

# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on  
FFY 2019

Rhode Island



**PART C DUE**  
**February 1, 2021**

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 Rhode Island Executive Office of Health and Human Services (EOHHS) has completed the FFY 2019 State Performance Plan (SPP)/Annual Performance Report (APR) based on the Rhode Island Early Intervention Care Coordination System (RIECCS) data system; focused monitoring of all Early Intervention Providers, and the Early Childhood Technical Assistance (ECTA) Center's Family Survey (revised version: 2-5-10).

Although Rhode Island experienced a slippage in Indicators 3 and 4, the Rhode Island Early Intervention Providers continue to ensure and maintain high quality and compliance during the COVID-19 pandemic. The Rhode Island Early Intervention system adjusted to a hybrid service delivery model beginning in March 2020 that included the introduction of telehealth services as an option to ensure the health and safety of families and providers, while providing continuity of services.

#### Additional information related to data collection and reporting

The end of SFY19 posed a new challenge for the Rhode Island Early Intervention system as it adjusted to the demands of the COVID-19 pandemic. The state in collaboration with the 9 EI providers in Rhode Island, quickly developed processes and procedures to move to a telehealth model that ensured the continuation of Early Intervention services for families. In doing so, the individual Early Intervention providers also had to adjust to this new way of service delivery, while meeting the state Department of Health and the CDC's restrictions and guidelines of health and safety. EI Programs inevitably were forced to move quickly to a fully electronic way of doing business, both in-house and with families; to reduce staff as referrals decreased; and, to continue to ensure its program met state and federal regulations.

Fortunately, Rhode Island Early Intervention's data system is web-based and this capability allowed providers to access the system from any environment with internet access. Programs who used paper records and documentation had to develop procedures to ensure data entry met its requirements despite mandated office closures and reduction in support staff. This posed a challenge with some programs at the beginning of the pandemic, but the efforts to ensure timely data collection and reporting is to be recognized. Rhode Island can ensure that its FFY2019 data are complete, accurate, and timely despite these challenges. Our focused monitoring procedures did have to be adjusted slightly, but Rhode Island was still able to complete these activities in a timely manner. Although the impact of data collection was minor, the effects and impact of COVID-19 is evident as the data are interpreted for the time-period between March – June of 2020 specifically for Indicators 1, 4, 7 and 8. Despite all the challenges of the final quarter of FFY2019, Rhode Island is proud of the collaboration and dedication of the front line staff, program directors, and the state team for continuing to ensure that Rhode Island families have access to and engage in Early Intervention services.

#### 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.

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The Rhode Island (RI) EI General Supervision System incorporates eight components that interact and inform each other to ensure implementation of IDEA and to identify and correct non-compliance. Specific components include the following:

1. State Performance Plan/Annual Performance Report (SPP/APR) and other state selected monitoring indicators
2. Rhode Island Early Intervention Certification Standards
3. Fiscal Management and Oversight
4. Complaints/Dispute Resolution System
5. Rhode Island Early Intervention Care Coordination System (RIECCS) (web-based data collection system)
6. Integrated Monitoring Activities (e.g., annual desk audit, on site focused monitoring visits, Early Intervention provider self-assessments)
7. Professional Development and Technical Assistance (TA) System
8. Performance Improvement Plans, Corrective Action Plans, Incentives and Sanctions

The RI EOHHS utilizes RI's General Supervision System to ensure compliance with IDEA and RI EI Certification Standards. There are three main sources of data used for the SPP/APR. The first source through the state's web-based data collection system, RIECCS, is used to report statewide and program specific data for Indicators 2, 3, 5 & 6 as required by OSEP. The second source, ECTA's Family Survey (revised version: 2-5-10), is used to gather data for Indicator 4. The third source, focused monitoring data, are used for Indicators 1, 7, 8 and 9 as required by OSEP. All 9 certified EI providers participate in the state's focused monitoring process annually.

EI Providers utilize a state-wide self-assessment tool and a list of State selected records that includes 10% of each provider's enrollment during January 1-June 30 (or at least 20 records). Records reviewed for Indicator 8 include 10% of those discharged during the same time period (or at least 10 records). The lead agency review team (which includes CSPD staff) then typically conducts site-based visits to all certified EI providers every year to review 25% of the records (or a minimum of 10) from the self-assessment in order to verify accuracy of the data. These on-site record reviews provide an opportunity for gathering data for federal reporting and as a mechanism for identification of technical assistance and professional development needs. The state also reviews any and all complaints (including informal complaints), mediations, and due process hearings to identify performance issues and non-compliance. Due to the restrictions in Rhode Island on gathering in-person due to the COVID-19 pandemic, the lead agency review team conducted this process virtually for its FFY2019 focused monitoring, although the same procedures were followed as presented.

EI providers are required to submit detailed explanations for all findings of non-compliance and to conduct an analysis of the root cause for all findings. The lead agency verifies that each EI provider with non-compliance correctly implements regulatory requirements. Corrective Action Plans are required for all findings of non-compliance and must include an analysis of the root cause of the non-compliance along with strategies (including timelines) to correct the non-compliance. Periodic reporting on the Corrective Action Plans is also required until evidence of correction of each finding is submitted and verified by the lead agency. The lead agency requires evidence of correction of any and all findings as soon as possible, but no later than one year from the identification of the finding. The lead agency may also require Performance Improvement Plans on selected performance indicators and/or State selected quality measures. State determinations are made annually for all certified EI providers in RI in accordance with OSEP. Programs that "Meet Requirements" are awarded an incentive payment. Programs that do not "Meet Requirements" are given sanctions that may include: additional reporting requirements; specific directives to address the root cause for the non-compliance; increased ongoing on-site monitoring and technical assistance; closure to new referrals; change of certification status, financial sanctions; and termination of certification.

### **Technical Assistance System:**

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

The RI Executive Office of Health and Human Services utilizes a contract with the Paul V. Sherlock Center on Disabilities at Rhode Island College (RI's University Center for Excellence in Developmental Disabilities) to ensure the timely and effective delivery of high quality and evidence-based technical assistance and support to RI's EI system. The Sherlock Center has been providing technical assistance to RI's Early Intervention system since 2001. The Part C team at EOHHS and the technical assistance team work closely together to identify the Part C system needs utilizing any related data, create a work plan related to technical assistance, assign tasks among the team, and meet regularly to ensure that action items are completed inform.

The Sherlock center is responsible for the assessment, planning, development, management, and oversight of an ongoing and comprehensive system of technical assistance. The technical assistance system incorporates the needs of EOHHS, EI providers and personnel, community partners and referral sources, and families regarding the requirements and purpose of IDEA, the RI EI Certification Standards, and other national best practices for working with young children with special needs and their families. Responsibilities to EOHHS and individual EI providers include, but are not limited to:

- Provision of technical assistance related to the collection, analysis, and use of data to guide decision making, program planning, and potential system changes.
- Continuous assessment of the RI EI system needs to develop and implement strategies that support the assurance of high quality and compliance with federal and state requirements.
- Support and assistance to EOHHS for individual EI provider oversight and monitoring, review and revision of state policies and standards, and public awareness materials.
- Serve as the state EI Transition Coordinator to build and maintain a collaborative relationship with the Rhode Island Department of Education's (RIDE) Preschool Special Education team. This includes assistance to EOHHS to review, develop, and monitor the ongoing Interagency Agreement with RIDE that includes effective, collaborative policies related to the efficient transitions for children and their families from EI into the Preschool Education system. This includes the assessment, development, and implementation of professional development activities to ensure compliance with IDEA and the RI EI Certification standards at the provider and state levels.

### **Professional Development System:**

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

The RI Executive Office of Health and Human Services utilizes a contract with the Paul V. Sherlock Center on Disabilities at Rhode Island College (RI's University Center for Excellence in Developmental Disabilities) to ensure that EI providers are effectively providing services that improve outcomes for infants and toddlers with disabilities and their families. The Sherlock Center has been providing professional development to RI's Early Intervention system since 2001. The Part C team at EOHHS and the professional development team work closely together to identify the Part C system needs utilizing relative data, create a work plan related to professional development, assign tasks among the team, and meet regularly to ensure that action items are completed. Responsibilities under this contract include:

- The development, implementation, and continuous evaluation of RI's Part C Comprehensive System of Personnel Development. This includes specific focus on recruitment/retention, increasing workforce capacity, providing effective professional development, and developing leadership with the goal that the Part C workforce understands and implements the principles and practices of EI to improve outcomes for children and families.
- The assessment, development, and implementation of professional development to ensure that EI providers understand and effectively incorporate evidence-based practices into the service delivery model to improve outcomes for children and families.
- Develop and provide professional development opportunities that relate to the RI EI Competencies that support the Key Principles and Practices of EI as well as IDEA requirements.
- Assist and support EI providers to ensure the RI EI Competencies are the basis for job descriptions, program level training and supervision, and individualized professional development plans.
- Based on the RI EI Competencies, manage the EI Certificate Program to provide a career path for Level 1 providers to become Level 2.
- Develop and ensure that all new EI providers attend the 4-day Introduction to EI course. The training is based on IDEA requirements, RI EI Certification Standards, EI Principals and Practices, EI Competencies and is focused on the pragmatic skills of relationship-based work. The content is delivered in a multi-modality, activity-based, interactive curriculum and is formatted to follow the EI process beginning with Eligibility through Transition. A main focus is on the IFSP development process that now includes the use of the Routines Based Interview as a tool to develop family-owned, functional, and measurable outcomes that are embedded in the family's daily routine. Experienced EI provider staff serve as "mentors" during each session and presenters include a mix of parents and professionals from all aspects of EI such as: a panel of parents who have been through the EI system; the Part C Coordinator; a developmental behavioral pediatrician; and the state CAPTA liaison. During the COVID-19 pandemic, this training has been adapted to a virtual learning opportunity.
- Provide trainings to individual EI providers that meet individual needs related to EI processes and procedures and the implementation of SSIP activities.
- Develop and lead the monthly EI Supervisor's Seminar for program supervisors co-facilitated by an infant mental health consultant. The seminars focus on skill building, reflective practices, networking and resource sharing, and leadership support.
- Conduct a professional development needs assessment followed by the provision of topical trainings that are based on the assessment. These trainings are evaluated for content to ensure its relevancy to the EI service delivery model and that the content will have an impact on supporting the EI principles and practices.
- Provide conference sponsorships to support EI provider directors, supervisors and direct-service staff to participate in national/regional opportunities.
- Coordinate and lead meetings with representatives from each program and representatives from Lead Education Agencies that include professional development and technical assistance that align with the RI EI Certification Standards and the EI Competencies related to Transition.
- Coordinate and lead low-incidence population (i.e. autism, D/HH, Visual Impairments) Community of Practice groups to provide up-to-date information, interventions, and community connections.

### **Stakeholder Involvement:**

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

The RI Executive Office of Health and Human Services (EOHHS) conducted presentations to provide information to and gather input from stakeholders related to RI's State Performance Plan and Annual Performance Reports, current and historical data and targets for both compliance and improvement indicators, and previous and ongoing strategies for improvement. These presentations and materials were used with the state's administrative team, the state's ICC, and the state's EI Director's group. Each of these groups were given the opportunity to make suggestions for new targets through FFY2019 and provide ideas for new or continued improvement strategies. The input from these presentations was compiled and utilized to set the new targets which was then reported back to each of the stakeholder groups for final review and comment. All of the groups agreed to the final targets.

For FFY 2019 target setting, a similar stakeholder involvement process was used with stakeholders from the state's ICC and EI Directors group. In addition to the process already described, the groups reviewed historical data and past targets, to suggest new targets. Targets from all groups were averaged for a final target which was approved by the state's ICC.

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

YES

**Reporting to the Public:**

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

EOHHS presented FFY 2018 performance on each RI EI provider on the targets in the SPP/APR (all indicators, measurement requirements, previous and current data, and improvement strategies) with the RI State ICC and the EI Director's group in January of 2020. The following link was made publicly available in 4/2020: <http://www.eohhs.ri.gov/ProvidersPartners/EarlyInterventionProviders/EICertificationStandards.aspx>

Included on this link are the following documents:

- 1.FFY 2018 APR data for each indicator by provider and collectively for RI's Part C system
- 2.FFY 2018 State Performance Plan
- 3.FFY2018 SSIP Report

RI ICC members, EI providers, and interested parties are informed electronically about the availability of these publications on the EOHHS website including a link to the federal OSEP website.

**Intro - Prior FFY Required Actions**

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

OSEP notes that one or more of the attachments included in the State's FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

**Response to actions required in FFY 2018 SPP/APR**

**Intro - OSEP Response**

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

**Intro - Required Actions**

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

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

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

### Data Source

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

### Measurement

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

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

### Instructions

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

Targets must be 100%.

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

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

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

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

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

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	64.81%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	97.91%	96.40%	90.69%	93.98%	93.46%

### Targets

FFY	2019
Target	100%

### FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
173	258	93.46%	100%	95.35%	Did Not Meet Target	No Slippage

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

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

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**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).**

Rhode Island's definition of timely services is that any initial or new service added to the IFSP must start within 30 days from the date the parent signed consent for the service.

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

State monitoring

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

All EI Certified providers are selected for program monitoring.

**If needed, provide additional information about this indicator here.**

Reasons for not meeting the timeline for FY19 that were discovered during focused monitoring and that the EI providers reported in their corrective action plans are as follows: staffing shortages, staff errors, and insufficient documentation of exceptional family circumstances. Staff errors affecting timely service were noted to have occurred in the context of pandemic-related challenges as the provider agencies transitioned to a telehealth model of service delivery.

**Correction of Findings of Noncompliance Identified in FFY 2018**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
6	6		0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The 6 RI timely service findings of noncompliance are corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI providers reported in their corrective action plans are as follows: staffing shortages for speech, occupational, and speech therapists; although visits occurred within 30 days, the documentation did not adequately reflect the services listed on the IFSP; individual staff error; and, insufficient documentation of exceptional family circumstances. The State has verified that each EIS provider with each noncompliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Executive Office of Health and Human Services monitored each EIS program through the Welligent data system, yearly program self-assessment, and on-site verification of data. The process included evaluating each provider for an annual determination; notifying each provider of any identified findings of non-compliance; and notifying each provider of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2018 related to timely services on the IFSP. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, each program submitted a data sample that was 100% compliant to close each finding of non-compliance.

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

The 6 Timely Service findings in FFY18 involved 17 individual cases of non-compliance. The state verified through the State's process of Focused Monitoring that the 17 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**1 - Prior FFY Required Actions**

None

## 1 - OSEP Response

### 1 - Required Actions

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

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

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	91.41%

FFY	2014	2015	2016	2017	2018
Target>=	94.20%	94.40%	94.60%	94.80%	95.00%
Data	96.71%	98.07%	98.94%	99.01%	99.53%

### Targets

FFY	2019
Target>=	97.00%

### Targets: Description of Stakeholder Input

The RI Executive Office of Health and Human Services (EOHHS) conducted presentations to provide information to and gather input from stakeholders related to RI's State Performance Plan and Annual Performance Reports, current and historical data and targets for both compliance and improvement indicators, and previous and ongoing strategies for improvement. These presentations and materials were used with the state's administrative team, the state's ICC, and the state's EI Director's group. Each of these groups were given the opportunity to make suggestions for new targets through FFY2019 and provide ideas for new or continued improvement strategies. The input from these presentations was compiled and utilized to set the new targets which was then reported back to each of the stakeholder groups for final review and comment. All of the groups agreed to the final targets.

For FFY 2019 target setting, a similar stakeholder involvement process was used with stakeholders from the state's ICC and EI Directors group. In addition to the process already described, the groups reviewed historical data and past targets, to suggest new targets. Targets from all groups were averaged for a final target which was approved by the state's ICC.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,294
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	2,301

### FFY 2019 SPP/APR Data



Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
2,294	2,301	99.53%	97.00%	99.70%	Met Target	No Slippage

Provide additional information about this indicator (optional)

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

**2 - Required Actions**

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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

### 3 - Indicator Data

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

NO

#### Targets: Description of Stakeholder Input

The RI Executive Office of Health and Human Services (EOHHS) conducted presentations to provide information to and gather input from stakeholders related to RI's State Performance Plan and Annual Performance Reports, current and historical data and targets for both compliance and improvement indicators, and previous and ongoing strategies for improvement. These presentations and materials were used with the state's administrative team, the state's ICC, and the state's EI Director's group. Each of these groups were given the opportunity to make suggestions for new targets through FFY2019 and provide ideas for new or continued improvement strategies. The input from these presentations was compiled and utilized to set the new targets which was then reported back to each of the stakeholder groups for final review and comment. All of the groups agreed to the final targets.

For FFY 2019 target setting, a similar stakeholder involvement process was used with stakeholders from the state's ICC and EI Directors group. In addition to the process already described, the groups reviewed historical data and past targets, to suggest new targets. Targets from all groups were averaged for a final target which was approved by the state's ICC.

#### Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2018	Target>=	68.00%	68.20%	68.80%	70.00%	
A1	51.20%	Data	65.23%	67.22%	57.36%	50.78%	50.21%
A2	2018	Target>=	57.20%	57.40%	57.60%	57.80%	
A2	47.10%	Data	54.75%	57.48%	54.49%	50.87%	47.10%
B1	2018	Target>=	74.20%	74.60%	74.80%	75.00%	
B1	56.00%	Data	73.09%	74.12%	65.26%	57.23%	56.00%
B2	2018	Target>=	54.70%	54.80%	54.80%	55.00%	
B2	39.51%	Data	51.21%	52.34%	46.22%	40.53%	39.51%
C1	2018	Target>=	70.50%	71.00%	71.50%	72.00%	
C1	63.06%	Data	74.80%	78.66%	68.21%	63.47%	63.06%
C2	2018	Target>=	54.20%	54.40%	54.60%	54.80%	
C2	48.26%	Data	53.89%	59.48%	52.15%	51.60%	48.26%

#### Targets

FFY	2019
Target A1>=	52.00%
Target A2>=	48.00%
Target B1>=	57.00%
Target B2>=	41.00%
Target C1>=	64.00%
Target C2>=	49.00%

#### FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

1,426

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	21	1.47%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	564	39.55%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	179	12.55%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	403	28.26%

Outcome A Progress Category	Number of children	Percentage of Total
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	259	18.16%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	582	1,167	50.21%	52.00%	49.87%	Did Not Meet 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	662	1,426	47.10%	48.00%	46.42%	Did Not Meet Target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	19	1.33%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	566	39.69%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	322	22.58%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	410	28.75%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	109	7.64%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	732	1,317	56.00%	57.00%	55.58%	Did Not Meet Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	519	1,426	39.51%	41.00%	36.40%	Did Not Meet Target	Slippage

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

In the analysis of FFY19 Child Outcomes data, slippage for this indicator can be directly attributed to the impact of the COVID-19 Pandemic. In this analysis, data were separated into two groups: children who were discharged prior to the Pandemic (7/1/19-3/15/20) and children who were discharged after the Pandemic was declared (3/16/20 – 6/30/20). A significant difference was found between the two groups for statement B-2. Specifically, the percent of children discharged prior to the pandemic that were functioning within age expectations was 39.43% as compared to 27.60% for the children discharged during the pandemic. This significant difference in the pandemic discharged group (11.83%) is believed to have impacted the overall data for B-2. In comparison to FFY18 B-2 data, the pre-pandemic group's data would have resulted in a "No Slippage" determination. Further analysis of progress categories a-e for B-2 showed that children discharged during the pandemic had significantly less category "d", 21.04%, compared to 31.42% for those children who discharged prior to the pandemic.

The state has hypothesized that the changes EI providers and families experienced during the pandemic may have had an impact on fewer children reaching age expectations. In addition, changes and adaptations made to the Child Outcomes Summary Reporting Process as a result of transitioning to a Telehealth service delivery method may have contributed to lower ratings for B-2. Specifically, the adaptations made to assessing and documenting a child's functional skills during this time made it difficult to ensure accurate ratings. Factors that may have contributed to this difficulty include: EI front-line staff were required to learn how to use the technology to deliver EI services via telehealth in a very short amount of time; a virtual platform is more dependent on parent report rather than the objective administration of elicited tasks and observation of functional skills; the valuable information that is gathered when in a family's home and observing all interactions and activity is less (you can only observe what the parent "shows" you on video);

telehealth visits tend to be shorter or less frequent because families have competing priorities as well as zoom fatigue that occurs for both families and staff; layoffs and furloughs at the program level caused, at times, multiple changes in a family's EI team making it difficult to "get to know" a family in a short amount of time; lack of access to a child's record made it difficult to review all relevant information; family stressors (unemployment, teleworking, distance education for siblings, etc.) may have had an impact on family routines and carry over of interventions; increased family stress has a direct impact on a child's development; and, finally, families had limited access to social interactions with peers and family members (i.e. child care centers, parks, libraries were closed) which may have impacted progress.

**Outcome C: Use of appropriate behaviors to meet their needs**

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	17	1.19%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	484	33.94%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	276	19.35%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	545	38.22%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	104	7.29%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	821	1,322	63.06%	64.00%	62.10%	Did Not Meet Target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	649	1,426	48.26%	49.00%	45.51%	Did Not Meet Target	Slippage

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

In the analysis of FFY19 Child Outcomes data, slippage for this indicator can be directly attributed to the impact of the COVID-19 Pandemic. In this analysis, data were separated into two groups: children who were discharged prior to the Pandemic (7/1/19-3/15/20) and children who were discharged after the Pandemic was declared (3/16/20 – 6/30/20). A significant difference was found between the two groups for statement C2. Specifically, the percent of children discharged prior to the pandemic that were functioning within age expectations was 47.83% as compared to 38.80% for the children discharged during the pandemic. This significant difference in the pandemic discharged group (9.03%) is believed to have impacted the overall data for C2. In comparison to FFY18 C2 data, the pre-pandemic group's data would have resulted in a "No Slippage" determination. Further analysis of progress categories a-e for B-2 showed that children discharged during the pandemic had significantly less category "d", 33.06%, compared to 40.0% for those children who discharged prior to the pandemic.

The state has hypothesized that the changes EI providers and families experienced during the pandemic may have had an impact on fewer children reaching age expectations. In addition, changes and adaptations made to the Child Outcomes Summary Reporting Process as a result of transitioning to a Telehealth service delivery method may have contributed to lower ratings for B-2. Specifically, the adaptations made to assessing and documenting a child's functional skills during this time made it difficult to ensure accurate ratings. Factors that may have contributed to this difficulty include: EI front-line staff were required to learn how to use the technology to deliver EI services via telehealth in a very short amount of time; a virtual platform is more dependent on parent report rather than the objective administration of elicited tasks and observation of functional skills; the valuable information that is gathered when in a family's home and observing all interactions and activity is less (you can only observe what the parent "shows" you on video); telehealth visits tend to be shorter or less frequent because families have competing priorities as well as zoom fatigue that occurs for both families and staff; layoffs and furloughs at the program level caused, at times, multiple changes in a family's EI team making it difficult to "get to know" a family in a short amount of time; lack of access to a child's record made it difficult to review all relevant information; family stressors (unemployment, teleworking, distance education for siblings, etc.) may have had an impact on family routines and carry over of interventions; increased family stress has a direct impact on a child's development; and, finally, families had limited access to social interactions with peers and family members (i.e. child care centers, parks, libraries were closed) which may have impacted progress.

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	2,210
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.	580

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

Rhode Island Part C Early Intervention (EI) in collaboration with Part B 619, Early Childhood Special Education (ECSE), has developed one aligned child outcomes measurement process for both systems. Rhode Island's EI/ECSE Global Child Outcomes Measurement System is based on the Child Outcomes Summary (COS) process developed by the Early Childhood Technical Assistance Center (ECTA). RI EI providers complete the COS process at entry (by the initial IFSP start date), after the acquisition of pertinent functional child and family information that may include: standardized tools, observations, parent report, family assessment, Routines Based Interview, medical records, and information gathered from outside sources. The same process is completed at exit (prior to discharge), along with the determination of progress while participating in EI. RI has integrated the COS into the IFSP process so that the present levels of development are organized using the framework of the Global Child Outcomes. This provides more support and evidence to the team to ensure accurate ratings. For children transitioning to Part B 619, the exit rating discussion occurs in collaboration with the LEA and the family. The collaborative rating is used as Part C's exit rating and Part B 619's entry rating. For those children not transitioning to Part B 619, the team meets with the family prior to discharge to discuss and decide on a rating as part of the discharge process.

The COS/IFSP Process has multiple components to ensure accurate ratings that reflect a child's true functioning as compared to same-age peers and reflects the progress made while participating in EI. First, rich information is gathered about child and/or functioning from multiple sources that include, but are not limited to: family members/caregivers, other adults who know the child such as a child care provider, and other service and/or medical providers. Providers also gather rich information about child and/or family functioning utilizing multiple methods, including, but not limited to: child/family observation, semi-structured parent/caregiver interviews, parent report, review of medical records, standardized and criterion-based assessment/evaluation tools. Some examples of tools used in RI are: Routines Based Interview®, Baley Scales of Infant Development 3, Battelle Developmental Inventory 2-NU, Hawaii Early Learning Profile®, and the Assessment, Evaluation, and Programming System®. Guidance tools developed by RI's EI Technical Assistance center help to support discussions with families and caregivers including: the RI Functional outcomes Discussion Sheet, Guiding Questions for Families, and Guiding Questions for Teachers and Other Caregivers. Other supportive guidance documents used in RI's Child Outcomes Summary Rating Process include guidance developed by ECTA including, but not limited to: COS rating scale, summary statements, Decision Making Tree, and other guidance. The Entry ratings on all children who enter RI EI, Exit ratings for those children enrolled at least 6 months in EI, and the results of answering the progress question at exit are entered into the RIEICCS database. Through this platform, the individual EI providers and the lead agency have the ability to download program specific child outcomes data to view and ensure completion and reliability. Finally, the lead agency analyzes the data for meaningful differences and trends utilizing an outside analyst and various tools developed by ECTA and DaSy.

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

RI did not meet any of its targets for Indicator 3 and believes that the Pandemic had an influence on the FFY19 data for this indicator. RI has found a significant difference in the data for those children who discharged prior to 3/13/20 (the date of the national emergency declaration by the President) and those children who discharged after that date during the 3 ½ months of the pandemic. When RI compares targets to FFY19 pre-pandemic data (approximately 8.5 months), RI meets targets for A1 and A2. For A1, pre-pandemic data is 53.13% and exceeds the target of 52%. A2 data is 49.25% exceeding the target of 48%. For B1 and C1 the targets are extremely close. The data for B1 is 56.92% compared to the target of 57 % and for C1 the data is 63.97% compared to a target of 64%. For B2 and C2 the pre-pandemic data is closer to targets but misses them by just over 1 percent. For B2 the data is 39.43% compared to a target of 41% and for C2 the data 47.83% compared to a target of 49%. As stated in the explanations for slippage for B-2 and C-2, it is clear the pandemic has had some impact in these data. RI's would also like to recognize that the current FFY19 data for C2 and B2 could be a result of a downward trend after the implementation of a new Child Outcomes Summary Rating process in 2016. As a result of this trend, RI did set a new baseline and targets in FFY18 with the thought that this downward trend had stabilized, however, it may be that for B-2 and C-2, this trend has not stabilized.

**3 - Prior FFY Required Actions**

None

**3 - OSEP Response**

**3 - Required Actions**

## Indicator 4: Family Involvement

### Instructions and Measurement

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

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2006	Target>=	90.20%	90.40%	90.60%	90.80%	91.00%
A	87.89%	Data	91.97%	89.40%	91.68%	91.41%	91.63%
B	2006	Target>=	94.00%	94.20%	94.60%	94.80%	95.00%
B	91.40%	Data	94.82%	92.76%	94.70%	94.78%	95.94%
C	2006	Target>=	94.50%	94.50%	94.50%	94.50%	94.50%
C	93.90%	Data	94.10%	91.07%	92.90%	92.40%	93.74%

### Targets

FFY	2019
Target A>=	92.00%
Target B>=	96.00%
Target C>=	94.50%

### Targets: Description of Stakeholder Input

The RI Executive Office of Health and Human Services (EOHHS) conducted presentations to provide information to and gather input from stakeholders related to RI's State Performance Plan and Annual Performance Reports, current and historical data and targets for both compliance and improvement

indicators, and previous and ongoing strategies for improvement. These presentations and materials were used with the state's administrative team, the state's ICC, and the state's EI Director's group. Each of these groups were given the opportunity to make suggestions for new targets through FFY2019 and provide ideas for new or continued improvement strategies. The input from these presentations was compiled and utilized to set the new targets which was then reported back to each of the stakeholder groups for final review and comment. All of the groups agreed to the final targets.

For FFY 2019 target setting, a similar stakeholder involvement process was used with stakeholders from the state's ICC and EI Directors group. In addition to the process already described, the groups reviewed historical data and past targets, to suggest new targets. Targets from all groups were averaged for a final target which was approved by the state's ICC.

**FFY 2019 SPP/APR Data**

The number of families to whom surveys were distributed	2,186
Number of respondent families participating in Part C	968
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	853
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	962
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	890
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	962
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	859
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	955

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	91.63%	92.00%	88.67%	Did Not Meet Target	Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	95.94%	96.00%	92.52%	Did Not Meet Target	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)	93.74%	94.50%	89.95%	Did Not Meet Target	Slippage

**Provide reasons for part A slippage, if applicable**

Rhode Island was under a "stay at home" order during the beginning of the administration period for the family survey (April – September 2020). Mid-summer, Rhode Island entered Phase 1 of re-opening; however, face to face EI visits were still restricted. Because of these regulations, Rhode Island had to collect data in a way that ensured every family had the opportunity to participate. In past years, the family's Service Coordinator was responsible for providing the family with either a paper survey, or a link to the online version. This year, the Rhode Island Parent Information Network (RIPIN), the agency that conducts this survey, became responsible for ensuring families had access to the survey. The RIPIN parent consultants made phone calls to each eligible family to describe the survey process and offer the family options on how they could complete the survey (paper, online or via telephone). The RIPIN parent consultants ensured that all families had equity in completing the survey by addressing any literacy or language needs by accessing interpreters or giving families the ability to complete the survey verbally. For families who stated they wanted to complete the survey but had not yet completed it, the RIPIN parent consultants reached out to families with a text reminder. Families who did not respond to the phone call were subsequently called an additional four times over the course of the data collection period to ensure every opportunity was provided. This method and the efforts of the RIPIN parent consultant team yielded a 44% return rate, which was an increase over past years.

Because an outside party assisted the families with the survey process this year, this may have resulted in families having less personal attachment to the survey process. When a family's Service Coordinator provided the survey in the past, the family may have rated higher previously than they did this year through the more objective approach used during this collection period. Therefore, these data may represent a truer reflection of families' opinions of how Early Intervention has helped them.

Another possible reason for slippage could be that families were trying to deal with the impact and many challenges of the COVID-19 pandemic. Necessary changes to the service delivery method from in-person to telehealth posed many challenges both for families and for staff. Staff had to learn how to use the technology for telehealth and learn quickly how to support families during this transition. Many families chose to put some or all of their services on a temporary hold, and therefore, may have had less services, or no services, during the time of the collection period. During this time, Early Intervention may not have been as helpful as in the past. Family stressors at home (other children distance learning, teleworking, basic needs, etc.) may have impacted the family's ability to engage in telehealth and/or follow through with interventions into their daily routines.

An analysis of the data from Part A revealed that the lowest score was the question about Transition to Part B-619 services. Transition to Part B-619 posed many challenges in Rhode Island as LEAs were quickly transitioning to distance learning, postponing evaluations for eligibility until they could be conducted in-person, and dealing with the challenges of coordinating this process working from a home environment. The lower rating on this item directly contributes to the overall lower rating for Part A: Question 1 = 92.77%; Question 2 = 89.10%; Question 3 = 90.52%; Question 4 = 79.08%; and Question 5 = 91.97%. This question will be analyzed by the state's Family Survey team to help implement strategies to assist families in the Transition to Part B-619 services.

**Provide reasons for part B slippage, if applicable**



Rhode Island was under a “stay at home” order during the beginning of the administration period for the family survey (April – September 2020). Mid-summer, Rhode Island entered Phase I of re-opening; however, face to face EI visits were still restricted. Because of these regulations, Rhode Island had to collect data in a way that ensured every family had the opportunity to participate. In past years, the family’s Service Coordinator was responsible for providing the family with either a paper survey, or a link to the online version. This year, the Rhode Island Parent Information Network (RIPIN), the agency that conducts this survey, became responsible for ensuring families had access to the survey. The RIPIN parent consultants made phone calls to each eligible family to describe the survey process and offer the family options on how they could complete the survey (paper, online or via telephone). The RIPIN parent consultants ensured that all families had equity in completing the survey by addressing any literacy or language needs by accessing interpreters or giving families the ability to complete the survey verbally. For families who stated they wanted to complete the survey but had not yet completed it, the RIPIN parent consultants reached out to families with a text reminder. Families who did not respond to the phone call were subsequently called an additional four times over the course of the data collection period to ensure every opportunity was provided. This method and the efforts of the RIPIN parent consultant team yielded a 44% return rate, which was an increase over past years.

Because an outside party assisted the families with the survey process this year, this may have resulted in families having less personal attachment to the survey process. When a family’s Service Coordinator provided the survey in the past, the family may have rated higher previously than they did this year through the more objective approach used during this collection period. Therefore, these data may represent a truer reflection of families’ opinions of how Early Intervention has helped them.

Another possible reason for slippage could be that families were trying to deal with the impact and many challenges of the COVID-19 pandemic. Necessary changes to the service delivery method from in-person to telehealth posed many challenges both for families and for staff. Staff had to learn how to use the technology for telehealth and learn quickly how to support families during this transition. Many families chose to put some or all of their services on a temporary hold, and therefore, may have had less services, or no services, during the time of the collection period. During this time, Early Intervention may not have been as helpful as in the past. Family stressors at home (other children distance learning, teleworking, basic needs, etc.) may have impacted the family’s ability to engage in telehealth and/or follow through with interventions into their daily routines.

An analysis of the data from Part B revealed that the lowest score was the question about connecting to other services or people for help. Early Intervention did assist families with connecting to needed resources when available. However, at the beginning of the pandemic, not all resources were available to families. In addition, families were not connecting with other people during this time because of the state’s “stay at home” order. The lower rating on this item (Question 9) directly contributes to the overall lower rating for Part B: Question 7 = 91.72%; Question 8 = 96.99%; Question 9 = 85.51%; Question 10 = 93.14%; Question 11 = 93.44%; and Question 12 = 94.09%. This question will be analyzed by the state’s Family Survey team to help implement strategies to assist families with connecting to other services and people.

**Provide reasons for part C slippage, if applicable**

Rhode Island was under a “stay at home” order during the beginning of the administration period for the family survey (April – September 2020). Mid-summer, Rhode Island entered Phase I of re-opening; however, face to face EI visits were still restricted. Because of these regulations, Rhode Island had to collect data in a way that ensured every family had the opportunity to participate. In past years, the family’s Service Coordinator was responsible for providing the family with either a paper survey, or a link to the online version. This year, the Rhode Island Parent Information Network (RIPIN), the agency that conducts this survey, became responsible for ensuring families had access to the survey. The RIPIN parent consultants made phone calls to each eligible family to describe the survey process and offer the family options on how they could complete the survey (paper, online or via telephone). The RIPIN parent consultants ensured that all families had equity in completing the survey by addressing any literacy or language needs by accessing interpreters or giving families the ability to complete the survey verbally. For families who stated they wanted to complete the survey but had not yet completed it, the RIPIN parent consultants reached out to families with a text reminder. Families who did not respond to the phone call were subsequently called an additional four times over the course of the data collection period to ensure every opportunity was provided. This method and the efforts of the RIPIN parent consultant team yielded a 44% return rate, which was an increase over past years.

Because an outside party assisted the families with the survey process this year, this may have resulted in families having less personal attachment to the survey process. When a family’s Service Coordinator provided the survey in the past, the family may have rated higher previously than they did this year through the more objective approach used during this collection period. Therefore, these data may represent a truer reflection of families’ opinions of how Early Intervention has helped them.

Another possible reason for slippage could be that families were trying to deal with the impact and many challenges of the COVID-19 pandemic. Necessary changes to the service delivery method from in-person to telehealth posed many challenges both for families and for staff. Staff had to learn how to use the technology for telehealth and learn quickly how to support families during this transition. Many families chose to put some or all of their services on a temporary hold, and therefore, may have had less services, or no services, during the time of the collection period. During this time, Early Intervention may not have been as helpful as in the past. Family stressors at home (other children distance learning, teleworking, basic needs, etc.) may have impacted the family’s ability to engage in telehealth and/or follow through with interventions into their daily routines.

An analysis of the data from Part C revealed that the lowest score was the question about helping children to get along with others. Connecting to other children, other than siblings, was something that could not occur during the state’s “stay at home” order. Children were no longer going out into the community to participate in activities, libraries and playgrounds were closed, making it difficult for children to practice these functional social skills. The lower rating on this item (Question 13) directly contributes to the lower overall rating for Part C: Question 13 = 81.82%; Question 14 = 92.25%; Question 15 = 89.71%; Question 16 = 93.32%; Question 17 = 90.36%; and Question 18 = 92.45%. This question will be analyzed by the state’s Family Survey team to help implement strategies to assist families in helping their child get along with others.

Sampling Question	Yes / No
Was sampling used?	NO

Question	Yes / No
Was a collection tool used?	YES
If yes, is it a new or revised collection tool?	NO
The demographics of the 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.**

Strategies were implemented in attempt to ensure that Rhode Island's response data are representative of the demographics of enrolled families. First, the race and ethnicity questions were removed from the survey. RI was not confident that the parent was "matching" race and ethnicity to what was reported during intake. Also, race and ethnicity is collected at intake about the child, and RI hypothesized that the parent may have been reporting on the survey based on their own race and ethnicity which could be different from their child. The next strategy involved matching race and ethnicity data from RIECCS to the survey responses. This ensures accuracy with race and ethnicity data. This year the data revealed an underrepresentation of those

identifying as Hispanic and an overrepresentation of those identifying as White/Non-Hispanic. Using the ECTA Meaningful Difference Calculator to analyze the Family Outcomes data, RI's response rate for other races, gender and child's age was representative of the total EI population. For the next survey period, our Family Survey team has developed strategies to outreach to more families who identify as Hispanic. First, the Survey team has ensured that a Spanish speaking parent consultant will be the point person for those families who speak Spanish. This person will outreach to the families via phone and text messaging to explain the survey, offer assistance with completion, and offer an opportunity to verbally provide responses to the open-ended questions. For those families who speak another language, the Survey team has access to an interpretation agency to assist so that all families can have the explanation and assistance in the language of choice. A sub-committee of the Survey Team has been formed to analyze the responses to open-ended questions by families who identify as Hispanic to identify any trends or concerns that might enlighten the team as to why there is less response with this population. From this analysis, a list of additional activities will be developed and implemented into the Family Survey data collection process. Finally, the Survey team will conduct a focus group of early intervention families who identify as Hispanic as another source of providing insight into why this population is underrepresented in Rhode Island's Family Survey data.

**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.**

This year the data revealed an underrepresentation of those identifying as Hispanic and an overrepresentation of those identifying as White/Non-Hispanic. Using the ECTA Meaningful Difference Calculator to analyze the Family Outcomes data, RI's response rate for other races, gender and child's age was representative of the total EI population.

ECTA Meaningful difference Data for representative races  
Representative Total=2295  
Number of families responding to survey=968

Data are representative for the American Indian or Alaskan Native Population:  
Number of families in target population=14  
Number of families responding to survey=4  
Target representation=0.6%  
Actual representation=0.4%  
Difference=-0.2

Data are representative for the Asian population  
Number of families in target population=43  
Number of families responding to survey=23  
Target representation=1.87%  
Actual representation=2.38%  
Difference=0.5

Data are representative for the African American or Black Population  
Number of families in target population=152  
Number of families responding to survey=59  
Target representation=6.62%  
Actual representation=6.10%  
Difference=-0.52

Data are representative for families that identify as more than one race:  
Number of families in target population=87  
Number of families responded to survey=33  
Target representation=3.8%  
Actual representation=3.4%  
Difference=-0.4

Data are not representative for the white population:  
Number of families in target population=1312  
Number of families responding to survey=605  
Target representation=57.17%  
Actual representation=62.5%  
Difference=5.33

Data are not representative of the Hispanic population:  
Number of families in target population=687  
Number of families responding to survey=244  
Target representation=29.93%  
Actual representation=25.20%  
Difference=-4723

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

#### **4 - Prior FFY Required Actions**

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 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 2018 SPP/APR**

Last year FFY 2018, analysis of the demographic questions on the survey made RI questioned if the parent identified their race/ethnicity or the race/ethnicity of their child who is enrolled in EI. Due to this, RI felt that the data was not reliable for this purpose at that time as more surveys indicated mixed race then were delivered. This year RI resolved the problem, the demographic question were removed from the survey, and the returned

responses were matched to the demographic data that is in the RIEICCS data system. Thus this year data ensured consistency and accuracy for a more reliable comparison.

Even with these changes, RI still showed an under representation in the Hispanic population and an over representation of the White population. The data showed representation of other races, gender and age using the ECTA Meaningful difference calculator. For the next survey period, our Family Survey team has developed strategies to outreach to more families who identify as Hispanic. First, the Survey team has ensured that a Spanish speaking parent consultant will be the point person for those families who speak Spanish. This person will outreach to the families via phone and text messaging to explain the survey, offer assistance with completion, and offer an opportunity to verbally provide responses to the open-ended questions. For those families who speak another language, the Survey team has access to an interpretation agency to assist so that all families can have the explanation and assistance in the language of choice. A sub-committee of the Survey Team has been formed to analyze the responses to open-ended questions by families who identify as Hispanic to identify any trends or concerns that might enlighten the team as to why there is less response with this population. From this analysis, a list of additional activities will be developed and implemented into the Family Survey data collection process. Finally, the Survey team will conduct a focus group of early intervention families who identify as Hispanic as another source of providing insight into why this population is underrepresented in Rhode Island's Family Survey data.

This year's  
ECTA Meaningful difference Data for non representative races  
Representative Total 2295  
# families responded to survey 968  
Race Overall Representative No

Hispanic  
# families in target population 687  
# families responded to survey 244  
Target representation (% of families) 0.299346405  
Actual representation (% of families) 0.252066116  
Difference -0.04728029  
Are your data representative? No

White  
# families in target population 1312  
# families responded to survey 605  
Target representation (% of families) 0.57167756  
Actual representation (% of families) 0.625  
Difference 0.05332244  
Are your data representative? No

American Indian or Alaska Native  
# families in target population 14  
# families responded to survey 4  
Target representation (% of families) 0.006100218  
Actual representation (% of families) 0.004132231  
Difference -0.001967986  
Are your data representative? Yes

Asian  
# families in target population 43  
# families responded to survey 23  
Target representation (% of families) 0.018736383  
Actual representation (% of families) 0.023760331  
Difference 0.005023947  
Are your data representative? Yes

African American or Black  
# families in target population 152  
# families responded to survey 59  
Target representation (% of families) 0.066230937  
Actual representation (% of families) 0.060950413  
Difference -0.005280524  
Are your data representative? Yes

More than one race  
# families in target population 87  
# families responded to survey 33  
Target representation (% of families) 0.037908497  
Actual representation (% of families) 0.034090909  
Difference -0.003817588  
Are your data representative? Yes

#### 4 - OSEP Response

#### **4 - Required Actions**

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

## Indicator 5: Child Find (Birth to One)

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	1.86%

FFY	2014	2015	2016	2017	2018
Target >=	2.50%	2.50%	2.50%	2.50%	2.50%
Data	3.05%	2.75%	3.00%	2.60%	3.14%

### Targets

FFY	2019
Target >=	2.50%

### Targets: Description of Stakeholder Input

The RI Executive Office of Health and Human Services (EOHHS) conducted presentations to provide information to and gather input from stakeholders related to RI's State Performance Plan and Annual Performance Reports, current and historical data and targets for both compliance and improvement indicators, and previous and ongoing strategies for improvement. These presentations and materials were used with the state's administrative team, the state's ICC, and the state's EI Director's group. Each of these groups were given the opportunity to make suggestions for new targets through FFY2019 and provide ideas for new or continued improvement strategies. The input from these presentations was compiled and utilized to set the new targets which was then reported back to each of the stakeholder groups for final review and comment. All of the groups agreed to the final targets.

For FFY 2019 target setting, a similar stakeholder involvement process was used with stakeholders from the state's ICC and EI Directors group. In addition to the process already described, the groups reviewed historical data and past targets, to suggest new targets. Targets from all groups were averaged for a final target which was approved by the state's ICC.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	308
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	10,518

### FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
308	10,518	3.14%	2.50%	2.93%	Met Target	No Slippage

### Compare your results to the national data

RI ranks 5th compared to all states and District of Columbia.

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

**5 - Prior FFY Required Actions**

None

**5 - OSEP Response**

**5 - Required Actions**

## Indicator 6: Child Find (Birth to Three)

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 6 - Indicator Data

Baseline Year	Baseline Data
2005	4.09%

FFY	2014	2015	2016	2017	2018
Target >=	6.00%	6.00%	6.00%	6.00%	6.00%
Data	6.36%	6.11%	6.07%	6.14%	6.54%

#### Targets

FFY	2019
Target >=	6.00%

#### Targets: Description of Stakeholder Input

The RI Executive Office of Health and Human Services (EOHHS) conducted presentations to provide information to and gather input from stakeholders related to RI's State Performance Plan and Annual Performance Reports, current and historical data and targets for both compliance and improvement indicators, and previous and ongoing strategies for improvement. These presentations and materials were used with the state's administrative team, the state's ICC, and the state's EI Director's group. Each of these groups were given the opportunity to make suggestions for new targets through FFY2019 and provide ideas for new or continued improvement strategies. The input from these presentations was compiled and utilized to set the new targets which was then reported back to each of the stakeholder groups for final review and comment. All of the groups agreed to the final targets.

For FFY 2019 target setting, a similar stakeholder involvement process was used with stakeholders from the state's ICC and EI Directors group. In addition to the process already described, the groups reviewed historical data and past targets, to suggest new targets. Targets from all groups were averaged for a final target which was approved by the state's ICC.

#### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	2,301
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	32,224

#### FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
2,301	32,224	6.54%	6.00%	7.14%	Met Target	No Slippage

#### Compare your results to the national data

RI ranks 4th compared to all states and District of Columbia.

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

**6 - Prior FFY Required Actions**

None

**6 - OSEP Response**

**6 - Required Actions**



## Indicator 7: 45-Day Timeline

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

## 7 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	71.70%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.20%	98.00%	95.95%	98.40%	96.92%

### Targets

FFY	2019
Target	100%

### FFY 2019 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
182	258	96.92%	100%	97.29%	Did Not Meet Target	No Slippage

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

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

69

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

25

Part C

State monitoring

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

All 9 RI Certified EI providers are included in monitoring.

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

Reasons for not meeting the timeline for FY19 that were discovered during focused monitoring and that the EI providers reported in their corrective action plans are as follows: staffing shortages, individual staff error/oversight, and insufficient documentation of exceptional family circumstances. Staff errors affecting timely service were noted to have occurred in the context of pandemic-related challenges as the provider agencies transitioned to a telehealth model of service delivery.

**Correction of Findings of Noncompliance Identified in FFY 2018**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	5		0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

5 RI 45-day Timeline findings in FFY18 have been corrected. Reasons for not meeting the timeline that were discovered during focused monitoring and that the EI providers reported in their corrective action plans are as follows: service coordination staffing shortages, individual staff errors and oversight, and insufficient documentation of exceptional family circumstances. The State has verified that each EIS program with non compliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated IFSPs for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Executive Office of Health and Human Services monitored each EIS program through the Welligent data system, yearly program self-assessment, and on-site verification of data. The process included evaluating each provider for an annual determination; notifying each provider of any identified findings of non-compliance; and notifying each provider of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2018 related to the 45-day timeline. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, each program submitted a data sample that was 100% compliant to close the finding of non-compliance.

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

The state verified the 5 45-day Timeline findings in FFY18 through the State's process of Focused Monitoring that the 17 children received the early intervention services on their IFSP, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**7 - Prior FFY Required Actions**

None

**7 - OSEP Response**

**7 - Required Actions**

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

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

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	79.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.81%	100.00%	99.00%	100.00%	99.03%

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
96	103	99.03%	100%	99.03%	Did Not Meet Target	No Slippage

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

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

6

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

State monitoring

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

All 9 RI Certified EI providers are included in monitoring.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

1 RI Transition Steps finding has been corrected. The Lead Agency monitored the EI provider through the state data system, their yearly program self-assessment, and verification of individual record data. The process included evaluating the provider for an annual determination; notifying the provider of any identified findings of non-compliance; and notifying the provider of any required actions. The program submitted a Corrective Action Plan for this finding of non-compliance identified in FFY2018 related to Transition Steps. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. In this case of non-compliance, the reason that Transition Steps were not developed is due to poor provider documentation of family cancellations/no-shows to several appointments. In the Corrective Action Plan, the provider worked with the individual staff responsible to ensure complete documentation with Transition timelines and activities (including Transition Steps). Upon completion of the Corrective Action Plan, the program submitted a data sample that was 100% compliant to close the finding of non-compliance.

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

The 1 Transition Steps finding in FFY18 involved 1 individual case of non-compliance. The state verified through the State's process of Focused Monitoring that the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**8A - Prior FFY Required Actions**

None

## **8A - OSEP Response**

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

## **8A - Required Actions**

The State did not provide the reasons for delay as required by the Measurement Table. The State must report reasons for delay for FFY 2020 in its FFY 2020 SPP/APR.

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

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

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	96.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	98.92%	100.00%	100.00%

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
103	103	100.00%	100%	100.00%	Met Target	No Slippage

**Number of parents who opted out**

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

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

Rhode Island used data from both the RIEICCS database and data from the focused monitoring process to report on Indicator 8b. Each EI provider collected and entered transition notification data into the RIEICCS data system including: potential eligibility for Part B 619 and the date of notification to the LEA or the date the parent opted out of notification (and/or opted back in, if applicable). Notification to the SEA was transmitted electronically from RIEICCS to the Part B data system for all children with IFSPs who are over the age of 28 months. The state ensured validity of these data within the focused monitoring process. EI providers used a self-assessment record review tool, developed by EOHHS, that required the EI provider to verify compliance on all federal and state indicators and state quality measures. The expectation was that the program completed this review for a list of EOHHS selected records (10% of each program's enrollment during January 1 - June 30, 2020 or at least 20 records). Among these state selected records, 75% (or at least 20) were newly enrolled children, while the other 25% (at least 10) were children who transitioned to Part B 619 during that time period. The lead agency review team conducted focused monitoring site visits to all 9 RI EI providers to review 25% of the records (or a minimum of 10) from the self-assessment to verify the reliability and validity of the reported data.

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

YES

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

YES

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

State monitoring

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

All 9 RI Certified EI providers are included in monitoring.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**8B - Prior FFY Required Actions**

None

**8B - OSEP Response**

## 8B - Required Actions



## Indicator 8C: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

## 8C - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	91.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	97.73%	100.00%	99.00%	100.00%	99.03%

**Targets**

FFY	2019
Target	100%

**FFY 2019 SPP/APR Data**

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
95	103	99.03%	100%	100.00%	Met Target	No Slippage

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

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

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.

8

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Rhode Island used data from both the RIEICCS database and data from the focused monitoring process to report on Indicator 8c. Each EI provider collected and entered transition notification data into the RIEICCS data system including: potential eligibility for Part B 619 and the date of notification to the LEA or the date the parent opted out of notification (and/or opted back in, if applicable). Notification to the SEA was transmitted electronically from RIEICCS to the Part B data system for all children with IFSPs who are over the age of 28 months. The state ensured validity of these data within the focused monitoring process. EI providers used a self-assessment record review tool, developed by EOHHS, that required the EI provider to verify compliance on all federal and state indicators and state quality measures. The expectation was that the program completed this review for a list of EOHHS selected records (10% of each program's enrollment during January 1 - June 30, 2020 or at least 20 records). Among these state selected records, 75% (or at least 20) were newly enrolled children, while the other 25% (at least 10) were children who transitioned to Part B 619 during that time period. The lead agency review team conducted focused monitoring site visits to all 9 RI EI providers to review 25% of the records (or a minimum of 10) from the self-assessment to verify the reliability and validity of the reported data.

Provide additional information about this indicator (optional)

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

1 RI Transition Conference finding has been corrected. The State has verified that each EIS program with non compliance reported by the State in FFY18 under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated IFSPs for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Executive Office of Health and Human Services monitored each EIS program through the Welligent data system, yearly program self-assessment, and on-site verification of data. The process included evaluating each provider for an annual determination; notifying each provider of any identified findings of non-compliance; and notifying each provider of any required actions. Each program submitted a Corrective Action Plan for each finding of non-compliance identified in FFY2018 related to the Transition Steps. The Corrective Action Plan included a program analysis of the root cause for the non-compliance and action steps with responsible parties and dates to correct the identified issues that led to non-compliance. Upon completion of the Corrective Action Plan, each program submitted a data sample that was 100% compliant to close the finding of non-compliance.

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

The 1 Transition Conference finding in FFY18 involved 1 individual case of non-compliance. The state verified through the State's process of Focused Monitoring that the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

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

**8C - Prior FFY Required Actions**

None

**8C - OSEP Response**

**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.**

YES

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

No Data to report

### 9 - Prior FFY Required Actions

None

### 9 - OSEP Response

This Indicator is not applicable to the State.

### 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)) divided by 2.1) times 100.

#### Instructions

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

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

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

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

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

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

### 10 - Indicator Data

#### Select yes to use target ranges

Target Range not used

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

NO

#### Prepopulated Data

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

#### Targets: Description of Stakeholder Input

The RI Executive Office of Health and Human Services (EOHHS) conducted presentations to provide information to and gather input from stakeholders related to RI's State Performance Plan and Annual Performance Reports, current and historical data and targets for both compliance and improvement indicators, and previous and ongoing strategies for improvement. These presentations and materials were used with the state's administrative team, the state's ICC, and the state's EI Director's group. Each of these groups were given the opportunity to make suggestions for new targets through FFY2019 and provide ideas for new or continued improvement strategies. The input from these presentations was compiled and utilized to set the new targets which was then reported back to each of the stakeholder groups for final review and comment. All of the groups agreed to the final targets.

For FFY 2019 target setting, a similar stakeholder involvement process was used with stakeholders from the state's ICC and EI Directors group. In addition to the process already described, the groups reviewed historical data and past targets, to suggest new targets. Targets from all groups were averaged for a final target which was approved by the state's ICC.

#### Historical Data

Baseline Year	Baseline Data
2005	

FFY	2014	2015	2016	2017	2018
Target>=					
Data					

#### Targets

FFY	2019

Target>=	
----------	--

**FFY 2019 SPP/APR Data**

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

Provide additional information about this indicator (optional)

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

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

**10 - Required Actions**

## **Certification**

### **Instructions**

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

### **Certify**

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

### **Select the certifier's role**

Designated Lead Agency Director

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

#### **Name:**

Jennifer Kaufman

#### **Title:**

Part C Coordinator

#### **Email:**

jennifer.kaufman@ohhs.ri.gov

#### **Phone:**

4015752665

#### **Submitted on:**

04/26/21 1:45:15 PM