

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

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

**For reporting on
FFY18**

New York



PART C DUE February 3, 2020

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The New York State Early Intervention Program (NYSEIP) is the statewide system of early intervention services for infants and toddlers with disabilities and their families under Part C of the Individuals with Disabilities Education Act (IDEA).

The New York State Department of Health (Department) is designated in State Public Health Law (PHL) as lead agency for the Part C Early Intervention Program. In this capacity, the Department is responsible for the completion of the federally required State Performance Plan/Annual Performance Report (SPP/APR), which consists of eleven applicable indicators, five of which are compliance with an expectation of 100%, and six of which are performance or results-driven indicators for which targets are set with stakeholders. The performance indicator for resolution settlement (indicator 9) is not applicable to NYSEIP, and the State Systemic Improvement Plan (indicator 11) will be reported in April 2020. Department staff work closely with local municipal early intervention officials and their staff as well to provide training and technical assistance on the federal and State requirements, data entry into the state's data systems, and review of data to ensure data are comprehensive, accurate, and timely. The Department has also taken advantage of technical assistance provided by the US Department of Education's Office of Special Education Programs (OSEP) and their national technical assistance centers, such as Early Childhood Technical Assistance (ECTA) Center, the Center for IDEA Early Childhood Systems (DaSy) and the IDEA Data Center (IDC).

Indicator 3: The new requirement to report "the number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program" does not apply to NY based on guidance received from OSEP and their Office of General Counsel (OGC). Please see the official OSEP response below regarding the guidance. NY enters 0 because N/A cannot be entered.

Here is the official OSEP response on 12/4/2018: We have consulted with OGC and given that only two states OSEP has permitted to sample for C-3 and that OSEP has given these states full credit with a score of 2 points for data completeness under section I.a. of the Results Matrix, this new reporting requirement would be not applicable (or N/A) for these two states that sample.

NYSEIP is one of the nation's largest early intervention delivery systems. In federal fiscal year (FFY) 2018-2019 (July 1-June 30), NYSEIP received about 62,000 referrals and completed over 55,000 multidisciplinary evaluations. Over 70,000 children had an active Individualized Family Service Plan (IFSP) in the program year. NYSEIP served 4.56% of the population of infants and toddlers under three years old based on the point-in-time count on October 1st, which compares with the national average of 3.26% (indicator 6). NYSEIP served just over 1% of the population under one year old, which is similar to the national average (indicator 5). Over 92% of infants and toddlers with IFSPs primarily received early intervention services in the home or community-based setting (indicator 2).

The 57 counties and New York City in New York State (referred to as "municipalities") are responsible for local administration of the NYSEIP. Collaboratively with local program staff and early intervention providers, the Department's efforts to address systems issues and improve data quality have resulted in consistency in the performance of the SPP/APR compliance indicators for timely IFSP and timely transition (indicators 7 and 8A-C).

The Department has also intensified efforts to work with local programs on child outcome measures (indicator 3) reported in the SPP/APR. The measures for child outcomes have been improved in all areas except a slight decrease in 3A Statement 2 from FFY 2017-18 to FFY 2018-19. The Department will continue to provide training and technical assistance to local programs to foster improvement in this area.

As part of the State Systemic Improvement Plan (SSIP), which was submitted April 2015 and approved by OSEP in June 2015, NYSEIP has selected improving family outcomes as its State-identified Measurable Result (SiMR). Building off the data and infrastructure analysis and stakeholder feedback, the Department critically examined the entire process of collecting and analyzing family outcomes, as well as the state's infrastructure to align with the SSIP and the state's Theory of Action. The Family Survey post cards were mailed out to all applicable families in July 2019 for them to fill out the survey on-line, along with a reminder letter mailed out shortly after. The Department, along with EIP stakeholders, are focusing on improving all family outcomes, for the SiMR and SSIP, therefore the goal is effective improvement over the upcoming years.

New York State maintains a comprehensive system of professional development (CSPD) for NYSEIP providers, who are qualified and credentialed through the New York State Education System, for municipal staff who administer local early intervention programs, and for other key early intervention stakeholders. The Department moved from a face-to-face training delivery method to an on-line method in June 2018, in an effort to enable stakeholders to take training at times that are convenient for them and without the need to travel.

The Department, local programs, early intervention service providers, Early Intervention Coordinating Council, and many other stakeholders are committed to ensuring not only compliance with federal and State requirements but also that the program delivers high quality services in a natural environment resulting in positive child and family outcomes.

General Supervision System

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

The Bureau of Early Intervention (BEI) manages state NYSEIP operations, under the auspices of the Division of Family Health within the Center for Community Health, Office of Public Health. BEI has four programmatic sections established to address major program responsibilities for the NYSEIP.

1. Quality Improvement and Information Systems Section, which is responsible for management of the statewide quality improvement, training and technical assistance including clinical practice guidelines, the New York State Early Intervention System (NYSEIS) information management system, and SSIP outcomes.
2. Provider Approval, Due Process and Monitoring Section, which is responsible for management of provider approval and agreements, management of the statewide comprehensive monitoring system, and due process procedures, including systems complaints, mediations, and impartial hearings.

3. Financial Planning and Policy Section, which is responsible for reimbursement methodologies, policies and procedures, management and oversight of claiming and reimbursement associated with early intervention services.

4. Data and Program Evaluation Section, which oversees and manages all data required for program operations, evaluation, and federal and state-level reporting, including child and family outcomes, and provides support for use of evidence-based practices.

BEI works collaboratively with many partners across the Department on NYSEIP operations, including the Office of Information Technology Services (ITS), Office of Public Health Practice, Office of Health Information Management (NYEIS development and operations), Office of Health Insurance Programs (Medicaid, Child Health Plus), and Department of Financial Services (commercial insurance reimbursement); Fiscal Management Audit Unit (auditing of municipalities and providers) and Division of Legal Affairs (legal advice and support on issues related to the NYSEIP).

Provider Capacity

The Department approves, re-approves and enters into agreements with NYSEIP providers as necessary to ensure timely and continuous delivery of services to eligible children and their families. Currently, there are approximately 1,300 billing providers under agreement with the Department to accept service authorizations and submit claims for EIP services, and approximately 17,000 qualified personnel rendering services to children and their families (a ratio of approximately four children per provider).

In FFY 2018-19, the Department approved and/or entered 827 new providers into agreement, including 67 billing providers. In addition, the Department re-approved 677 agency, individual, and municipal/county providers.

Monitoring System

The Department contracts with a review organization to conduct on-site monitoring activities of municipalities who locally administer the New York State Early Intervention Program and approved providers who directly render early intervention services. On-site comprehensive monitoring is conducted by the Department's contractor, whose staff uses tools that include multiple methods of evaluation of an early intervention program to ensure compliance with Federal requirements of IDEA.

If continued noncompliance occurs with providers or municipalities, additional enforcement actions are taken, which include withdrawal of Department approval, fiscal audits and reporting to Office of Professions, Office of Teaching and/or Office of the Medicaid Inspector General.

System Complaints, Dispute Resolutions, and Mediations

Multiple individuals share in the responsibility of ensuring that parents and stakeholders are aware of their right to resolve disputes regarding services, as well as file a complaint. Established procedures address disputes regarding services as well as complaints filed by organizations or individuals alleging that a public agency or a private provider is violating federal or State statute and regulations. Parties who have been unsuccessful addressing issues at a local level may choose to resolve a dispute through mediation, impartial hearing or by filing a complaint.

The Department contracts with the New York State Dispute Resolution Association Inc. (NYS DRA) to provide mediation. The process carries a 30-day timeline. NYSDRA provides oversight and training to the local Community Dispute Resolution centers in each of the 57 counties and New York City.

Requests for an impartial hearing can be submitted by families to the Director of the Bureau of Early Intervention. The request is then referred to the Department's Division of Legal Affairs, Bureau of Adjudication who assigns an Administrative Law Judge. A notice of hearing is sent which will include parental rights related to the hearing process. A written decision is issued in 30 days unless the family agrees to extend the timeline. The decisions of the hearing officer are final.

System complaints are submitted to the Bureau of Early Intervention by a parent/guardian, parent representative or any other interested individual or entity. An investigation is completed within 60 days unless there are exceptional circumstances. Department staff share the findings of complaint investigations with the monitoring unit for consideration when scheduling and conducting additional program monitoring.

Partnerships

The Department has a strong partnership with municipalities in administration of the EIP and works closely with the New York State Association of Counties and Association of County Health Officials on State and local issues related to the NYSEIP.

The Department also works closely with providers and parents involved in the NYSEIP statewide. The Department-sponsored "Partners in Policymaking" training program is an important and ongoing avenue to develop parent leadership and participation in the NYSEIP at the State and local levels.

The Department collaborates closely with other State agencies on a variety of issues related to the EIP, including the State Education Department (SED), Department of Financial Services (DFS), Office of Children and Family Services (OCFS), Office for People with Developmental Disabilities (OPWDD), Office of Mental Health (OMH), and Office of Addiction Services and Supports (OASAS). All of these agencies are represented on the Early Intervention Coordinating Council (EICC).

The EICC is actively involved in providing advice and assistance to the Department on ongoing and emerging issues related to the NYSEIP. The EICC meets quarterly and convenes task forces on an as-needed basis to assist the Department in addressing specific and pressing policy issues.

The Department has one representative (the Assistant Director of the Division of Family Health) on New York State's Early Childhood Advisory Council (ECAC). In addition, one member of the EICC is also a member of the ECAC.

During FFY 2017-18, an EICC workgroup developed a webpage on the BEI website dedicated to social-emotional development for parents that was posted in December 2018. The workgroup also created a webinar training series that is based on the guidance document. The training is currently in the Department's review and approval process. Once approved, the training vendor will turn the content provided into free, self-paced training modules available to all stakeholders. The final project the workgroup created is a quick reference desk guide which is also currently in the Department's review and approval process. The desk guide is expected to be shared with stakeholders in 2020.

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.

New York State maintains a comprehensive approach to technical assistance for municipalities, providers, families and other stakeholders engaged in the New York State Early Intervention Program (NYSEIP).

Department staff is responsible for fielding telephone calls on a daily basis and responding to emails, letters and other forms of communication from municipalities, providers, parents, the public and all other stakeholders. Communication may be on a variety of issues, complaints, concerns and questions related to all aspects of the NYSEIP.

The Department develops and provides written policy and procedural guidance (Guidance Documents) on State and federal requirements for the NYSEIP on a regular basis. The Department recently revised guidance on service coordination activities related to insurance and revised the Insurance Tool Kit for Service Coordinators to comply with regulations adopted on December 5, 2018. The revised document is currently in the Department approval process and will be disseminated to stakeholders in the near future. The guidance was revised to clarify that only insurance plans regulated by New York State Insurance Law will be used for reimbursement of early intervention services.

Additionally, the Assistive Technology for the Early Intervention Program Guidance Document first issued in 1999, was revised to incorporate the current New York State Department of Health (NYSDOH) Early Intervention Program (EIP) policy guidance, as well as the Assistive Technology Device acquisition procedures established by NYSDOH in 2015. This guidance document is currently in the Department approval process.

The Department also provides technical assistance regarding best practices in identification, evaluation and service delivery in the form of evidence-based clinical practice guidelines in the areas of Communication Disorders, Autism/Pervasive Developmental Disorders (PDD), Motor Disabilities, Down Syndrome, Hearing Loss, and Visual Impairment. Department staff provide technical assistance and responds to inquiries regarding the use and content of the policy Guidance Documents and the Clinical Practice Guidelines.

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.

New York State maintains a comprehensive system of professional development (CSPD) for NYSEIP providers, who are qualified and credentialed through the New York State Education System, for municipal staff who administer local early intervention programs, and for other key early intervention stakeholders.

New York State's CSPD includes implementation of a training contract which provides web based statewide training opportunities for current early intervention personnel to gain knowledge and develop skills to deliver early intervention services that are of high quality and conform with federal and State requirements, including the delivery of services in natural environments, as appropriate. The training contract also provides training opportunities for other stakeholders including parents, municipal staff, primary referral sources, primary health care providers, child care providers, local social services district staff, local school district staff and other public health facility staff.

The Department moved from a face-to-face training delivery method to an on-line method in June 2018. The Department offers on-line live training, as well as on-line self-paced training.

Current training is evaluated based on development of an objective process to measure the degree to which current early intervention curricula contain information and strategies describing and promoting best practices to deliver early intervention services. Each training curriculum has an on-line evaluation process completed at the end of the training session. A link to a post-course evaluation survey is emailed to participants and they must complete the survey in order to receive their certificate of completion for the course. The training evaluations are compiled and analyzed to determine if the curriculum meets the needs of the providers and other stakeholders in the field. Additionally, when a new training curriculum is developed, Department staff participate in the live on-line class series to evaluate the content and the reception of the new training. Based on the evaluations completed by participants and participation in the live sessions, revisions are made to the course content and delivery method, as appropriate.

Training curricula are updated, or new curricula are developed, based on formal needs assessments surveys, which are carried out periodically to gain input from the field and early intervention stakeholders. Based on the results of the needs assessment, new curricula topics are researched and developed, or current curriculum content is revised.

Additionally, training curricula are developed or revised, based on specific needs, where current gaps of knowledge are identified through the statewide monitoring system determinations and through analysis of technical assistance responses on specific topics.

The Department also maintains a contract to continue an Early Intervention Family Initiatives Project that is exclusive to training for parents on leadership, advocacy skills, updates and general information regarding the NYSEIP. Through this contract, parents apply for, and are selected to participate in, two weekend training sessions. One weekend includes participation in a webinar which has multiple modalities of participation, including viewing of presentations, interactive learning, and working in chat rooms. The second weekend is an in-person training session, which includes networking, group activities, meeting with an Early Intervention Official from their local program, learning about the Local Early Intervention Coordinating Council, meeting with statewide policy makers, and other topics that will assist with the early intervention process. In an effort to provide training to more families each year, an additional training session will be held for families in the final four years of the current five-year contract.

Stakeholder Involvement:

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

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

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

YES

Reporting to the Public:

How and where the State reported to the public on the FFY 2017 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 2017 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 2017 APR in 2019, is available.

The Department maintains a public web site for the New York State Early Intervention Program at the following address:
https://www.health.ny.gov/community/infants_children/early_intervention/

Statewide and local performance data for FFYs 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016 and 2017 are available on the Department's public web site. The statewide and local performance data by year, including 2017, can be accessed by pasting the following address in your Internet browser: https://www.health.ny.gov/statistics/community/infants_children/early_intervention/

The APR is the mechanism that New York will use to report on progress in meeting the measurable and rigorous targets. Printed and electronic copies of the APR will be available at no cost to any citizen of the State requesting the document. The FFY 2018 APR will be posted on the Department's public web site.

Intro - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

Intro - OSEP Response

The State did not, as required, attach a signed copy of their 2020 Annual Report Certification of the Interagency Coordinating Council (ICC) Form. OSEP notes that the State must provide verification that the attachment it includes in its FFY 2018 SPP/APR submission is in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 and noted in the FFY 2018 SPP/APR User Guides and technical webinar.

The State provided a FFY 2019 target for Indicator C-11/State Systemic Improvement Plan (SSIP), and OSEP accepts that target.

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 2018 SPP/APR, the data for FFY 2017), 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	2005	72.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	88.81%	89.47%	86.66%	85.75%	86.22%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
8,033	11,603	86.22%	100%	82.69%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

There was a decrease in indicator 1 from 86.22% in FFY 2017 to 82.69% in FFY 2018 (a change of -3.53%). Indicator 1 is calculated for each child, so if a child is authorized for three services with two delivered in a timely manner and one service delayed, that child would not be counted as receiving timely services in the APR calculation.

New York reported that 11,603 children were authorized to receive new services from October 1 to December 31, 2018. However, there were 25,679 services authorized for these children during that time period. On average, children were newly authorized for 2.2 services in that quarter. Of those 25,679 services, 20,920 (81.5%) were delivered in a timely manner within 30 days, 2,267 (8.8%) were delayed by discountable family circumstances,

intermittent services, or weather emergency, and the rest 2,492 (9.7%) were delayed by non-discountable reasons including provider capacity issue and provider scheduling problem.

Of the 2,492 delayed services, 2,142 (85.9%) were delayed due to lack of providers. Speech language pathology (SLP), occupational therapy (OT), Physical therapy (PT) and special instruction (SI) represented 94.2% of the 2,142 services that were delayed by provider capacity issue. Family training, social work and group services represented an additional 4.4% of the delayed services.

In response to the provider capacity issue, the Early Intervention Coordinating Council (EICC), in combination with Department Staff, created a Provider Workforce Capacity Task Force that is focused on addressing the current capacity issue, as well as providing the EICC and the Department with recommendations to improve provider capacity. The task force was created in June 2019 and plans to have recommendations to the Department by June 2020.

The New York State Early Intervention Program (NYSEIP) is committed to assuring timely services. NYSEIP staff will continue to work with municipalities and service coordinators to ensure they coordinate with providers to resolve capacity and scheduling issues.

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.

1,562

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

The New York State Early Intervention Program (NYSEIP) considers timely receipt of early intervention services, a service that is received within 30 days from the point that the service is agreed upon with the family.

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

Fourth Quarter October 1, 2018 – December 31, 2018

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

The number of infants and toddlers with new services authorized on an initial or subsequent Individualized Family Service Plan (IFSP) was consistent for each quarter of FFY 2018-2019, therefore one quarter of FFY 2018 (October 1 to December 31) was selected for the calculation of the indicator.

If needed, provide additional information about this indicator here.

The benchmark for timely services in New York is 30 days from the IFSP meeting or the start date of the service authorization amendment, if the service is added to the IFSP after the IFSP meeting date. The New York State Early Intervention Program's data systems do not capture exceptional family delay reasons. In order to capture the reasons for delays in services, each local program (municipality) was provided a report of all infants and toddlers with new services authorized on an initial or subsequent IFSP between October 1, 2018 and December 31, 2018 and for whom those services were not initiated within the required timeframe. Municipalities were instructed to review the infants' and toddlers' records and correct any data entry errors or provide delay reasons, using the following categories: discountable delay (family problem scheduling appointment, family missed or canceled an appointment, family delayed response or consent for an appointment, intermittent service, weather or other emergency declared) or non-discountable delay (difficulty identifying or assigning a service provider or other local program administrative reasons).

There were 1,562 infants with documented exceptional family circumstances which caused a delay in the initiation of services authorized on the IFSP. These infants and toddlers have been included in the numerator and denominator, as allowed by OSEP.

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
54	12	42	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Onsite Monitoring Findings of Noncompliance:

Ten early intervention providers were notified of a monitoring finding for the indicator during the onsite monitoring review.

Formal, written reports of the findings were issued within 90 days of the on-site review. The providers were required to submit a Corrective Action Plan (CAP) within 45 days of receipt of their monitoring report. The providers' CAPs included an analysis completed by the provider of the root cause of the noncompliance and all activities they will implement to correct the noncompliance. The CAPs were reviewed and approved by Department staff within 60 days of receipt and the providers were formally notified in writing that their CAP had been approved. Written technical assistance was provided by Department staff. Additional technical assistance was also provided by phone call by Department staff. The Department's monitoring contractor staff conducted on-site verification of correction reviews within 90 days subsequent of approval of the providers' CAPs for those providers with significant findings of noncompliance. This review was conducted to determine if CAP activities were fully implemented and correction of compliance at 100% can be verified. The CAP process included a review of a subset of subsequent child records that were sent to the Department for review. All ten providers achieved 100% compliance within one year.

Data Findings of Noncompliance:

Forty-four local programs (municipalities) were notified of a data finding for this indicator in FFY 2017. Two of these local programs achieved 100% compliance based on a review of their data within one year. Forty-two of these programs achieved 100% based on a review of their data but not within one year of issuing the finding.

In compliance with the OSEP Memo 09-02, for FFY 2017, the Department examined data from its data systems at least one time during that year to determine noncompliance with the requirements for timely service initiation. The Department provided a list of the potentially noncompliant cases to each local program to allow them the opportunity to review the data for accuracy and provide additional evidence that demonstrated compliance. Once the data review was complete, the Department reviewed the data a second time and identified cases that were noncompliant. The Department issued findings based on the noncompliant cases.

The Department reviewed subsequent data to verify that the local programs correctly implemented the specific regulatory requirements 34 CFR 303.342(e) and 303.344(f). 100% correction was verified based on a verification of data in the Early Intervention Program data systems for IFSPs that were developed within one year from identification of the finding and all of them were corrected as a system.

The Department ensured correction of a system finding by reviewing data from a subsequent quarter (after the October to December quarter). System findings were verified as corrected when the program achieved 100% compliance during that quarter. If 100% compliance was not achieved during that quarter, then additional data were reviewed for subsequent quarters until the local program was verified as having achieved 100% compliance.

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

Onsite Monitoring Finding of Noncompliance:

While conducting the on-site review, the contractor staff determined that each individual case of noncompliance has been corrected within one year, unless the child was no longer within the jurisdiction of the local program.

Data Finding of Noncompliance:

In compliance with the OSEP Memo 09-02, the Department examined data from the Early Intervention Program data systems at least one time per year to determine noncompliance with the requirements for timely service initiation for each individual case.

For each child with the original finding of noncompliance identified, a review of the data system verified that either services authorized were delivered to the child and family in accordance with the agreed-upon IFSP, or the child was no longer under the jurisdiction of the New York State Early Intervention Program.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

1 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

1 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2018-June 30, 2019). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

1 - Required Actions

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline	2005	89.81%			
FFY	2013	2014	2015	2016	2017
Target>=	90.00%	90.00%	90.00%	90.00%	90.00%
Data	93.69%	93.73%	93.76%	92.75%	92.30%

Targets

FFY	2018	2019
Target>=	90.00%	90.00%

Targets: Description of Stakeholder Input

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	28,849
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Total number of infants and toddlers with IFSPs	31,202

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
28,849	31,202	92.30%	90.00%	92.46%	Met Target	No Slippage

Provide reasons for slippage, if applicable

XXX

Provide additional information about this indicator (optional)

NY used 10/1/2018 to count number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings and total number of infants and toddlers with IFSPs.

2 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

2 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A1	2013	Target>=	58.19%	59.00%	60.00%	61.00%	62.00%
A1	58.19%	Data	58.19%	67.27%	63.62%	58.88%	64.29%
A2	2013	Target>=	40.27%	41.00%	42.00%	43.00%	44.00%
A2	40.27%	Data	40.27%	44.80%	45.04%	40.91%	44.73%
B1	2013	Target>=	71.22%	71.50%	72.00%	72.50%	73.00%
B1	71.22%	Data	71.22%	74.51%	74.73%	71.80%	74.26%
B2	2013	Target>=	38.72%	39.00%	40.00%	41.00%	42.00%
B2	38.72%	Data	38.72%	40.15%	41.77%	41.83%	39.34%
C1	2013	Target>=	70.02%	70.50%	71.00%	71.50%	72.00%
C1	70.02%	Data	70.02%	71.53%	73.54%	73.78%	73.54%
C2	2013	Target>=	37.61%	38.00%	39.00%	40.00%	41.00%
C2	37.61%	Data	37.61%	40.60%	39.20%	36.22%	36.95%

Targets

FFY	2018	2019
Target A1>=	63.00%	64.00%
Target A2>=	45.00%	45.00%
Target B1>=	73.50%	74.00%
Target B2>=	43.00%	43.00%
Target C1>=	72.50%	73.00%
Target C2>=	42.00%	42.00%

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

2,951

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

	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	244	8.27%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	554	18.77%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	864	29.28%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	802	27.18%

	Number of children	Percentage of Total
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	487	16.50%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	1,666	2,464	64.29%	63.00%	67.61%	Met Target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	1,289	2,951	44.73%	45.00%	43.68%	Did Not Meet Target	Slippage

Provide reasons for A1 slippage, if applicable

XXX

Provide reasons for A2 slippage, if applicable

The Department is committed to ensuring positive outcomes for children who participate in the New York State Early Intervention Program (NYSEIP). The Department has reported a decrease in children documented as functioning within age expectations in the child outcomes area of positive social-emotional skills (Indicator 3A2) from 44.73% in FFY 2017 to 43.68% in FFY 2018.

The Department has performed a preliminary analysis of the data to determine if there are specific factors contributing to slippage. One issue identified was ensuring timely submission of Child Outcome Summary forms, and the timely processing of those forms by Department staff. The Department has reviewed the process and identified challenges in the child outcomes collection and is working with counties to address these challenges.

To address the process of gathering and entering forms, Department staff conducted a Lean project. Lean is a continuous quality improvement process inspired by private-sector manufacturers to streamline operations and improve outcomes.

The Department will continue to analyze child outcome indicators by factors that may influence the State's reporting, including the severity of delays and diagnoses of the population, the length of time in the NYSEIP, initial scores on the Child Outcome Summary process, socio-economic factors, and geographic location.

The Department, in collaboration with the EICC, currently has a workgroup focused on promoting Social-Emotional Development. The workgroup is using the Social-Emotional Guidance Document that was released by the Department in 2017 as their basis for three projects. The first project is a page on the Department's website focused on social-emotional development and geared towards families. The second project is an on-line training consisting of six modules focused on social-emotional development in regards to the NYSEIP, as well as promoting and providing a better understanding of the guidance document. The third project is a quick reference desk aid focused on social-emotional development that will be provided to municipalities and providers. The Department is also working with the DOH Division of Family Health's Social-Emotional Wellness group. This group is under the Title V Maternal and Child Health Services Block Grant and is working on promoting Social-Emotional Wellness throughout the Division and its programs.

The Department provides technical assistance to municipalities to support data collection, quality and accuracy.

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

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	203	6.88%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	477	16.16%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,082	36.67%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	920	31.18%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	269	9.12%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who	2,002	2,682	74.26%	73.50%	74.65%	Met Target	No Slippage

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
substantially increased their rate of growth by the time they turned 3 years of age or exited the program							
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	1,189	2,951	39.34%	43.00%	40.29%	Did Not Meet Target	No Slippage

Provide reasons for B1 slippage, if applicable

XXX

Provide reasons for B2 slippage, if applicable

XXX

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	248	8.40%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	446	15.11%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,127	38.19%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	946	32.06%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	184	6.24%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	2,073	2,767	73.54%	72.50%	74.92%	Met 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	1,130	2,951	36.95%	42.00%	38.29%	Did Not Meet Target	No Slippage

Provide reasons for C1 slippage, if applicable

XXX

Provide reasons for C2 slippage, if applicable

XXX

Will your separate report be just the at-risk infants and toddlers or aggregated performance data on all of the infants and toddlers it serves under Part C?

XXX

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A1	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
A1	XXX	Data	XXX	XXX	XXX	XXX	XXX
A1 AR	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
A1 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX

A2	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
A2	XXX	Data	XXX	XXX	XXX	XXX	XXX
A2 AR	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
A2 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
B1	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
B1	XXX	Data	XXX	XXX	XXX	XXX	XXX
B1 AR	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
B1 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
B2	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
B2	XXX	Data	XXX	XXX	XXX	XXX	XXX
B2 AR	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
B2 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
C1	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
C1	XXX	Data	XXX	XXX	XXX	XXX	XXX
C1 AR	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
C1 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
C2	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
C2	XXX	Data	XXX	XXX	XXX	XXX	XXX
C2 AR	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
C2 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX

Targets

FFY	2018	2019
Target A1 >=	XXX	XXX
A1 AR	XXX	
Target A2 >=	XXX	XXX
A2 AR	XXX	XXX
Target B1 >=	XXX	XXX
B1 AR	XXX	XXX
Target B2 >=	XXX	XXX
B2 AR	XXX	XXX
Target C1 >=	XXX	XXX
C1 AR	XXX	XXX
Target C2 >=	XXX	XXX
C2 AR	XXX	XXX

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

XXX

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

Not including at-risk infants and toddlers	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Just at-risk infants and toddlers/All infants and toddlers	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for A1 slippage, if applicable

XXX

Provide reasons for A2 slippage, if applicable

XXX

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for A1 AR/ALL slippage, if applicable

XXX

Provide reasons for A2 AR/ALL slippage, if applicable

XXX

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

Not including at-risk infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for B1 slippage, if applicable

XXX

Provide reasons for B2 slippage, if applicable

XXX

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for B1 AR/ALL slippage, if applicable

XXX

Provide reasons for B2 AR/ALL slippage, if applicable

XXX

Outcome C: Use of appropriate behaviors to meet their needs

Not including at-risk infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for C1 slippage, if applicable

XXX

Provide reasons for C2 slippage, if applicable

XXX

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for C1 AR/ALL slippage, if applicable

XXX

Provide reasons for C2 AR/ALL slippage, if applicable

XXX

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

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	29,963
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.	0

	Yes / No
Was sampling used?	YES
Has your previously-approved sampling plan changed?	NO
If the plan has changed, please provide sampling plan.	XXX

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

In accordance with the sampling procedures approved by the US Department of Education Office of Special Education Programs (OSEP), the Department is using a sampling methodology to measure and report on OSEP-required child outcome data for Indicator 3 in its State Performance Plan/Annual Performance Reports (SPP/APR).

Child outcomes summary entry and exit forms for children in sample cohorts are completed locally by IFSP teams. Municipalities (the 57 counties and New York City), which administer the local early intervention programs, are responsible for coordinating all aspects of the data collection process, including enrolling children into child outcomes cohort samples, ensuring Child Outcomes Summary Forms (COSFs) are completed at entry to and exit from the program, and transmitting COSFs to the Bureau of Early Intervention (BEI). To meet the requirement to collect and report data annually to OSEP on the state's performance with respect to Indicator 3 on child outcomes with manageable burden to municipalities, the Department has developed a sampling plan for the annual selection and enrollment of a geographically structured random state sample of children entering the NYSEIP, for whom entry and exit data will be collected to measure and report Indicator 3 child outcomes in the Annual Performance Report. Sample size calculations for both the State and locally-representative samples are based on the NYSEIP's experience with initial IFSP meetings statewide and within the 58 municipalities.

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

YES

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

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

The New York State Early Intervention Program (NYSEIP) uses the Early Childhood Outcomes Center Child Outcomes Summary form and an approved sampling methodology to monitor Child Outcomes in New York State. Two versions of the Child Outcomes Summary Form (one for entry and one for exit data), originally developed by the OSEP-funded Early Childhood Outcomes Center (ECO), have been adapted for use in New York State to collect data necessary to measure the three child outcomes for this indicator.

Child outcomes summary entry and exit forms for children in sample cohorts are completed locally by IFSP teams. Municipalities (the 57 counties and New York City), which administer the local early intervention programs, are responsible for coordinating all aspects of the data collection process, including enrolling children into child outcomes cohort samples, ensuring Child Outcomes Summary Forms (COSFs) are completed at entry to and exit from the program, and transmitting COSFs to the Bureau of Early Intervention (BEI). To ensure the protection of confidential information collected on the COSFs, municipalities are required to enter the form information into a secured on-line Person Electronic Response Data System (PERDS) on the Department's Health Commerce System or send completed forms to BEI via the Department's Health Commerce System's secure file transfer.

Once BEI receives the completed forms, the data are entered into the PERDS database for analysis. Each child has a unique identifier so that COS

scores can be linked back to individual children's IFSP and service information. Only children who have more than six months between the entry COS and the exit COS date are included in the calculation of the indicators.

Provide additional information about this indicator (optional)

3 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

3 - OSEP Response

The State provided targets for FFY 2019 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.

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

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

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

4 - Indicator Data

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A	2013	Target >=	75.99%	76.00%	77.00%	78.00%	79.00%
A	75.99%	Data	75.99%	69.38%	73.24%	78.43%	75.76%
B	2013	Target >=	71.97%	72.00%	73.00%	74.00%	75.00%
B	71.97%	Data	71.97%	67.41%	68.01%	74.18%	71.59%
C	2013	Target >=	84.16%	84.50%	85.00%	86.00%	87.00%
C	84.16%	Data	84.16%	80.00%	81.39%	86.26%	84.85%

Targets

FFY	2018	2019
Target A >=	93.00%	93.00%
Target B >=	91.00%	91.00%
Target C >=	93.00%	93.00%

Targets: Description of Stakeholder Input

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

FFY 2018 SPP/APR Data

The number of families to whom surveys were distributed	19,215
Number of respondent families participating in Part C	1,624
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,462
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,584
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	1,414
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,559
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	1,486
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,604

	FFY 2017 Data	FFY 2018 Target	FFY 2018 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)	75.76%	93.00%	92.30%	Did Not Meet Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	71.59%	91.00%	90.70%	Did Not Meet Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	84.85%	93.00%	92.64%	Did Not Meet Target	No Slippage

Provide reasons for part A slippage, if applicable

XXX

Provide reasons for part B slippage, if applicable

XXX

Provide reasons for part C slippage, if applicable

XXX

	Yes / No
Was sampling used?	NO
If yes, has your previously-approved sampling plan changed?	
If the plan has changed, please provide the sampling plan.	

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

	Yes / No
Was a collection tool used?	YES
If yes, is it a new or revised collection tool?	YES
If your collection tool has changed, upload it here	
The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.	NO

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

The respondents to the survey were not representative of the overall NYS Early Intervention Program by race, ethnicity and age at referral. To ensure that response rates are representative in the future, the Department will monitor the ongoing representativeness of the returned surveys and follow up with more families with older children at referral as well as Hispanic and non-White families as needed.

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

For FFY 2018-19, the Department sent out family survey postcards with an on-line survey link and QR code to all 19,215 families exiting the NYS Early Intervention Program from July 1, 2018 to June 30, 2019, requesting they fill out the survey on-line (attached). These families did not withdraw from early intervention program and their children received at least six months of early intervention services. One survey postcard was mailed to each family, even if the family had multiple children (i.e., twins or triplets) receiving services through the NYS Early Intervention Program. In this situation, one of the children is selected at random and the first name of the child is indicated on the survey in which the family completes. Surveys are not sent to any families whose child passed away. There were 1,526 (8%) families with the postcard undelivered because families moved after exiting early intervention program. There were 1,624 surveys returned (45 completed the paper form, and 1,579 completed on-line) from the rest of the 17,689 families.

The representativeness by Race, Ethnicity, Gender, and Age at Referral of the 1,624 respondents was compared to all the 19,215 families.

Race Representativeness

The families who returned the NYS Family Survey were not representative based on race. Of the 1,624 surveys returned, 1,012 were from White families, 94 were from African-American families and 518 were from families with Other races. When comparing to the expected number based on the population, which was 857 White, 154 African-American, and 613 Other races, there were 60 fewer surveys returned from African-American families and 95 fewer surveys returned from families with Other races than expected respectively. The Chi-Square statistic for the observed versus the expected was a p-value of <.0001 and it was statistically different.

The Department looked at the representativeness from each outcome because some returned surveys had skipped items corresponding to the outcomes. In summary, same as the overall returned surveys, more White families responded to each outcome than families of both African-American and Other races (p < 0.0001 for all three outcomes). However, there were no statistical differences in the positive response rates for all three outcomes among families across the races (p value for 4A was 0.72, 4B was 0.12, and 4C was 0.08).

Ethnicity Representativeness

The families who returned the NYS Family Survey were not representative based on ethnicity. Of the 1,624 surveys returned, 325 were from Hispanic families and 1,299 were from non-Hispanic families. The expected numbers based on the population were 442 Hispanic and 1,182 non-Hispanic families. There were 117 fewer responses from Hispanic families than expected. The Chi-Square statistic for the observed versus the expected responses by ethnicity was a p-value of <.0001, which was significantly different.

The Department looked at the representativeness from each outcome because some returned surveys had skipped items corresponding to the outcomes. In summary, same as the overall returned surveys, less Hispanic families responded to each outcome than non-Hispanic families (p < 0.0001 for all three outcomes). However, there were no statistical differences in the positive response rates for all three outcomes comparing between Hispanic and non-Hispanic families (p value for 4A was 0.59, 4B was 0.06, and 4C was 0.08).

Gender Representativeness

The families who returned the NYS Family Survey were representative based on Gender. There were 505 surveys returned from families with a female child and 1,119 from families with a male child. The expected numbers based on the population eligible for the survey were 528 females and 1,096 males. The Chi-Square statistics for the observed versus the expected was a p-value of 0.21 and was not statistically different.

Similar to the representativeness of the overall returned surveys, there was no significant difference in the response rate to each outcome between families with a female child and families with a male child (p value for 4A was 0.16, 4B was 0.12, and 4C was 0.21).

Age at Referral Representativeness

The families who returned the NYS Family Survey were not representative based on Age at Referral. The mean age for the respondents was 18.2 months old (SD=8.1) when referred compared to 18.8 months old (SD=7.9) for the families who did not return the survey (p=0.0062). The responding families had children who were younger at referral and had more time in the Early Intervention Program before their child exited the program. All children had at least six months of early intervention services to be eligible for the survey.

The Department looked at the representativeness from each outcome because some returned surveys had skipped items corresponding to the outcomes. In summary, same as the overall returned surveys, families who responded to the outcome had a younger child at referral than families who did not respond (p value for 4a was 0.0065, 4B was 0.01 and 4C was 0.0076). However, there were no statistical differences in mean ages at referral between families with positive response and families with negative response to all three outcomes (p value for 4A was 0.67, 4B was 0.32, and 4C was 0.48).

Families with positive response = families agree + families strongly agree + families very strongly agree

Families with negative response = families disagree + families strongly disagree + families very strongly disagree

Provide additional information about this indicator (optional)

Revised collection tool

To collect data on the three federally-required family outcomes, the Department has been using the family outcome survey developed by the National Center for Special Education Accountability Monitoring (NCSEAM). Last year for FFY 2017-18, the Department decreased the number of items on the family survey from 95 items to 36 items. These 36 items on the adapted "Impact of Early Intervention Services on Your Family" Scale (IFS) are required for both APR and SSIP reporting. For FFY 2018-19, data was collected for both indicator 4 and 11 from all families using the same 36 NCSEAM survey items. The on-line survey was translated into Arabic, Bengali, Chinese, Russian, Spanish, and Yiddish, and sent to families that identified a second language as their primary language.

Postcards with an on-line survey link and QR code were mailed to all applicable families in July 2019. A paper survey was mailed upon request from families. There was a reminder letter with the same on-line survey link and QR code sent out in October 2019.

Methodology change to report family outcomes for indicator 4

For FFY 2018-19, New York reported family outcomes using the percentage of positive responses from families on specific NCSEAM survey item(s) which correspond to each outcome described below:

Families with a positive response to a survey item = families agree + families strongly agree + families very strongly agree

Indicator 4A (percent of families participating in Part C who report that early intervention services have helped the family know their rights) is based on positive response rate from families to survey item: "Early Intervention services have helped me and/or my family know about my child's and family's rights concerning early intervention services."

Indicator 4B (percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) is based on positive response rate from families to survey item: "Early Intervention services have helped me and/or my family communicate better with the people who work with my child and family."

Indicator 4C (percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn) is based on positive response rate from families to both "Early Intervention services have helped me and/or my family understand my child's special needs." and "Early Intervention services have helped me and/or my family do things with and for my child that are good for my child's development."

According to the response summary (attached) from the 36 survey items, NY had 14 items with a positive response rate above 90%, 17 items between 90% and 80%, 4 items between 80% and 70% and 1 item below 70%.

In last year (FFY 2017-18), NY had 22 survey items with positive response rate above 90%, 12 items between 90% and 80%, 1 item between 80% and 70% and 1 item below 70%. Yet NY reported 75.8% for indicator 4A, 71.6% for 4B, and 84.9% for 4C based on the Rasch model and IFS score standards set up with NCSEAM Technical Assistance (TA) a decade ago. The comparison between the positive response rates from families and the reported indicator 4 results from NY has been similar in the past six years according to Departmental review. The Department consulted with NCSEAM TA and was informed that the model had been used as instructed. In addition, the Department received technical assistance from OSEP.

When the Department presented both reporting methodologies using the family outcome survey data over the years to the Early Intervention Coordinating Council (EICC), the stakeholders voted to report on the percentage of positive responses from families on the corresponding survey items starting from this APR for FFY 2018-19. Therefore, the Department reset the targets for FFY 2018-19 and FFY 2019-20 as approved by the EICC.

4 - Prior FFY Required Actions

In the FFY 2018 SPP/APR, the State must report whether its FFY 2018 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Response to actions required in FFY 2017 SPP/APR

4 - OSEP Response

The State revised targets for FFY 2018 and provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

The State did not provide verification that the attachments it included in its FFY 2018 SPP/APR submission are in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 and noted in the FFY 2018 SPP/APR User Guides and technical webinar.

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline	2005	1.10%			
FFY	2013	2014	2015	2016	2017
Target >=	1.22%	1.22%	1.22%	1.22%	1.22%
Data	1.09%	1.11%	1.18%	1.13%	1.16%

Targets

FFY	2018	2019
Target >=	1.22%	1.22%

Targets: Description of Stakeholder Input

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 1 with IFSPs	2,452
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 1	227,883

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
2,452	227,883	1.16%	1.22%	1.08%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

Compare your results to the national data

The New York State Early Intervention Program (NYSEIP) served 1.08% of infants and toddlers birth to 1 with IFSPs in FFY 2018. For the same year, the national average was 1.25%. New York State had the third highest population birth to 1 year in the United States, with the fifth highest number of infants under 1 year old served in FFY 2018. NYSEIP has worked with municipalities and providers to improve early identification in children, as well as promoting Early Intervention Services in communities.

Provide additional information about this indicator (optional)

NY used 10/1/2018 as the Date to count number of infants and toddlers birth to 1 with IFSPs.

5 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

5 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline	2013	3.95%			
FFY	2013	2014	2015	2016	2017
Target >=	3.95%	4.00%	4.00%	4.00%	4.00%
Data	3.95%	4.03%	4.22%	4.35%	4.42%

Targets

FFY	2018	2019
Target >=	4.00%	4.00%

Targets: Description of Stakeholder Input

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 3 with IFSPs	31,202
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 3	684,604

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
31,202	684,604	4.42%	4.00%	4.56%	Met Target	No Slippage

Provide reasons for slippage, if applicable

XXX

Compare your results to the national data

The New York State Early Intervention Program (NYSEIP) served 4.56% of infants and toddlers birth through 2 with IFSPs in FFY 2018. For the same year, the national average was 3.26%. New York State had the third highest population birth through 2 in the United States, with the second highest number served in FFY 2018. NYSEIP has worked with municipalities and providers to improve early identification in children, as well as promoting Early Intervention Services in communities.

Provide additional information about this indicator (optional)

NY used 10/1/2018 as the Date to count number of infants and toddlers birth to 3 with IFSPs.

6 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

6 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

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 2018 SPP/APR, the data for FFY 2017), 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	2005	52.90%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	92.58%	94.06%	96.08%	95.74%	96.40%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
4,752	7,643	96.40%	100%	96.11%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

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.

2,594

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

October 1, 2018 – December 31, 2018

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

As allowed by OSEP, New York is reporting data for one quarter of the Federal Fiscal Year (FFY) 2018-2019. The number of infants and toddlers who were evaluated and assessed for whom an initial IFSP meeting was required was consistent for each quarter of FFY 2018-2019, so one quarter of 2018 (October 1 to December 31) was selected for the calculation of the indicator. There were 7,643 infants and toddlers who were evaluated and assessed for whom an initial IFSP meeting was required between October 1, 2018 and December 31, 2018.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
22	10	12	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Data Finding of Noncompliance:

Twenty-two local programs (municipalities) were notified of a data finding of noncompliance for this indicator in FFY 2017-18. Ten of these local programs achieved 100% compliance based on a review of their data within one year. Twelve local programs achieved 100% based on a review of their data but not within one year of issuing the finding.

The State adhered to the requirements in OSEP Memo 09-02 by the following actions: examining data from its data systems at least one time during the year to determine noncompliance with the requirements for timely IFSP meeting; providing a list of the potentially noncompliant cases to each local education agency (county or municipality) to allow them the opportunity to review the data for accuracy and provide additional evidence that demonstrated compliance; reviewing the data a second time and identifying any cases that remained noncompliant. The Department issued findings based on the noncompliant cases. All 22 local education agencies identified as having noncompliant cases were resolved.

The Department reviewed subsequent data to verify that the local programs correctly implemented the specify regulatory requirements 34 CFR 303.342(e) and 303.344(f). 100% correction was verified based on a verification of data in the Early Intervention Program data systems for IFSPs that were developed within one year from identification of the finding and all of them were corrected as a system.

The Department ensured correction of a system finding by reviewing data from a subsequent quarter (after the January to March quarter). System findings were verified as corrected when the program achieved 100% compliance during that quarter. If 100% compliance was not achieved during that quarter, then additional data were reviewed for subsequent quarters until the local program was verified as having achieved 100% compliance.

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

In compliance with the OSEP Memo 09-02, the Department examined data from the Early Intervention Program data systems at least one time per year to determine noncompliance with the requirements for timely IFSP meetings for each individual case.

Data Finding of Noncompliance:

For each child with the original finding of noncompliance identified, a review of the data system verified that either the IFSP meeting was conducted, or the child was no longer under the jurisdiction of the New York State Early Intervention Program.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

7 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2018-June 30, 2019). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, because the State referenced a regulatory citation that is not consistent with this indicator, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and, (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider.

7 - Required Actions

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), 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	2005	83.30%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	99.16%	99.66%	99.75%	99.42%	99.75%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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

If no, please explain.

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1,985	2,000	99.75%	100%	99.95%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

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.

14

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

Data were collected for a sample of toddlers exiting the New York State Early Intervention Program between July 1, 2018 and June 30, 2019.

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

In accordance with the sampling procedures approved by the US Department of Education Office of Special Education Programs (OSEP), the Department is using a geographically representative random sampling approach for collecting transition information. The sample was geographically representative of the population exiting the Part C program based on race, ethnicity, sex, and age at referral.

The transition data of the exiting toddlers has been incorporated in the web-based centralized New York Early Intervention System (NYEIS) and was collected as children exited the program. In addition, each local program received data reports for exiting children to facilitate a review to ensure accuracy of data and document any necessary corrections or delay reasons to the data with respect to required transition steps and services.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	4	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Onsite Monitoring Finding of Noncompliance:

One early intervention provider was notified of a monitoring finding for the indicator during the onsite monitoring review. Formal, written reports of the findings were issued within 90 days of the on-site review. The providers were required to submit a Corrective Action Plan (CAP) within 45 days of receipt of their monitoring report. The providers' CAPs included an analysis completed by the provider of the root cause of the noncompliance and all activities they will implement to correct the noncompliance. The CAPs were reviewed and approved by Department staff within 60 days of receipt and the providers were formally notified in writing that their CAP had been approved. Written technical assistance was provided by Department staff. Additional technical assistance was also provided by phone call by Department staff. The Department's monitoring contractor staff conducted on-site verification of correction reviews within 90 days subsequent of approval of the providers' CAPs for those providers with significant findings of noncompliance. This review was conducted to determine if CAP activities were fully implemented and correction of compliance at 100% can be verified. The CAP process included a review of a subset of subsequent child records that were sent to the Department for review. This one provider achieved 100% compliance within one year.

Data Finding of Noncompliance:

Three local programs (municipalities) were notified of a finding of noncompliance for this indicator in FFY 2017. All three local programs achieved 100% compliance based on a review of their data within one year.

In compliance with the OSEP Memo 09-02, for FFY 2017, the Department examined data from its data systems at least one time during that year to determine noncompliance with the requirements for timely transition steps and services. The Department provided a list of the potentially noncompliant cases to each local program to allow them the opportunity to review the data for accuracy and provide additional evidence that demonstrated compliance. Once the data review was complete, the Department reviewed the data a second time and identified cases that were noncompliant. The Department issued findings based on the noncompliant cases.

The Department reviewed subsequent data to verify that the local programs correctly implemented the specify regulatory requirements 34 CFR 303.342(e) and 303.344(f). 100% correction was verified based on a verification of data in the Early Intervention Program data systems. The Department ensured correction of a finding by reviewing data from a subsequent quarter (January to March). Findings were verified as corrected when the program achieved 100% compliance during that quarter. If 100% compliance was not achieved during that quarter, then additional data were reviewed for subsequent quarters until the local program was verified as having achieved 100% compliance

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

In compliance with the OSEP Memo 09-02, the Department examined data from the Early Intervention Program data systems at least one time per year to determine noncompliance with the requirements for timely transition steps and services for each individual case.

For each child with the original finding of noncompliance identified, a review of the data system verified that either timely transition steps for the child were developed, or the child was no longer under the jurisdiction of the New York State Early Intervention Program.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

8A - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

8A - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2018-June 30, 2019). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

8A - Required Actions

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), 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	2005	95.30%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	97.22%	99.06%	99.43%	99.23%	99.05%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

Data include notification to both the SEA and LEA

YES

If no, please explain.

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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1,426	1,761	99.05%	100%	99.58%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

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.

329

Describe the method used to collect these data

In accordance with the sampling procedures approved by the US Department of Education Office of Special Education Programs (OSEP), the Department is using a geographically representative random sampling approach for collecting transition information. The sample was geographically representative of the population exiting the Part C program based on race, ethnicity, sex, and age at referral.

The transition data of the exiting toddlers has been incorporated in the web-based centralized New York Early Intervention System (NYEIS) and was collected as children exited the program. In addition, each local program received data reports for exiting children to facilitate a review to ensure accuracy of data and document any necessary corrections or delay reasons to the data with respect to required transition steps and services.

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

Describe the method used to select EIS programs for monitoring.

XXX

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

OSEP-approved geographically representative, random sample of toddlers exiting the Part C program between July 1, 2017 and June 30, 2018.

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

The sample was geographically representative of the population exiting the Part C program based on race, ethnicity, sex, and age at referral.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	4	3	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Onsite Monitoring Finding of Noncompliance:

One early intervention provider was notified of a monitoring finding for the indicator during the onsite monitoring review. Formal, written reports of the findings were issued within 90 days of the on-site review. The providers were required to submit a Corrective Action Plan (CAP) within 45 days of receipt of their monitoring report. The providers' CAPs included an analysis completed by the provider of the root cause of the noncompliance and all activities they will implement to correct the noncompliance. The CAPs were reviewed and approved by Department staff within 60 days of receipt and the providers were formally notified in writing that their CAP had been approved. Written technical assistance was provided by Department staff. Additional technical assistance was also provided by phone call by Department staff. The Department's monitoring contractor staff conducted on-site verification of

correction reviews within 90 days subsequent of approval of the providers' CAPs for those providers with significant findings of noncompliance. This review was conducted to determine if CAP activities were fully implemented and correction of compliance at 100% can be verified. The CAP process included a review of a subset of subsequent child records that were sent to the Department for review. The one provider achieved 100% compliance within one year.

Data Finding of Noncompliance:

Six local programs (municipalities) were notified of a finding of noncompliance for this indicator in FFY 2017. Three of these local programs achieved 100% compliance based on a review of their data within one year. The other three local programs achieved 100% compliance based on a review of their data but not within one year of issuing the finding.

In compliance with the OSEP Memo 09-02, for FFY 2017, the Department examined data from its data systems at least one time during that year to determine noncompliance with the requirements for timely notification. The Department provided a list of the potentially noncompliant cases to each local program to allow them the opportunity to review the data for accuracy and provide additional evidence that demonstrated compliance. Once the data review was complete, the Department reviewed the data a second time and identified cases that were noncompliant. The Department issued findings based on the noncompliant cases.

The Department reviewed subsequent data to verify that the local programs correctly implemented the specify regulatory requirements 34 CFR 303.342(e) and 303.344(f). 100% correction was verified based on a review of data in the Early Intervention Program data systems. The Department reviewed data from a subsequent quarter (January to March). Findings were verified as corrected when the program achieved 100% compliance during that quarter. If 100% compliance was not achieved during that quarter, then additional data were reviewed for subsequent quarters until the local program was verified as having achieved 100% compliance.

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

In compliance with the OSEP Memo 09-02, the Department examined data from the Early Intervention Program data systems at least one time per year to determine noncompliance with the requirements for timely notification for each individual case.

For each child with the original finding of noncompliance identified, a review of the data system verified that either notification was made, or the child was no longer under the jurisdiction of the New York State Early Intervention Program.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

8B - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

8B - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2018-June 30, 2019). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), 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	2005	37.10%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	88.53%	96.46%	97.80%	96.81%	96.20%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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

If no, please explain.

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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
344	1,761	96.20%	100%	98.06%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

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.

1,349

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.

60

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

Data were collected for a sample of toddlers exiting the New York State Early Intervention Program between July 1, 2018 and June 30, 2019.

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

In accordance with the sampling procedures approved by the US Department of Education Office of Special Education Programs (OSEP), the Department is using a geographically representative random sampling approach for collecting transition information. The sample was geographically representative of the population exiting NYSEIP based on race, ethnicity, sex, and age at referral.

The required transition data has been incorporated in the web-based centralized New York Early Intervention System (NYEIS) and was collected as children exited the program. In addition, each local program received data reports for exiting children whose records were in NYEIS to facilitate a review to ensure accuracy of data and document any necessary corrections to the data with respect to required transition steps and services.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	3	1	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Onsite Monitoring Finding of Noncompliance:

One early intervention provider was notified of a monitoring finding for the indicator during the onsite monitoring review. Formal, written reports of the findings were issued within 90 days of the on-site review. The providers were required to submit a Corrective Action Plan (CAP) within 45 days of receipt of their monitoring report. The providers' CAPs included an analysis completed by the provider of the root cause of the noncompliance and all activities they will implement to correct the noncompliance. The CAPs were reviewed and approved by Department staff within 60 days of receipt and the providers were formally notified in writing that their CAP had been approved. Written technical assistance was provided by Department staff. Additional

technical assistance was also provided by phone call by Department staff. The Department's monitoring contractor staff conducted on-site verification of correction reviews within 90 days subsequent of approval of the providers' CAPs for those providers with significant findings of noncompliance. This review was conducted to determine if CAP activities were fully implemented and correction of compliance at 100% can be verified. The CAP process included a review of a subset of subsequent child records that were sent to the Department for review. The one provider achieved 100% compliance within one year.

Data Finding of Noncompliance:

Three local programs (municipalities) were notified of a finding of noncompliance for this indicator in FFY 2017. Two of these local programs achieved 100% compliance based on a review of their data within one year. One local program achieved 100% based on a review of their data but not within one year of issuing the finding.

In compliance with the OSEP Memo 09-02, for FFY 2017, the Department examined data from its data systems at least one time during that year to determine noncompliance with the requirements for timely transition conference. The Department provided a list of the potentially noncompliant cases to each local program to allow them the opportunity to review the data for accuracy and provide additional evidence that demonstrated compliance. Once the data review was complete, the Department reviewed the data a second time and identified cases that were noncompliant. The Department issued findings based on the noncompliant cases.

The Department reviewed subsequent data to verify that the local programs correctly implemented the specify regulatory requirements 34 CFR 303.342(e) and 303.344(f). 100% correction was verified based on a verification of data in the Early Intervention Program data systems for IFSPs that were developed within one year from identification of the finding and all of them were corrected as a system.

The Department ensured correction of a system finding by reviewing data from a subsequent quarter (January to March). System findings were verified as corrected when the program achieved 100% compliance during that quarter. If 100% compliance was not achieved during that quarter, then additional data were reviewed for subsequent quarters until the local program was verified as having achieved 100% compliance.

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

Onsite Monitoring Finding of Noncompliance:

While conducting the on-site review, the contractor staff determined that the individual case of noncompliance has been corrected within one year.

Data Finding of Noncompliance:

In compliance with the OSEP Memo 09-02, the Department examined data from the Early Intervention Program data systems at least one time per year to determine noncompliance with the requirements for timely transition conference for each individual case.

For each child with the original finding of noncompliance identified, a review of the data system verified that either the transition conference was convened, or the child was no longer under the jurisdiction of the New York State Early Intervention Program.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

8C - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

8C - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2018-June 30, 2019). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

8C - Required Actions

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NA

Provide an explanation of why it is not applicable below.

This indicator is not applicable to New York State, as the State has adopted Part C due process procedures under section 639 of the IDEA.

Select yes to use target ranges.

NA

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.

NA

Provide an explanation below.

NA

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1 Number of resolution sessions	NA
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1(a) Number resolution sessions resolved through settlement agreements	NA

Targets: Description of Stakeholder Input

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

NA

Historical Data

Baseline	NA	NA			
FFY	2013	2014	2015	2016	2017
Target>=	NA	NA	NA	NA	NA
Data	NA	NA	NA	NA	NA

Targets

FFY	2018	2019

Target>=	NA	NA
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FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
NA	NA	NA	NA	NA	NA	NA

Targets

FFY	2018 (low)	2018 (high)	2019 (low)	2019 (high)
Target	NA	NA	NA	NA

FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target (low)	FFY 2018 Target (high)	FFY 2018 Data	Status	Slippage
NA	NA	NA	NA	NA	NA	NA	NA

Provide reasons for slippage, if applicable

NA

Provide additional information about this indicator (optional)

NA

9 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

9 - OSEP Response

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Provide an explanation below

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1 Mediations held	51
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.a.i Mediations agreements related to due process complaints	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.b.i Mediations agreements not related to due process complaints	42

Targets: Description of Stakeholder Input

The State Performance Plan/Annual Performance Report (SPP/APR) was presented to and discussed with the Early Intervention Coordinating Council (EICC) to obtain stakeholder input on the SPP/APR on December 11, 2019. The EICC is a 30-member Council composed of parents, EIP provider representatives, Early Intervention Officials (EIOs) representing municipalities, insurance plan representatives, and the state agency partners. The EICC holds public meetings that are webcast to allow stakeholders statewide to view the proceedings. Preliminary data were presented on the SPP/APR indicators, including historical trend data. The EICC members engaged in a thorough and thoughtful discussion of the data.

The SPP/APR was shared on an all-county conference call with the EIOs and other county staff on December 12, 2019. In addition, Department staff has worked with EIOs and managers to review and finalize the data for the SPP/APR.

Historical Data

Baseline	2005	80.00%			
FFY	2013	2014	2015	2016	2017
Target>=	90.00%	90.00%	90.00%	90.00%	90.00%
Data	95.59%	93.94%	87.80%	76.79%	85.11%

Targets

FFY	2018	2019
Target>=	90.00%	90.00%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
0	42	51	85.11%	90.00%	82.35%	Did Not Meet Target	Slippage

Targets

FFY	2018 (low)	2018 (high)	2019 (low)	2019 (high)
Target	XXX	XXX	XXX	XXX

FFY 2018 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 2017 Data	FFY 2018 Target (low)	FFY 2018 Target (high)	FFY 2018 Data	Status	Slippage
XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for slippage, if applicable

The New York State Early Intervention Program (NYSEIP) is committed to ensuring timely mediation agreements.

During this reporting period, the State set target of 90% was not met and the successful mediation rate of 82.35% in FFY 2018 represents a decline from 85.11% the previous year.

This indicator is calculated based on small numbers. No specific reasons that explain slippage have been clearly identified. Department staff plan to analyze the mediation requests further to identify any demographic patterns and examine the effectiveness of the mediation process for the parties who did not enter into a mediation agreement.

The State's rate of timely mediation agreements remains within the range of 75-85% which is the consensus among mediation practitioners as a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data.

The Department will be meeting with the mediation contractor to review outreach informational materials and discuss training options to help ensure the effective resolution of disputes through the mediation process.

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

10 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

10 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Lead Agency Director

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

Name:

Constance Donohue

Title:

Director, Bureau of Early Intervention

Email:

constance.donohue@health.ny.gov

Phone:

518-473-7016

Submitted on:

04/27/20 4:10:03 PM