data errors, and develop and execute Corrective Action Plans (CAPs) as needed.

Achievement Measures: Baby Watch audit debriefing meetings with local EI program administrators, written audit reports, and parent and local EI program survey results.

Strategies to Achieve SiMR: Audit reports, CAPs, QAPs, Baby Watch T/TA.

Quality Standards

Short- and/or Intermediate-Term Outcomes: Local EI program teams comply with Baby Watch's 2018 CSPD Policy (<https://health.utah.gov/cshcn/pdf/BabyWatch/CSPD%20policy.pdf>), which requires all direct service providers to have at minimum a completed bachelor's degree, and that licensed team members have a professional license issued by the Department of Occupational and Professional Licensing or the Utah State Board of Education.

Achievement Measures: Local EI programs document each direct service provider's bachelor's degree and licensing (if applicable) information in BTOTS. This information is verified by the Baby Watch CSPD Coordinator when the initial/renewal credential application is processed. Local EI

programs hire service providers who have completed a bachelor's degree and professional licenses as required for their role. Strategies to Achieve SiMR: Consult with local EI programs struggling to recruit and retain employees who meet the minimum education/licensing requirements. Collaborate with Compliance & Monitoring to identify existing employees whose qualifications do not meet the 2018 policy requirements, or who do not have the required education/licensure for their current role. Encourage programs to adjust employee responsibilities or require additional training so that longstanding employees can continue to work in EI in compliance with Baby Watch policy.

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

YES

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

Personnel/CSPD

New: Updated the Parent Rights & Responsibilities training to feature the 2020 Welcome to Baby Watch and Parent Rights & Responsibilities brochures. Stakeholders were consulted on updating the corresponding Parent Rights & Responsibilities brochure and trainings.

Short-term Outcome: Educate providers on how to introduce early intervention to families, and facilitate Parent Rights conversations virtually.

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

Governance

Next Steps: Continue discussions with UDOH leadership to identify implementable Cost Study recommendations, and ensure ongoing adherence to all MOAs.

Anticipated Outcomes: Develop sustainable fiscal approaches for early intervention in Utah and provide more seamless quality services between agencies.

Finance

Next Steps: Continue to ensure sub-recipients are maintaining compliance with all Baby Watch funding.

Anticipated Outcomes: Successfully fund EI services, and establish fiscal approaches for UDOH, Baby Watch, and local EI programs.

Personnel/CSPD

Next Steps: Promote the use of online Self-Assessment and Individual Credential Plans, to increase accountability and transparency regarding these credential training tasks. Use the Canvas platform to monitor employee training participation; report trends and progress to SSIP Professional Development Workgroup.

Anticipated Outcomes: Over time, fewer service providers will complete the Self-Assessment and Individual Credential Plans on paper.

Coaches/supervisors will provide guidance and mentoring about the online Self-Assessment and Individual Credential Plans. Local EI programs will encourage new hires to complete training online in the Canvas learning platform, where coach/supervisors and Baby Watch can remotely monitor employee responses.

Data System

Next Steps: Baby Watch will assess data performance by local EI program and catchment area populations for each measure. Baby Watch will discuss local EI program needs and course of action to improve noncompliance following development of FFY 2020 CAPs.

Anticipated Outcomes: Baby Watch will establish targets and engage local EI programs in the ongoing review of data policies and procedures, resulting in fewer instances of noncompliance.

Accountability & Quality Improvement

Next Steps: Complete revisions to compliance and performance monitoring processes, tools and guides. Modify fidelity threshold scores based upon analysis of aggregate data collected during FFY 2020 monitoring cycle. Notify local EI programs about data entry expectations, instances of noncompliance, and progress toward achieving data targets.

Anticipated Outcomes: Fidelity thresholds better align with provider performance. Ongoing revisions to Baby Watch guidance documents support compliance and quality performance. Local EI programs make progress toward QAP objectives. Local EI programs internalize the importance of timely, accurate, and valid BTOTS data entry.

Quality Standards

Next Steps: Provide refresher training to local EI programs about Baby Watch's MOUs with University of Utah and Utah State University, which allows university students to complete Early Intervention Specialist credentials before they graduate. Promote the value of the Early Intervention Specialist credential to incoming students. Gather data about student internship placements at local EI programs, and if those placements result in job offers.

Anticipated Outcomes: The number of student credentials issued increases over time. Students who earn credentials at the University of Utah and Utah State University are successfully recruited by local EI programs, and make valuable long-term contributions to Utah's early intervention workforce.

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

- Relationship-Based Competencies (RBC) to Support Family Engagement
- National Family Support Network: Standards of Quality for Family Strengthening and Support
- Strengthening Families and the Protective Factors Framework
 - Division for Early Childhood: DEC Recommended Practices (RPs)
 - Seven Key Principles of Early Intervention: Looks Like/Doesn't Look Like
 - Agreed Upon Practices for Providing Early Intervention Services in Natural Environments
- Family-Guided Routines Based Intervention (FGRBI)
- Head Start Parent, Family, and Community Engagement Framework (PFCE)
- 2020 DEC Initial Practice-Based Professional Preparation Standards for Early Interventionists/Early Childhood Special Educators (EI/ECSE)

Provide a summary of each evidence-based practice.

With stakeholder support, Baby Watch continues to train local EI programs and monitor their performance in the application of relationship-based practices in their work with families. The RBCs, Standards of Quality for Family Strengthening and Support, Strengthening Families and the Five Protective Factors, and DEC RPs for Family, Instruction, and Interaction guide providers to build rapport, provide emotional support, suspend judgment, promote trust, facilitate strong parent/child bonds and offer relationship-based learning.

Baby Watch provides training on elements of the Seven Key Principles and Agreed Upon Practices for Providing EI Services in Natural Environments. Baby Watch also evaluates EI providers' abilities to implement the following identified in FGRBI and the PFCE framework: identify and mobilize a family's formal resources and supports and informal social connections that build the capacity of families to care for their infants/toddlers and reduce

stressors; build upon family strengths, individualize adult learning practices, provide coaching, deliver interventions, and promote a family's ability to implement activities/strategies, between visits, and during naturally occurring care routines; write functional, contextualized, and measurable IFSP outcomes unique to each family's priorities that aim at advancing child participation, engagement, independence, and social relationships; and, build the capacity of families to understand and exercise their rights under IDEA and advocate for their child across the lifespan. Self-Assessment activity updated to align with 2020 DEC Initial Practice-Based Professional Preparation Standards for Early Interventionists/Early Childhood Special Educators (EI/ECSE).

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

The Baby Watch monitoring process requires local EI programs to develop improvement plans specific to each finding in their audit report. QAPs must include: new, updated, or enforced policies/procedures; internal monitoring mechanisms; and, professional development to improve provider skills. Baby Watch and local EI program administrators monitor the application of EBP designed to: promote infant/toddler SE learning; build family capacity to provide care for their child with developmental delays/disabilities in daily routines; educate parents about their rights under IDEA; and, ensure that families have the formal and informal resources and supports necessary to achieve positive mental health, alleviate family stressors, promote strong parent/child attachment, and improve overall quality of life.

Baby Watch online courses have increased in enrollment. Training survey results show that course content has improved provider's understanding of EBPs. Please refer to the Baby Watch Evaluation Plan

(https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202020%20Evaluation%20Plan%20Jan%206%202022%20EH2_GRLD.pdf) for more information.

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

Baby Watch completed its triennial universal monitoring of all local EI programs. Monitoring process included: observations of IFSP meetings, family-directed assessments, and IFSP services; IFSP record reviews; EI provider observational feedback and coaching sessions; online parent surveys, online provider surveys; online program administrator surveys; and the development of a QAP targeting areas requiring improvement. Please refer to the Baby Watch Evaluation Plan

(https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202020%20Evaluation%20Plan%20Jan%206%202022%20EH2_GRLD.pdf) for more information about the data collected using Baby Watch Compliance & Monitoring tools to monitor fidelity of implementation and to assess EI provider practice change.

Providers who completed the High-Quality IFSPs and Family-Directed Assessment training completed a post-training survey and self-assessment of their awareness and application of EBPs. Providers reported they are aware of EBPs, and know how to implement them. Please refer to the Baby Watch Evaluation Plan for more information.

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

Online Canvas course participants report that the training is easy to access and relevant to their jobs. Please refer to the Baby Watch Evaluation Plan (https://health.utah.gov/cshcn/pdf/BabyWatch/FFY%202020%20Evaluation%20Plan%20Jan%206%202022%20EH2_GRLD.pdf) for more information. Parent and provider survey responses support the continued use of EI provider feedback/coaching sessions and embedding relationship-based, family-centered EBPs into IFSP development and service provision. Please refer to the Baby Watch Evaluation Plan for parent and local EI program administrator and provider survey results specific to EI provider coaching.

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

Next Steps:

- Gather feedback from the SSIP Workgroups about the new/changing training needs of local EI programs. What are the strengths/weaknesses of the current Early Intervention Specialist curriculum? What new training topics need to be addressed? Which groups of employees have the most urgent unmet training needs?
- Improve transition guidance with support from stakeholders.
- Continue to individualize T/TA for local EI programs to target EBPs.
- Resume Baby Watch IFSP record reviews for FFY 2021-2022, so that local EI programs can concentrate on preparing for the upcoming UDOH Request for Proposal (RFP), responding to the Cost Study recommendations, and day-to-day program operations. The Baby Watch IFSP Quality Assessment Rubric, Family-Directed Assessment and Compliance & Monitoring Observation tools, used to assess compliance and quality performance measures, targets the EBPs listed previously in this report.

Anticipated Outcomes:

- Identify local EI program's short- and long-term training needs that require Baby Watch's attention and resources during the reporting period.
- Develop and provide new training resources on requested topics and in areas of identified need: virtual webinars, new Canvas courses, and training for specific roles (service coordinators, nurses, eligibility team members, etc.).
- Make enhancements and updates to the Early Intervention Specialist curriculum, and educate local EI programs about those changes. Verify that existing content is up-to-date and reflects Baby Watch's SiMR and SSIP priorities.
- Individual providers and programs will document transition activities thoroughly in BTOTS, based on improved guidance from Baby Watch.
- Programs will adopt an attitude of continuous improvement, boost performance, and align policies, procedures, supervision, practices, and data entry with EBP to reach high-quality performance measures.
- Local EI programs have more capacity to enhance systems and guide provider practices in preparation for the UDOH RFP.

Describe any changes to the activities, strategies, or timelines described in the previous submission and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

Baby Watch CSPD continued its partnership with University of Utah Special Education department. Baby Watch's MOU allowed five students to earn Early Intervention Specialist credentials as part of their graduate coursework, including internships completed at local EI programs.

"Review of BDI-2 NU data for Child Progress as in-home evaluations resume" - as COVID-19 continues to be a barrier to completing in-home evaluations this activity was not completed. Provided guidance for completing virtual BDI-2 NU in Jan 2021. Prior to Jan 2021 some entry and exit scores are missing and therefore not included in our N for our SiMR. Baby Watch will continue to review data to explore further impacts that COVID-19 had on implementing the BDI-2 NU.

Based upon stakeholder feedback and further analysis of data collected during FFY 2020's universal monitoring of local EI programs, Baby Watch is:

- Soliciting feedback from stakeholders to address performance trends
- Modifying fidelity threshold scores for quality performance indicators
- Updating monitoring tools to reduce perceived emphasis on BTOTS documentation
- Changing the format and simplifying the QAP template

As a result of stakeholder participant testimonials, anecdotal evidence, and data from Utah State University, Baby Watch now actively supports and participates in Utah State University CoPs including Early ECHO, Project SCOPE, and the Leadership CoP of Utah DEC Subdivision.

Baby Watch will participate in DEC National Service Coordination Leadership CoP training for Part C Lead Agency team members about how to form, sustain, and facilitate CoPs. Baby Watch wants EI professionals at all levels of the Part C system to form peer-to-peer connections, offer support, facilitate discussions, and share information around common interests.

CoP participants build relationships with other providers and Baby Watch team members. Participants receive both formal learning (i.e., guest presenters) and informal learning (i.e., case studies and discussion) related to family engagement, SE learning, leadership, and social justice. Stakeholders have expressed interest in PD facilitated by university faculty and community and government partners. As a result, Baby Watch will continue to promote and co-sponsor these CoPs and continue our efforts to recruit and deliver training by leaders in fields that intersect with early intervention.

Section C: Stakeholder Engagement

Description of Stakeholder Input

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

Stakeholders have provided input on targets and discussion on data results for all indicators during the FFY 2015-2020 State Performance Plan/Annual Performance Report (SPP/APR) review sessions. On an ongoing basis, data findings are discussed with workgroups and committees. The Interagency Coordinating Council (ICC) is presented performance and data findings for the SPP/APR fiscal years and provides supportive insight for the calculated data. In particular, during multiple ICC meetings in 2020 through January 2022, the ICC was consulted on data findings, discussing new SPP/APR data requirements, and establishment of future targets.

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

During extended ICC meetings, Baby Watch staff have presented historical data and targets for APR indicators, as well as local and national comparisons and improvement activities that have contributed to statewide performance for each. By the conclusion of each meeting the stakeholders made their recommendations with rationales for setting each of the indicator's targets. Additionally, targets for indicator 11 were discussed and refined. These data will be showcased through the State Systemic Improvement Plan. Much data is reflective of our State-identified Measurable Result (SiMR). Implication, impacts, and reasoning related to FFY 2020-2025 SiMR data was discussed in depth with the ICC.

On January 19, 2022 the Chair of the ICC signed and dated the Annual Report Certification of the Interagency Coordinating Council Under Part C of the Individuals with Disabilities Education Act (IDEA) asserting to use the State's Part C SPP/APR for FFY 2020 and confirms provision to our Governor (attached to APR).

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

In May 2021, SSIP Assessment workgroup suggested revisions to the Baby Watch "Recommended Social-Emotional Screening and Assessment Tools" guidance document. The revised document contains additional information about the BDI-2 NU Personal-Social domain and using high-quality FDAs to identify social-emotional concerns and priorities.

Throughout FFY 2020, Baby Watch facilitated SSIP workgroups to engage stakeholders in SiMR improvement efforts. Baby Watch used various communication methods including video conferencing, phone meetings, and email to report on progress and incorporate stakeholder feedback. In collaboration with Early Childhood Utah's Family Engagement Subcommittee, Baby Watch solicited feedback from the Utah chapter of We Are Brave Together, a support group for mothers of children with special needs. Baby Watch conducted a focus group to assess the viability of options for meaningful family engagement across early childhood organizations. Baby Watch continued partnering with local universities and early childhood organizations to support statewide initiatives. These partnerships help Baby Watch align with Early Childhood Utah's strategic plan to strengthen families.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

Baby Watch received feedback from one local EI program about the Unpacking Diversity CoP asking that Baby Watch consider changing the name of the CoP originally entitled "Unpacking Diversity: A Brown Bag Series." A participant expressed concern that "Brown Bag" may be a racist term. As a result, Baby Watch officially changed the name to "Unpacking Diversity" to eliminate the use of any term or phrase that could potentially be harmful and offensive.

Baby Watch surveyed local EI program administrators to assess perceptions of the FFY 2020 Baby Watch monitoring process. Stakeholders expressed concerns with the timeline of the IFSP records selected for review, the elimination of program strengths in audit reports, the established fidelity threshold of 85% across performance indicators, and the emphasis placed on compliant documentation in BTOTS. Stakeholders shared feedback that the QAP process was time-consuming and rigid.

Baby Watch reported on pending changes to the monitoring process and activities based on suggestions. Baby Watch emphasized the role and purpose of the SSIP Compliance & Quality Assurance Workgroup, encouraging all administrators to participate.

Additional Implementation Activities

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

- “SE Assessment & Screening” online course updates
- SE Assessment service provider focus group
- SSIP workgroups promotion and member recruiting
- Scale up existing CoPs
- Introduce the National Center for Pyramid Model Innovations (NCPMI) to stakeholders

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

“SE Assessment & Screening” online course updates

- Timeline: FFY 2020-2021
- Data Collection: Gather stakeholder input about course updates
- Expected Outcome: Service providers implement culturally relevant recommended SE assessments

SE Assessment service provider focus group

- Timeline: FFY 2020-2021
- Data Collection: Gather participant feedback about the barriers to implementing culturally relevant recommended SE assessments and evaluation
- Expected Outcome: Baby Watch T/TA addresses current challenges in implementing SE assessment and evaluation

SSIP workgroups promotion and member recruiting

- Timeline: FFY 2020-2022
- Data Collection: Monitor growth of SSIP workgroup membership and participation
- Expected Outcome: SSIP workgroup members represent Urban, Rural, and Frontier service areas

Scale up existing CoPs

- Timeline: FFY 2020-2022
- Data Collection: Monitor CoP frequency and provider participation
- Expected Outcome: CoPs include members from all levels of Utah’s Part C system

Introduce stakeholders to the National Center for Pyramid Model Innovations (NCPMI)

- Timeline: FFY 2020-2022
- Data Collection: Educate and monitor stakeholder interest in NCPMI
- Expected Outcome: Increased receptivity to implementing NCPMI in Utah Part C

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

Baby Watch identified barriers to anticipated data collection, measures, and outcomes through discussion with local EI programs and reviewing of records, including:

- COVID-19 illness and hospitalizations impacting families attempting to maintain services
 - Disseminated health and safety guidance to prevent the spread of COVID-19
- COVID-19 prevention measures, cancellation policy, and illnesses impacting local EI program staff
 - Disseminated CDC and Utah Department of Health vaccination information and facts to local EI programs for distribution
- Local EI programs note many more children referred for communication concerns and social emotional delays
 - Baby Watch continues to provide ongoing assistance and professional development to address the social-emotional domain to more confidently identify delays in this area
- Local EI program staff, including transition coordinator, resignations causing staff shortages
 - Baby Watch worked closely with programs to support them in identifying avenues to access qualified incumbents as well as supported them with onboarding and credentialing new staff
- Local EI program staff documentation of timely and thorough documentation
 - Baby Watch continues to provide ongoing training to local EI program administration about the importance and reasons for timely, accurate, and reliable documentation
- Local EI programs note a challenge to address social-emotional growth, especially after the past 18 months
 - Baby Watch continues to work with community partners to identify resources across the State of Utah specific to infant mental health and social-emotional development
- COVID-19 and quarantining has led to a decrease in exposure (for our EI population) to everyday social situations
 - Baby Watch provided guidance to all direct service providers for resuming in person visits during the ongoing COVID-19 pandemic
- COVID-19 impact on children with greater isolation from peer activities and relationships with daycare, church attendance, and family gatherings
 - Baby Watch regularly provides resources for families to address child and family activities and relationship building

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

None

11 - OSEP Response

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

11 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

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:

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04/25/22 6:21:03 PM