

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2021**

North Dakota



**PART C DUE
February 1, 2023**

**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

North Dakota is divided into eight regions. Each region has one DD Program Management (Service Coordinators) Unit through the Regional Human Service Center. For FFY 2021, four (4) of the regions had one (1) Infant Development program, one (1) region had two (2) Infant Development programs, and three (3) regions had three (3) Infant Development programs. For monitoring purposes, the regional program is defined as a regional DD Program Management Unit (Service Coordinators) and an Infant Development Program. There are 15 Infant Development programs for the purposes of reporting for FFY 2021.

In September 2022, the North Dakota Department of Human Services, the Lead Agency for Part C, merged with the North Dakota Department of Health. The new Lead Agency for Part C in North Dakota is the North Dakota Department of Health and Human Services (ND HHS).

There are no changes to staff or regulatory duties assigned to the staff. The Part C Coordinator remains within ND HHS and retains all previous duties regarding IDEA Part C.

North Dakota is working with OSEP to complete any required actions due to the Lead Agency name change.

As part of the transition to ND HHS, the existing Early Intervention website is being transitioned to a new platform. As of the submission of the FFY 2021 APR, all links contained in the attachments are accurate and live. If any links change, North Dakota will provide updated links during APR Clarification.

4/24/23: North Dakota has added the information from the attachments to the APR regarding COVID-19, General Supervision, Technical Assistance, Professional Development, Public Reporting and Target Setting into their respective areas in the introduction. Any links that have expired have been removed and new links have been inserted.

Additional information related to data collection and reporting

In March 2020, due to the COVID-19 health emergency, North Dakota moved to provide IFSP services through virtual platforms. All services, including evaluation and assessment, home visits, consultations, and IFSP development were able to be provided using virtual platforms. This flexibility allowed services to continue for families uninterrupted and is reflected in the consistency of our data. Ongoing state and federal Technical Assistance (TA) has been utilized to support programs in implementing quality, evidence-based virtual services.

In March 2020, North Dakota issued initial guidance around COVID-19 documentation and expectations for engaging in virtual service delivery. The North Dakota Department of Health and Human Services established a webpage to compile all COVID-19 guidance for stakeholders. North Dakota Early Intervention guidance is found on the established webpage. The state began holding weekly meetings with programs regarding COVID-19 in March 2020. These meetings are an opportunity for the state to provide updates on policy and procedure regarding COVID-19, and for programs to seek clarification and ask questions.

Virtual service delivery was made available to all programs and families beginning on March 1, 2020. With the support of Statewide Early Intervention meetings and state-provided resources, programs were able to work through technology needs in a short time period. In April, the state allowed the intake process to be conducted virtually for all infants and toddlers, instead of requiring it to be conducted in-person. Federal requirements are continually reviewed to determine the maximum amount of flexibility that can be provided to programs and families while still ensuring families' rights are being upheld.

The attachment labeled "COVID-19 Response ND-C FFY 2021" contains a link to North Dakota's COVID-19 guidance.

4/24/23:

As of 3/15/23, the old ND Early Intervention website has been discontinued. Below is the updated link to the COVID-19 Guidance.
<https://www.hhs.nd.gov/health/coronavirus/human-services-covid-19-program-policy>

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.

Since FFY 2010, North Dakota (ND) has been engaged in improving General Supervision, and in doing so, has taken advantage of national technical assistance (TA) resources from a number of entities, as reported in past Annual Performance Reports. To assist with ongoing accountability, the ND Interagency Coordinating Council established a standing agenda item to review General Supervision activities on a quarterly basis. Over the past 11 federal fiscal years, ND State Office staff, along with data staff, have reviewed the queries used from North Dakota's electronic data system to assure that the reports are being generated consistently across the years and continue to meet the state's needs to determine state and regional program performance. This work has provided ongoing direction to the regional programs on more consistent data entry and application of Part C regulations.

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As part of the transition to ND HHS, the existing Early Intervention website is being transitioned to a new platform. As of the submission of the FFY 2021 APR all links contained in attachments are accurate and live. If any links change, North Dakota will provide updated links during APR Clarification.

The attachment labeled "General Supervision ND-C FFY 2021" contains a link to North Dakota's General Supervision document.

4/24/23:

As of 3/15/23, the old ND Early Intervention website has been discontinued. Below is the updated link to the General Supervision document, which can be found under the procedures tab.

<https://www.hhs.nd.gov/early-childhood-services/early-intervention/program-guidance>

Technical Assistance System:

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

Events labeled "TA Call" refer to nation-wide TA calls. TA that was specifically provided to North Dakota has been noted with the TA provider, for example: "OSEP On-Site."

The State received ongoing TA from CIFR, CADRE, ECTA and DaSy. The national TA the State received primarily supported us to review and improve our processes around data quality, which is ongoing. Meetings between the State Part C, State systems representatives, State Part C TA and our federal TA contacts continued throughout the year to work on data quality, which is an identified area within our SSIP. In addition, ECTA provided TA in the development of Procedural Safeguards and Prior Written Notice.

The State worked intensively with our federal TA partners in the development of the APR and SSIP, including content, stakeholder involvement, data refinement, strategies and evaluation plan. Intensive work was completed on developing an overall framework for the SSIP, in preparation for DMS 2.0, and other state work. This included SSIP action strand improvement plans and evaluation plans development.

The attachment labeled "Technical Assistance System ND-C FFY 2021" contains the specific instances of TA that were utilized during FFY 2021.

4/24/23: Below is the information contained in the attachment labeled "Technical Assistance System ND-C FFY 2021".

Date Event Topic

July 14, 2021 ND Part C TA with Sharon Walsh, ECTA Various Topics
July 16, 2021 CIFR Central Community of Practice IDEA Part C Fiscal Responsibility
July 19-22, 2021 OSEP Leadership Conference Various Topics
July 26, 2021 Part C Dispute Resolution CoP, CADRE Dispute Resolution
July 27, 2021 ND-C COVID-19 and School Reopening, OSEP State Lead OSEP ND-TA
July 29, 2021 ITCA Member Call Various Topics
August 9, 2021 325L Community Meeting 325 L Grant
August 12, 2021 OSEP National TA Call FFY 2020 SPP/APR
August 13, 2021 Early ECHO Meeting Various EI Topics
August 23, 2021 Part C Dispute Resolution CoP, CADRE Dispute Resolution
August 26, 2021 ITCA Member Call Various Topics
August 27, 2021 ND-C COVID-19 and School Reopening, OSEP State Lead OSEP ND-TA
September 2, 2021 ND Early Childhood Division with ECTA Early Childhood Division Strategic Planning
September 9, 2021 OSEP National TA Call FFY 2020 SPP/APR
September 10, 2021 Early ECHO Meeting Various EI Topics
September 17, 2021 ND-C SSIP Review, OSEP State Lead OSEP ND-TA
September 17, 2021 ND 325L Grant Meeting REIL Grant
September 17, 2021 CIFR Central CoP Call IDEA Part C Fiscal Responsibility
September 23, 2021 ITCA Member Call Various EI Topics
September 23, 2021 National OSEP TA Call DMS 2.0
September 24, 2021 ND-C COVID-19 and School Reopening, OSEP State Lead OSEP ND-TA
October 8, 2021 Early ECHO Meeting Various EI Topics
October 13, 2021 ND Early Childhood Division with ECTA Early Childhood Division Strategic Planning
October 14, 2021 National OSEP TA Call SPP/APR
October 22, 2021 ND-C COVID-19 and School Reopening, OSEP State Lead OSEP ND-TA
October 25, 2021 Part C Dispute Resolution CoP, CADRE Dispute Resolution
October 28, 2021 ITCA Member Call Various EI Topics
October 28, 2021 National OSEP TA Call DMS 2.0
November 12, 2021 Early ECHO Meeting Various EI Topics
November 18, 2021 ND-C COVID-19 and School Reopening, OSEP State Lead OSEP ND-TA
November 19, 2021 CIFR Central CoP Call DEA Part C Fiscal Responsibility
December 1, 2021 Early Childhood Strategic Plan TA, ECTA EC Strategic Plan
December 10, 2021 Early ECHO Meeting Various EI Topics
December 13, 2021 Early Childhood Strategic Plan TA, ECTA EC Strategic Plan
December 17, 2021 325L Grant Meeting REIL Grant
December 23, 2021 ITCA Member Call Various EI Topics
December 27, 2021 Part C Dispute Resolution CoP, CADRE Dispute Resolution
January 14, 2021 Early ECHO Meeting Various EI Topics
January 28, 2022 ND-C School Re-opening Meeting OSEP OSEP ND-TA
February 8, 2022 Early Childhood Strategic Plan TA, ECTA EC Strategic Plan
February 10, 2022 OSEP National TA Call Part C Grant Application
February 11, 2022 Early ECHO Meeting Various EI Topics
February 18, 2022 CIFR Central Region COP Meeting Financial
February 24, 2022 OSEP National TA Call DMS 2.0
February 25, 2022 ND-C School Re-opening Meeting OSEP OSEP ND-TA
February 28, 2022 Part C Dispute Resolution CoP, CADRE Dispute Resolution
March 3, 2022 Early Childhood Strategic Plan TA, ECTA EC Strategic Plan
March 25, 2022 ND-C School Re-opening Meeting OSEP OSEP ND-TA
April 1, 2022 DMS 2.0 Cohort 2 TA Call DMS 2.0
April 11, 2022 Early Childhood Strategic Plan TA, ECTA EC Strategic Plan
April 15, 2022 CIFR Central Region COP Meeting Financial
April 20, 2022 OSEP APR Clarification Call OSEP ND-TA

April 24, 2022 OSEP National TA Call DMS 2.0
April 26, 2022 ND-C School Re-opening Meeting OSEP OSEP ND-TA
May 9, 2022 ND-C ND LA Change Call, OSEP State Lead OSEP ND-TA
May 26, 2022 ITCA Member Call Various EI Topics
June 1, 2022 Tennessee Quality Services Meeting EI Services
June 10, 2022 DMS 2.0 Cohort 2 Meeting DMS 2.0
June 17, 2022 ND 325L Grant Meeting REIL Grant
June 17, 2022 CIFR Central Region COP Meeting Financial
June 22, 2022 ITCA Member Call Various EI Topics
June 24, 2022 ND-C School Re-opening Meeting OSEP OSEP ND-TA
June 24, 2022 ND CIFR Call ARP Funds
June 27, 2022 Part C Dispute Resolution CoP, CADRE Dispute Resolution

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.

A bulk of our professional development is provided via videoconferencing technology. We train on a variety of topics determined by the Part C Coordinator and as requested by the field. As our budget allows, we hold an in-person conference, which has a specific track for Early Intervention, and train on a variety of topics. Service Coordinators, Early Intervention Providers, Right Track Coordinators and consultants (which perform our child find activity) attend.

During monthly Statewide Early Intervention Meetings, professional development is provided through mini-PD sessions on stakeholder-identified topics. Mini professional development sessions were provided on universal supports; the ND Correction, Compliance, and Support Process (C3P); ND Vision and Hearing Supports & Collaboration; and DEC Recommended Practices.

Creating Quality Service Coordination Services in North Dakota: Understanding IDEA Part C is a two-part video series and infographic with the goal of supporting parents, service coordinators and early intervention programs. The Partnering for Outcomes With Real Meaning (POWR) project was initiated to create local leaders and trainers around the philosophy of early intervention, assessment in early intervention, and writing meaningful outcomes.

As a result of the POWR project, the Professional Development System work continued with a stakeholder team working with technical assistance to create Authentic Assessment modules. In addition, the state TA team developed 16 assessment modules around the Routines-Based Interview. Stakeholder feedback will inform state scale-up on family assessment in FFY 2021.

The Resilient Early Intervention Leadership (REIL) Grant involves several stakeholder groups across the state of ND, including 100 cross-agency leaders in the Resilient Early Intervention Leadership Collaborative (RELC). A RELC survey was sent to the 100 cross-agency leaders, and 40 completed the survey. Overall, respondents indicated that the RELC webinars have increased their confidence and understanding of resilient leadership in early intervention. Qualitative themes from the survey focused on the importance of self-care, reflecting on internal beliefs, relationship-building in teams, and reflecting on personal goals.

Through the REIL grant, the state also supported one cohort of 18 participants (parents, tribal professionals, early interventionists, service coordinators, and early childhood partners) in obtaining a graduate Early Intervention Leadership Certificate through a partner university.

Additionally, North Dakota contracted with Robin McWilliam to provide a Routines-Based Interview (RBI) 2-day training to 35 early intervention providers, service coordinators, parents, and experienced parents. A pre and post survey was created to capture the efficacy of the training and the use of RBI in North Dakota.

The attachment labeled "Professional Development System ND-C FFY 2021" contains the specific instances of TA that were utilized during FFY 2021.

4/24/23: Below is the information contained in the attachment labeled "Professional Development System ND-C FFY 2021". It has been edited to fit in this text box.

Date Event

July 8, 2021 Region 4 EI Provider TA Discussion
July 8, 2021 Right Track Coordinators Quarterly Meeting
July 14, 2021 Regions 3&6 EI Provider TA Discussion
July 15, 2021 Data Drill Down Group Meeting
July 26, 2021 Data Drill Down Group Meeting
August 12, 2021 Data Drill Down Group Meeting
August 16, 2021 Procedures Work Group Meeting
August 17, 2021 EI Statewide Meeting
August 19, 2021 Data Drill Down Group Meeting
August 19, 2021 Provider COVID-19 Update
August 20, 2021 PD Work Group

August 31, 2021 REIL Grant CAT
August 31, 2021 Region 3 Regional Action Plan (RAP) Meeting
August 31, 2021 Region 6 Regional Action Plan (RAP) Meeting
September 2, 2021 Data Drill Down Group Meeting
September 2, 2021 Region 7 Regional Action Plan (RAP) Meeting
September 3, 2021 Region 6 Regional Support
September 9, 2021 REIL Grant Advisory Group Meeting
September 14, 2021 Regional TA Meeting
September 16, 2021 Data Drill Down Group Meeting
September 20, 2021 Procedures Work Group Meeting
September 21, 2021 Provider COVID-19 Update
September 21, 2021 EI Statewide Meeting
September 21, 2021 Mini-PD: Just In Time Case Study
September 24, 2021 Professional Development Work Group Meeting

September 27, 2021 North Dakota Early Childhood Transition
 September 28, 2021 REIL Competency Development Workgroup Meeting
 September 29, 2021 Region 5 TA Call
 September 28, 2021 Service Coordination Conference Session
 September 29, 2021 EI Service Options Conference Session
 September 29, 2021 IFSP Q&A Conference Session
 October 5, 2021 New Service Coordinator Orientation
 October 8, 2021 Regional TA Meeting
 October 15, 2021 PD Workgroup Meeting
 October 12, 2021 REIL Grant Competency Development Workgroup
 October 14, 2021 Annual ND SSI Meeting
 October 18, 2021 ND Early Childhood Transition Committee Meeting
 October 26, 2021 REIL CAT
 November 1, 2021 Region 6 RAP Meeting
 November 5, 2021 PD Workgroup Meeting
 November 9, 2021 Region 7 RAP Meeting
 November 15, 2021 Procedures Work Group Meeting
 November 16, 2021 Regional TA Meeting
 November 16, 2021 EI Statewide Meeting
 November 16, 2021 Mini-PD: DEC Recommended Practices
 November 16, 2021 REIL CAT
 November 30, 2021 ND Early Childhood Transition Committee Meeting
 December 2, 2021 Data Drill Down Group
 December 2, 2021 Parent Panel Meeting
 December 3, 2021 PD Workgroup Meeting
 December 6, 2021 Regional TA Meeting
 December 9, 2021 REIL Grant Advisory Group Meeting
 December 14, 2021 REIL Grant CAT
 December 20, 2021 Regional TA Meeting
 December 21, 2021 IFSP Transition Training Meeting
 January 4, 2022 Region 4 TA Support
 January 10, 2022 Region 5 TA Support
 January 11, 2022 Region 1 RAP Meeting
 January 11, 2022 Region 2 RAP Meeting
 January 11, 2022 Region 3 RAP Meeting
 January 13, 2022 Parent Panel APR Target Setting
 January 18, 2022 EI Statewide Meeting
 January 18, 2022 Family Assessment and SSIP Feedback Discussion
 January 20, 2022 Regional RAP Meeting
 January 21, 2022 Professional Development Workgroup Meeting
 January 25, 2022 REIL Grant Competency Development Group Meeting
 February 8, 2022 REIL Grant Competency Development Group Meeting
 February 11, 2022 PD Workgroup Meeting
 February 22, 2022 ND Early Childhood Transition Committee Meeting
 February 24, 2022 REIL Grant APR Meeting
 February 28, 2022 Procedures Work Group
 March 3, 2022 Right Track Coordinators Call
 March 8, 2022 Region 1 RAP Meeting
 March 8, 2022 Region 2 RAP Meeting
 March 8, 2022 Region 3 RAP Meeting
 March 8, 2022 REIL Grant Competency Development Group Meeting
 March 10, 2022 REIL Grant Advisory Group Meeting
 March 15, 2022 EI Statewide Meeting
 March 15, 2022 Tymp and OAE Training
 March 18, 2022 REIL Grant Work Officer Meeting
 March 25, 2022 PD Workgroup Meeting
 March 28, 2022 Procedures Work Group Meeting
 April 5, 2022 Regional RAP Meeting
 April 7, 2022 REIL Grant APR Meeting
 April 7, 2022 New Service Coordinator Orientation
 April 7, 2022 Right Track Coordinators Call
 April 25, 2022 Procedures Work Group Meeting
 April 28, 2022 Data Drill Down Group Call
 May 3, 2022 Region 1 RAP Meeting
 May 3, 2022 Region 2 RAP Meeting
 May 10, 2022 Data Guidance Meeting
 May 17, 2022 EI Statewide Meeting
 May 17, 2022 Mini PD: Universal Support Strategies
 May 19, 2022 Regional RAP Meeting
 May 20, 2022 PD Workgroup Meeting
 May 20, 2022 REIL Grant Competency Development Workgroup Meeting
 May 23, 2022 Procedures Work Group
 May 26, 2022 Data Drill Down Group
 June 2, 2022 Right Track Coordinators Call
 June 7, 2022 IFSP Case Notes Training
 June 9, 2022 REIL Grant Advisory Meeting
 June 10, 2022 PD Workgroup Meeting

June 16, 2022 IFSP Case Notes Training
June 16, 2022 Data Drill Down Group
June 20, 2022 Procedures Work Group
June 27, 2022 Regional RAP Meeting
June 28, 2022 Regional RAP Meeting

Broad Stakeholder Input:

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

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

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

YES

Number of Parent Members:

15

Parent Members Engagement:

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

Parent Panel: The Parent Panel was made up of five (5) parents from across the state who showed interest in reviewing the APR Targets and providing feedback to ND HHS. The Part C Coordinator spoke with each parent to determine the best time to meet, including offering evening and weekend times. The Parent Panel was able to meet with four (4) members on December 2, 2021 and one (1) member on January 13, 2022. The Part C Coordinator shared materials prior to the meetings that explained the APR targets, the purpose of the target setting activities, and the proposed targets. During the meeting, the Part C Coordinator encouraged members to speak up if they had questions or needed clarification. Many members did, and a great discussion was had about all indicators, but particularly the child and family outcomes (Indicators 3 and 4). The group suggested that ND HHS adopt the preliminary targets.

Data Drill Down stakeholder work group: The Data Drill Down stakeholder work group met six times during September and October 2021 to review, analyze and set preliminary targets for Indicators 2,3,4,5 and 6. This group is made up of a diverse group of stakeholders, including service coordinators, Infant Development coordinators, and Primary Early Intervention Providers. Some of the members on this group are also parents of children in Early Intervention. The Data Drill Down group considered trend performance and target data for the past seven (7) years of APRs, average performance and change over the last five (5) years, and other contributing factors, including COVID-19, when setting targets.

ND ICC: The ND ICC met on September 14, 2021 to review the preliminary targets set by the Data Drill Down work group. The ND ICC reviewed the preliminary targets, as well as trend performance and target data for the last five (5) years of APRs. The group discussed potential changes to the targets, and suggested to ND HS to adopt the targets as suggested by the Data Drill Down work group. On December 8, 2022, the ND ICC met and reviewed FFY 2021 APR Data, including the targets, and voted to adopt the data as their report to the Governor.

Caregiver Survey: In addition, the state engages families and caregivers through a survey process to learn about their experiences and create future strategies. In FFY 2021, the response rate grew to over 140 caregiver responses, indicating an overwhelming increase in parent and caregiver participation.

Activities to Improve Outcomes for Children with Disabilities:

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

The ND ICC identified a need to engage parents regularly prior to ND ICC meetings to ensure that parents are understanding all agenda items, and to provide guidance around agenda items so that parents feel confident to engage in meaningful dialogue during the ND ICC meetings. The group created a Membership subcommittee to create mentorship opportunities for new parent members, as well as creating trainings for new members around

common topics during meetings (i.e. APR Data, SSIP, Part C Budget, etc.). This group has developed a welcome kit for members, set up a mentorship program, and has begun to develop a library of family stories to be shared at ICC meetings.

The Parent Panel was created to engage parents from across the state in providing feedback and dialogue around ND Part C. This group will meet quarterly beginning in March 2023 to discuss "hot topics" in ND Part C, including peer-to-peer support, Family Outcomes Survey, and Child Outcomes, among other topics. To encourage participation from diverse groups of parents and remove barriers, this group will receive a stipend, and meetings will be available to be scheduled at times convenient to parents, including evenings and weekends, if desired.

The Resilient Early Intervention Leadership Grant initiative builds a tiered, sustainable system of leadership opportunities to increase the capacity of leaders across the state, region, and local early childhood system. The ND EI leadership program, Resilient Early Intervention Leaders (REIL), supports 100 cross-agency leaders, including parents and tribal entities, in a multiyear learning collaborative and 36 interdisciplinary professionals in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Soliciting Public Input:

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

Public input, specifically engaging caregivers within the system, is sought throughout the year in several ways.

The Data Drill Down group is asked to invite additional participants to attend meetings, and specifically to pass information of meetings along to parents who may be interested in attending.

The ND ICC Meetings are public, and public notice of meetings as well as agenda topics, is made prior to meeting dates. This notice is posted on the nd.gov website and shared with a newspaper in each region of ND. As with the Data Drill Down group, the ND ICC is encouraged to invite additional participants to attend meetings.

The SSP/APR is posted to the ND EI Website annually.

The Resilient Early Intervention Leadership Grant (REIL Grant) has two stakeholder advisory groups that meet regularly to provide feedback on building a sustainable system of leadership opportunities to increase capacity across the early childhood system in North Dakota. Public notice of meetings and agenda topics is made prior to meeting dates, and is posted on the nd.gov website.

Making Results Available to the Public:

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

The results of the target setting activities and the SSIP improvement strategies were shared with the public at the ND ICC Meeting on 12/16/21 and through the minutes of the ICC meeting, available on the ND EI Website. Additionally, the PowerPoint presentation used to discuss the FFY 2020-2025 targets is posted to the ND EI Website.

The SPP/APR and SSIP are posted to the ND EI Website annually.

The attachment labeled "FFY 2020-2025 Target Setting ND-C FFY 2021" contains links to these items.

4/24/23:

As of 3/15/23, the old ND Early Intervention website has been discontinued. Below is the updated link that contains information about Target Setting.
<https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/PartC/ffy-2020-2025-target-setting-ppt.pdf>

Reporting to the Public:

How and where the State reported to the public on the FFY 2020 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 2020 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 2020 APR in 2022, is available.

All required public information is contained on the ND Early Intervention website under the "Part C Info" tab.

The FFY 2020 APR and SPP are posted on the new Early Intervention website under the "ND Part C State Performance Plan/Annual Performance Report" accordion tab.

In addition to the posting on the website, this information is shared with the ND Interagency Coordinating Council, at the meeting following the receipt of the ND Part C Level of Determination. The local program Levels of Determination are shared with the ND Interagency Coordinating Council at the meeting that takes place once the local programs have received their determinations and have had the time and opportunity to share any concerns with the Part C Coordinator.

The ND Part C Level of Determination is shared with the Service Coordinators & Early Intervention providers during a video conferencing session, after receipt of the State's level of determination. After the providers have received their individual determinations and have had the time and opportunity to express concerns with the Part C Coordinator, the local program Levels of Determination are shared with Service Coordinators & Early Intervention providers during a video conference session.

The attachment labeled "Public Reporting information ND-C FFY 2021" contains links to these items.

4/24/23:

As of 3/15/23, the old ND Early Intervention website has been discontinued. The new ND Early Intervention website contains all public reporting information, under the Federal Reporting tab:
<https://www.hhs.nd.gov/early-childhood-services/early-intervention/federal-reporting>

Intro - Prior FFY Required Actions

None

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 2021 SPP/APR, the data for FFY 2020), 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	59.26%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	97.43%	96.70%	98.24%	98.41%	98.65%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,244	1,439	98.65%	100%	96.80%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

In FFY 2021, North Dakota identified two providers in the largest region of the state who had a large amount of delayed services due to agency reasons. These two providers account for 28 of the 46 instances, or 61%, of delayed services. This region had a large amount of staff turnover in FFY 2021, resulting in the increased amount of delayed service for these two providers and the slippage identified in the FFY 2021 APR. The two providers will participate in a the Regional Action Plan (RAP) process, which will help to identify and remedy systemic issues around timely services.

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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Provide reasons for delay, if applicable.

For FFY 2021, North Dakota had 46 instances of delayed services due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, 36 instances of delayed services were due to agency oversight, five (5) were due to agency illness, and five (5) were due to agency shortage.

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).

For North Dakota, timely initiation of service is defined as the service happening on or before the date agreed upon at the IFSP meeting and documented in the "services" section of the IFSP.

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

State database

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

July 1, 2021-June 30, 2022

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

Data for Indicator 1 is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting in Indicator 1, using Therap, for FFY 2021.

In FFY 2021 North Dakota had 15 early intervention providers across the state. The performance of all 15 of these providers is represented in this data.

Provide additional information about this indicator (optional)

For FFY 2021, North Dakota had 46 instances of delayed services due to agency reasons. North Dakota requires agencies to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, 36 instances of delayed services were due to agency oversight, five (5) were due to agency illness, and five (5) were due to agency shortage. In the case of all 46 instances, the services on the IFSP began, although late.

In FFY 2021, North Dakota identified two providers in the largest region of the state who had a large amount of delayed services due to agency reasons. These two providers account for 28 of the 46 instances, or 61%, of delayed services. This region had a large amount of staff turnover in FFY 2021, resulting in the increased amount of delayed service for these two providers and the slippage identified in the FFY 2021 APR. The two providers will participate in a the Regional Action Plan (RAP) process with the state Technical Assistance provider which will help to identify and remedy systemic issues around timely services.

The remaining 18 instances of delayed services were attributable to an additional seven (7) providers.

Indicator 1 FFY 2021 noncompliance was discovered through the APR data review process and was verified on November 14, 2022. On January 24, 2023, a Letter of Findings was issued to all nine (9) providers who had at least one instance of delayed services due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

For FFY 2020, North Dakota issued a Letter of Findings to seven (7) providers due to having at least one instance of delay due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are

reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to seven (7) providers. Correction was verified according to Federal requirements. All seven (7) findings were verified as corrected on September 9, 2022. Of the seven (7) providers, four (4) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. The remaining three (3) providers demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

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

For FFY 2020, North Dakota issued a Letter of Findings to seven (7) providers due to having at least one instance of delay due to an agency reason.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in 15 of the 15 individual cases the children received their service, although late. Individual instances of noncompliance were verified as corrected for all programs on May 31, 2022. Correction was verified according to Federal requirements. All seven (7) findings were verified as corrected on September 9, 2022.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

For FFY 2020, North Dakota issued a Letter of Findings to seven (7) providers due to having at least one instance of delay due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to seven (7) providers. Correction was verified according to Federal requirements. All seven (7) findings were verified as corrected on September 9, 2022. Of the seven (7) providers, four (4) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. The remaining three (3) providers demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in 15 of the 15 individual cases the children received their service, although late. Individual instances of noncompliance were verified as corrected for all programs on May 31, 2022. Correction was verified according to Federal requirements. All seven (7) findings were verified as corrected on September 9, 2022.

1 - OSEP Response

1 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	98.26%

FFY	2016	2017	2018	2019	2020
Target>=	99.30%	99.30%	99.70%	99.80%	99.82%
Data	100.00%	100.00%	99.93%	100.00%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	99.82%	99.84%	99.86%	99.88%	99.90%

Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,614
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	1,616

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,614	1,616	100.00%	99.82%	99.88%	Met target	No Slippage

Provide additional information about this indicator (optional).

For FFY 2021, the total number of infants and toddlers with an IFSP increased to 1616 as compared to 1487 in FFY 2020. There were 129 more infants and toddlers with IFSPs in the child count this year as compared to FFY 2020.

For FFY 2021, two infants or toddlers received the majority of their early intervention services outside of a home or community-based setting, which is an increase from FFY 2020, when no infants or toddlers received the majority of their early intervention services outside of a home or community-based setting.

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

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2008	Target>=	38.00%	39.10%	39.20%	60.50%	70.00%
A1	33.30%	Data	72.04%	72.14%	71.96%	82.80%	86.91%
A2	2008	Target>=	45.00%	45.10%	60.40%	60.50%	61.50%
A2	60.30%	Data	43.42%	37.50%	67.27%	69.40%	75.60%
B1	2008	Target>=	61.40%	61.50%	62.50%	62.60%	62.70%
B1	47.50%	Data	66.67%	67.09%	64.11%	62.85%	72.81%
B2	2008	Target>=	46.50%	46.60%	52.10%	52.20%	55.80%
B2	52.00%	Data	36.96%	33.23%	51.80%	55.80%	62.65%
C1	2008	Target>=	67.70%	67.80%	68.80%	68.90%	69.50%
C1	64.80%	Data	78.30%	77.95%	69.54%	72.89%	82.51%
C2	2008	Target>=	68.20%	68.30%	81.00%	81.10%	81.10%
C2	80.90%	Data	57.78%	55.49%	73.38%	76.66%	80.51%

Targets

FFY	2021	2022	2023	2024	2025
Target A1>=	70.00%	71.00%	72.00%	73.00%	74.00%
Target A2>=	61.50%	62.50%	63.50%	64.50%	65.50%
Target B1>=	62.70%	63.20%	63.70%	64.20%	64.70%

Target B2>=	55.80%	56.30%	56.80%	57.30%	57.80%
Target C1>=	69.50%	70.00%	70.50%	71.00%	71.50%
Target C2>=	81.10%	81.20%	81.30%	81.40%	81.50%

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

780

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	9	1.15%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	105	13.46%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	125	16.03%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	434	55.64%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	107	13.72%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	559	673	86.91%	70.00%	83.06%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	541	780	75.60%	61.50%	69.36%	Met 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	7	0.90%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	234	30.00%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	74	9.49%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	406	52.05%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	59	7.56%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	480	721	72.81%	62.70%	66.57%	Met target	No Slippage

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	465	780	62.65%	55.80%	59.62%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	3	0.38%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	110	14.10%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	68	8.72%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	404	51.79%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	195	25.00%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	472	585	82.51%	69.50%	80.68%	Met target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	599	780	80.51%	81.10%	76.79%	Did not meet target	Slippage

Provide reasons for C2 slippage, if applicable

Due to the COVID-19 Public Health Emergency, providers have reported that families are spending less time with individuals outside of their households. This has impacted Indicator 3C- Summary Statement 2 due to the fact that children are spending less time with their same-age peers and being able to practice appropriate behaviors. Providers are reporting that spending extended time inside of their homes has also impacted children's use of appropriate behaviors.

In FFY 2021, 125 individuals completed an Interrater Reliability training course for the AEPS. This course ensured that all providers were administering the AEPS consistently within their program and across the state. It is believed that this training has helped to stabilize and increase validity and reliability in the data.

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	1,312
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.	237

Sampling Question	Yes / No
Was sampling used?	NO

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

NO

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

North Dakota replaced the child outcomes assessment tool in the fall of 2017, with the Assessment, Evaluation, and Programming System (AEPS) after significant planning for several years to replace the Oregon Early Childhood Assessment Tool (Oregon). The Oregon Tool is no longer being utilized and supported by its creators, therefore, had limited criteria for defining "comparable to same-aged peers," no continued support for calculating cut-offs, and no formalized training available. North Dakota began using the AEPS and entering data in the AEPSi data system on 10.2.17.

North Dakota's new child outcomes tool, the AEPS (Bricker, 2002), is a curriculum-based assessment. To meet the Office of Special Education Programs (OSEP) Child Outcome reporting requirements, specific AEPS Test items were aligned to the three OSEP Child Outcomes. Further empirically derived same-age peer benchmarks were generated to address Near Entry (originally called Time 1) and Near Exit (originally called Time 2) OSEP Reporting Categories. The AEPS Test same-age peer benchmarks were constructed using a national non-random sample of children identified as typically developing with the chronological ages of birth to 5 years inclusive (i.e. 0-72 months). The sample consisted of 571 children on whom the Birth to Three Level of the AEPS Test was completed and 1307 children on whom the Three to Six Level of the AEPS Test was completed.

This is North Dakota's fourth APR year of reporting the AEPS data for this indicator, and the first year a full cohort of children on the AEPS is being reported.

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

North Dakota began using the AEPS as an evaluation/assessment tool and entering data into the AEPSi data system on 10.2.17. Staff received training in June 2017 and were able to pilot the system for the months of July-September 2017. Procedures for using the new tool for Indicator 3 were written in October 2017 and updated on 10.2.18. Staff enter entry/exit data into the publisher's online system (AEPSi) online tool. Entry of data occurs by staff online. Initial child outcome assessment is completed and entered into the data system by early intervention providers or the Service Coordinator (DDPM) prior to eligibility, and exit data is entered for children who have been receiving services for at least 6 months. Exit data must be entered within 30 days of the child's third birthday, and if the exit date is unexpected, the exit data must be entered within 30 days of the exit. The Service Coordinator (DDPM) is responsible to ensure completion of the tool by local early intervention providers. Any child referred on or after 10.2.17 has their entry and exit using the AEPS.

This is North Dakota's fourth APR year of reporting the AEPS data for this indicator, and the first year a full cohort of children on the AEPS is being reported.

In FFY 2021, there was a decrease in performance in each of the six summary statements, and slippage was identified in Summary Statement C2. After analysis of the data and through discussion with EIS providers, it appears that this is due to two factors: 1) The COVID-19 public health emergency, and 2) stabilizing of AEPS data with the full cohort.

Due to the COVID-19 public health emergency, the majority of services were provided virtually during FFY 2019, FFY 2020 and the first half of FFY 2021. As this indicator measures progress over time, it is important to note that the children included in this cohort received most of their services during the COVID-19 public health emergency, and thus received the majority of these services virtually. Families and EIS providers have reported that the inability to interact with individuals outside of their household during the COVID-19 public health emergency impacted their child's development, and this is believed to be reflected in FFY 2021 child outcomes data.

In FFY 2021, 125 individuals completed an Interrater Reliability training course for the AEPS. This course ensured that all providers were administering the AEPS consistently within their program and across the state. It is believed that this training has helped to stabilize and increase validity and reliability in the data.

Provide additional information about this indicator (optional).

Timely completion of the AEPS continued without interruption during the transition to virtual services due to COVID-19. As the AEPS is a criterion-referenced assessment, it was able to be conducted virtually without any accommodations or changes needing to be made to the administration.

To support fidelity when using the AEPS, interrater reliability training was offered to all programs across the state during FFY 2020 and was completed during FFY 2021.

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 and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

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

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2006	Target>=	87.70%	87.80%	88.20%	90.00%	97.50%
A	88.12 %	Data	98.77%	98.08%	98.45%	97.12%	98.11%
B	2006	Target>=	93.30%	93.40%	94.00%	94.10%	98.00%
B	###C04BBA SEDA TA###	Data	100.00%	98.63%	99.07%	99.33%	99.05%
C	2006	Target>=	91.90%	92.00%	92.60%	92.70%	97.50%

C	85.79 %	Data	99.38%	98.36%	98.76%	97.78%	99.05%
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Targets

FFY	2021	2022	2023	2024	2025
Target A>=	97.50%	97.70%	97.90%	98.10%	98.30%
Target B>=	98.00%	98.30%	98.60%	98.90%	99.20%
Target C>=	97.50%	97.70%	97.90%	98.10%	98.30%

Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	1,564
Number of respondent families participating in Part C	657
Survey Response Rate	42.01%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	648
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	657
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	650
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	657
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	646
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	657

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 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)	98.11%	97.50%	98.63%	Met target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	99.05%	98.00%	98.93%	Met target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	99.05%	97.50%	98.33%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

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

The state continues dedicated work to increase the return rate and representativeness of the family survey through a family survey subcommittee of the ICC, which began its work in September 2018. The Part C Coordinator has also worked to gather feedback from Early Intervention professionals in the state to examine the best methodology for increasing representativeness.

The ICC previously focused on increasing the return rate of American Indian families; however, the return rate has been representative for the last two years. The ICC will adjust their focus to determine how to decrease the likelihood that families self-identify their race differently on the IFSP and the family survey to continue to provide more accurate and reliable data for Indicator 4.

To continue to increase representativeness in survey responses, in FFY 2021, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. The online version of the survey received 506 of the 657 total responses (77.02%), and the paper version received 151 of the 657 total responses (22.98%). The percentage of individuals utilizing the online version of the survey increased in FFY 2021. Languages other than English were utilized for both the online and paper versions of the survey. The online version of the survey received comments on approximately 90% of responses, where the paper version received comments on only approximately 30% of responses.

Survey Response Rate

FFY	2020	2021
Survey Response Rate	34.04%	42.01%

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

North Dakota met its target in A) Percent of families participating in Part C who report that early intervention services have helped the family know their rights with a increase to 98.63% in FFY 2021 from 98.11% in FFY 2020. North Dakota met its target in B) Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs with a slight decrease to 98.93% in FFY 2021 from 99.05% in FFY 2020. North Dakota met its target in C) Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn, with a slight decrease to 98.33% in FFY 2021 from 99.05% in FFY 2020. A total of 657 surveys were returned in FFY 2021 which is an increase of 128 surveys from FFY 2020, when 529 surveys were returned. The return rate increased to 42.01% in FFY 2021 from 34.04% in FFY 2020.

In FFY 2021, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. Families of children who received services for at least three months between January 1, 2022, and March 31, 2022, were eligible to receive the survey. Service Coordinators (DDPMs) and Primary Early Intervention Providers (PEIPs) worked together to determine which families were eligible to receive the survey and submit the number of surveys needed to the state office by July 15. One survey or survey link per child was delivered, dependent on the caregiver that interacts most with the child. If there were siblings (foster or biological) receiving early intervention services, the family would receive one survey for each child. A sample script was created for the PEIP to share with the family. PEIPs documented the method of distribution on a Family Survey Response Tracking Form for the Part C Coordinator. The PEIPs followed up with the family at the next home visit after delivering the survey to answer any questions the family had and encouraged them to complete the survey. The survey was returned to the state office via postal mail or completed online via Microsoft Forms.

The ECO Family Outcomes Survey-Revised (FOS-R) was used, and it included a cover letter and newsletter with the FFY 2020 results and information. On the survey, the family self-reports their regional human service center, EI services provider, and race/ethnicity. At the end of the collection period, all surveys returned to the state office were scanned for data collection by the state Part C Coordinator. The Part C Coordinator worked with the NDIIT department to compile the online survey data and integrate it with the paper survey data.

Based on the electronic record, there were 1564 families whose child was in service for at least three months between January 1, 2022, and March 21, 2022, and therefore eligible to receive a survey. A total of 657 surveys were returned in FFY 2021 which is an increase of 128 surveys from FFY 2020, when 529 surveys were returned. The return rate increased to 42.01% in FFY 2021 from 34.04% in FFY 2020.

The online version of the survey received 506 of the 657 total responses (77.02%), and the paper version received 151 of the 657 total responses (22.98%). The percentage of individuals utilizing the online version of the survey increased in FFY 2021. Languages other than English were utilized for both the online and paper versions of the survey. The online version of the survey received comments on approximately 90% of responses, where the paper version received comments on only approximately 30% of responses.

The following is the return rate for each race/ethnicity as compared to children in the program:

American Indian/AK Native: Returned 6.54%, In Program 9.34% (6.34-12.34% is representative)
Asian: Returned 1.83%, In Program 1.02% (0-4.02% is representative)
Black/African American: Returned 1.32%, In Program 3.91% (0.91-4.32% is representative)
Hispanic or Latino: Returned 2.74%, In Program 4.35% (1.35-7.35% is representative)
Native Hawaiian or Pacific Islander: Returned 0.15%, In Program 0.32% (0-3.32% is representative)
White: Returned 76.41%, In Program 67.90% (64.90-70.90% is representative)
More than One Race: Returned, 5.63% In Program 12.72% (9.72-15.72% is representative)

Based on the information above, in FFY 2021, the response rate was representative for American Indian/AK Native, Asian, Black/African American, Hispanic or Latino, and Native Hawaiian or Pacific Islander. The strong representativeness for the majority of race categories is believed to be due to the survey being made available in multiple languages and in two formats (online and paper) to meet the needs of diverse families.

In FFY 2021, White was over representative. North Dakota has historically had an over representation in the response rate for White.

In FFY 2020, More Than One Race was considered representative, but was under representative in FFY 2021. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories on the IFSP and on the family survey. This has historically caused fluctuation in the More Than One Race category.

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

North Dakota analyzed response rates of each racial demographic against the percent of children of that racial demographic enrolled in the Part C program, as of November 1, 2022, 618 Table 1 Point-In-Time data. In FFY 2021, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. Families of children who received services for at least three months between January 1, 2022, and March 31, 2022, were eligible to receive the survey. Service Coordinators (DDPMs) and Primary Early Intervention Providers (PEIPs) worked together to determine which families were eligible to receive the survey and submit the number of surveys needed to the state office by July 15. One survey or survey link per child was delivered, dependent on the caregiver that interacts most with the child. If there were siblings (foster or biological) receiving early intervention services, the family would receive one survey for each child. A sample script was created for the PEIP to share with the family. PEIPs documented the method of distribution on a Family Survey Response Tracking Form for the Part C Coordinator. The PEIPs followed up with the family at the next home visit after delivering the survey to answer any questions the family had and encouraged them to complete the survey. The survey was returned to the state office via postal mail or completed online via Microsoft Forms.

The survey response rate for each racial category was analyzed and it was determined that for the categories that are over or under representative, the difference between the response rate and the range of representativeness was not significant enough to cause nonresponse bias. While the category of More Than One Race has a large difference between the response rate and the range of representativeness, this to be expected. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories on the IFSP and on the family survey. This has historically caused fluctuation in the More Than One Race category.

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

The following is the return rate for each race/ethnicity as compared to children in the program as of 11/1/22 (618 Table 1 PIT data):

American Indian/AK Native: Returned 6.54%, In Program 9.34% (6.34-12.34% is representative)
Asian: Returned 1.83%, In Program 1.02% (0-4.02% is representative)
Black/African American: Returned 1.32%, In Program 3.91% (0.91-4.32% is representative)
Hispanic or Latino: Returned 2.74%, In Program 4.35% (1.35-7.35% is representative)
Native Hawaiian or Pacific Islander: Returned 0.15%, In Program 0.32% (0-3.32% is representative)
White: Returned 76.41%, In Program 67.90% (64.90-70.90% is representative)
More than One Race: Returned, 5.63% In Program 12.72% (9.72-15.72% is representative)

Based on the information above, in FFY 2021, the response rate was representative for American Indian/AK Native, Asian, Black/African American, Hispanic or Latino, and Native Hawaiian or Pacific Islander. The strong representativeness for the majority of race categories is believed to be due to the survey being made available in multiple languages and in two formats (online and paper) to meet the needs of diverse families.

In FFY 2021, White was over representative. North Dakota has historically had an over representation in the response rate for White.

In FFY 2020, More Than One Race was considered representative, but was under representative in FFY 2021. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories on the IFSP and on the family survey. This has historically caused fluctuation in the More Than One Race category.

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

North Dakota analyzed response rates of each racial demographic against the percent of children of that racial demographic enrolled in the Part C program, as of November 1, 2022, 618 Table 1 Point-In-Time data. Representativeness is considered +/-3% when compared to percent of children of that racial demographic enrolled in the Part C program.

Provide additional information about this indicator (optional).

4 - Prior FFY Required Actions

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

Response to actions required in FFY 2020 SPP/APR

North Dakota met its target in A) Percent of families participating in Part C who report that early intervention services have helped the family know their rights with an increase to 98.63% in FFY 2021 from 98.11% in FFY 2020. North Dakota met its target in B) Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs with a slight decrease to 98.93% in FFY 2021 from 99.05% in FFY 2020. North Dakota met its target in C) Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn, with a slight decrease to 98.33% in FFY 2021 from 99.05% in FFY 2020. A total of 657 surveys were returned in FFY 2021 which is an increase of 128 surveys from FFY 2020, when 529 surveys were returned. The return rate increased to 42.01% in FFY 2021 from 34.04% in FFY 2020.

In FFY 2021, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. Families of children who received services for at least three months between January 1, 2022, and March 31, 2022, were eligible to receive the survey. Service Coordinators (DDPMs) and Primary Early Intervention Providers (PEIPs) worked together to determine which families were eligible to receive the survey and submit the number of surveys needed to the state office by July 15. One survey or survey link per child was delivered, dependent on the caregiver that interacts most with the child. If there were siblings (foster or biological) receiving early intervention services, the family would receive one survey for each child. A sample script was created for the PEIP to share with the family. PEIPs documented the method of distribution on a Family Survey Response Tracking Form for the Part C Coordinator. The PEIPs followed up with the family at the next home visit after delivering the survey to answer any questions the family had and encouraged them to complete the survey. The survey was returned to the state office via postal mail or completed online via Microsoft Forms.

The ECO Family Outcomes Survey-Revised (FOS-R) was used, and it included a cover letter and newsletter with the FFY 2020 results and information. On the survey, the family self-reports their regional human service center, EI services provider, and race/ethnicity. At the end of the collection period, all surveys returned to the state office were scanned for data collection by the state Part C Coordinator. The Part C Coordinator worked with the NDIT department to compile the online survey data and integrate it with the paper survey data.

Based on the electronic record, there were 1564 families whose child was in service for at least three months between January 1, 2022, and March 21, 2022, and therefore eligible to receive a survey. A total of 657 surveys were returned in FFY 2021 which is an increase of 128 surveys from FFY 2020, when 529 surveys were returned. The return rate increased to 42.01% in FFY 2021 from 34.04% in FFY 2020.

The online version of the survey received 506 of the 657 total responses (77.02%), and the paper version received 151 of the 657 total responses (22.98%). The percentage of individuals utilizing the online version of the survey increased in FFY 2021. Languages other than English were utilized for both the online and paper versions of the survey. The online version of the survey received comments on approximately 90% of responses, where the paper version received comments on only approximately 30% of responses.

The following is the return rate for each race/ethnicity as compared to children in the program:

American Indian/AK Native: Returned 6.54%, In Program 9.34% (6.34-12.34% is representative)
Asian: Returned 1.83%, In Program 1.02% (0-4.02% is representative)
Black/African American: Returned 1.32%, In Program 3.91% (0.91-4.32% is representative)
Hispanic or Latino: Returned 2.74%, In Program 4.35% (1.35-7.35% is representative)
Native Hawaiian or Pacific Islander: Returned 0.15%, In Program 0.32% (0-3.32% is representative)
White: Returned 76.41%, In Program 67.90% (64.90-70.90% is representative)
More than One Race: Returned, 5.63% In Program 12.72% (9.72-15.72% is representative)

Based on the information above, in FFY 2021, the response rate was representative for American Indian/AK Native, Asian, Black/African American, Hispanic or Latino, and Native Hawaiian or Pacific Islander. The strong representativeness for the majority of race categories is believed to be due to the survey being made available in multiple languages and in two formats (online and paper) to meet the needs of diverse families.

In FFY 2021, White was over representative. North Dakota has historically had an over representation in the response rate for White.

In FFY 2020, More Than One Race was considered representative, but was under representative in FFY 2021. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories on the IFSP and on the family survey. This has historically caused fluctuation in the More Than One Race category.

4 - OSEP Response

4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	1.58%

FFY	2016	2017	2018	2019	2020
Target >=	2.00%	2.10%	2.20%	2.24%	2.30%
Data	2.29%	2.31%	2.35%	2.43%	2.24%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	2.30%	2.32%	2.34%	2.36%	2.38%

Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	278
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	9,740

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
278	9,740	2.24%	2.30%	2.85%	Met target	No Slippage

Provide additional information about this indicator (optional)

On November 1st, 2021, there were 278 children birth to one year of age with IFSPs in North Dakota, an increase of 44 children from FFY 2020. The number of children served is from Table 1 (618 data). The population of children birth to one year of age was 9,740, a decrease of 719 children from FFY 2020.

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.

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	3.02%

FFY	2016	2017	2018	2019	2020
Target >=	3.43%	3.43%	3.46%	3.48%	4.35%
Data	3.73%	4.17%	4.62%	4.88%	4.76%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	4.35%	4.65%	4.95%	5.25%	5.25%

Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	1,616
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 3	30,220

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,616	30,220	4.76%	4.35%	5.35%	Met target	No Slippage

Provide additional information about this indicator (optional).

On November 1st, 2021, there were 1,616 children birth to three years of age with IFSPs in North Dakota, an increase of 129 children from FFY 2020. The number of children served is from Table 1 (618 data). The population of children birth to one year of age was 30,220, a decrease of 1,042 children from FFY 2020.

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 2021 SPP/APR, the data for FFY 2020), 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	39.39%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	98.00%	97.84%	98.94%	99.02%	99.67%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,082	1,274	99.67%	100%	99.45%	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.

185

Provide reasons for delay, if applicable.

For FFY 2021, North Dakota had 7 instances where an initial IFSP meeting was not conducted within the 45-day timeline due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, five (5) instances of delayed services were due to agency oversight, two (2) were due to agency illness, and zero (0) were due to agency shortage.

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

State database

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

July 1, 2021- June 30, 2022

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

Data for Indicator 7 is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting in Indicator 7, using Therap, for FFY 2021.

In FFY 2021, North Dakota had 15 early intervention providers across the state. The performance of all 15 of these providers is represented in this data.

Provide additional information about this indicator (optional).

For FFY 2021, North Dakota had seven (7) instances where an initial IFSP meeting was not conducted within the 45-day timeline due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, five (5) instances of delayed services were due to agency oversight, two (2) were due to agency illness, and zero (0) were due to agency shortage. In the case of all seven (7) instances, the initial IFSP meeting was held, although late.

The seven (7) instances where an initial IFSP meeting was not conducted within the 45-day timeline due to an agency reason are attributed to five (5) providers.

Indicator 7 FFY 2021 noncompliance was discovered through the APR data review process and was verified on November 25, 2022. On January 24, 2023, a Letter of Findings was issued to all five (5) providers who had at least one instance where an initial IFSP meeting was not held within the 45-day timeline due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

For FFY 2020, North Dakota issued a Letter of Findings to three (3) providers due to having at least one instance where an initial IFSP was not held within the 45-day timeline due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to three (3) providers. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022. Of the three (3) providers, two (2) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. The remaining one (1) provider demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

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

For FFY 2020, North Dakota issued a Letter of Findings to three (3) providers due to having at least one instance where an initial IFSP was not held within the 45-day timeline due to an agency reason.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in four (4) of the four (4) individual cases the initial IFSP meeting was held, although late. Individual instances of noncompliance were verified as corrected for all programs on May 31, 2022. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

7 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

For FFY 2020, North Dakota issued a Letter of Findings to three (3) providers due to having at least one instance where an initial IFSP was not held within the 45-day timeline due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to three (3) providers. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022. Of the three (3) providers, two (2) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. The remaining one (1) provider demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in four (4) of the four (4) individual cases the initial IFSP meeting was held, although late. Individual instances of noncompliance were verified as corrected for all programs on May 31, 2022. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022.

7 - OSEP Response

7 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

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

Account for timely 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 2021 SPP/APR, the data for FFY 2020), 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	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	95.92%	98.09%	97.06%	99.17%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
134	139	99.17%	100%	98.56%	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.

3

Provide reasons for delay, if applicable.

For FFY 2021, North Dakota had two (2) instances where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, one (1) instance of missing transition steps and services was due to agency oversight, one (1) was due to agency illness, and zero (0) were due to agency shortage.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

A data set for Indicator 8A is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8A, using Therap, for FFY 2021. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 139 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2021, North Dakota had 15 early intervention programs across the state. The performance of all 15 of these programs is represented in this data.

Provide additional information about this indicator (optional)

For FFY 2021, North Dakota had two (2) instances where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, one (1) instance of missing transition steps and services was due to agency oversight, one (1) was due to agency illness, and zero (0) were due to agency shortage. In the case of all two (2) instances, at the time of discovery, the child was no longer in the jurisdiction of the early intervention provider.

The two (2) instances where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason are attributed to two (2) providers.

Indicator 8a FFY 2021 noncompliance was discovered through the APR data review process and was verified on January 10, 2023. On January 24, 2023, a Letter of Findings was issued to all two (2) providers who had at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

Correction of Findings of Noncompliance Identified in FFY 2020

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 2020 Findings of Noncompliance Verified as Corrected

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

For FFY 2020, North Dakota issued a Letter of Findings to one (1) provider due to having at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022, to one (1) provider. Correction was verified according to Federal requirements. The finding was verified as corrected on September 9, 2022. The provider demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

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

For FFY 2020, North Dakota issued a Letter of Findings to one (1) provider due to having at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in one (1) of the one (1) individual cases, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for the program on May 31, 2022. Correction was verified according to Federal requirements. The single finding was verified as corrected on September 9, 2022.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

For FFY 2020, North Dakota issued a Letter of Findings to one (1) provider due to having at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to one (1) provider. Correction was verified according to Federal requirements. The finding was verified as corrected on September 9, 2022. The provider demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in one (1) of the one (1) individual cases, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for the program on May 31, 2022. Correction was verified according to Federal requirements. The single finding was verified as corrected on September 9, 2022.

8A - OSEP Response

8A - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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:

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

- 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.
- 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.
- 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 timely 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 2021 SPP/APR, the data for FFY 2020), 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	95.52%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	93.41%	88.71%	85.00%	89.71%	NVR

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
111	139	NVR	100%	93.28%	Did not meet target	N/A

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.

20

Provide reasons for delay, if applicable.

For FFY 2021, North Dakota had eight (8) instances where a child's record did not contain record of an LEA Notification due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, eight (8) instances of missing LEA Notification were due to agency oversight, zero (0) were due to agency illness, and zero (0) were due to agency shortage.

Describe the method used to collect these data.

A data set for Indicator 8B is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8B using Therap, for FFY 2021. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 139 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2021, North Dakota had 15 early intervention programs across the state. The performance of all 15 of these programs is represented in this 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.

A data set for Indicator 8B is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8B using Therap, for FFY 2021. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 139 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2021, North Dakota had 15 early intervention programs across the state. The performance of all 15 of these programs is represented in this data.

Provide additional information about this indicator (optional).

For FFY 2021, North Dakota had eight (8) instances where a child's record did not contain evidence of an LEA Notification due to an agency reason. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, eight (8) instances of missing LEA Notification were due to agency oversight, zero (0) were due to agency illness, and zero (0) were due to agency shortage. In the case of all eight (8) instances, at the time of discovery, the child was no longer in the jurisdiction of the early intervention provider.

For LEA notification: A total of 139 records were reviewed. Of those 139 records, 20 parents chose to opt-out of the notification. Of the 119 that required LEA notification, 111 of the records contained documentation of the notification. Eight (8) records did not contain a notification, therefore, North Dakota's performance for LEA notification is at 93.28%. The eight (8) instances where a child's record did not contain evidence of an LEA Notification due to an agency reason are attributed to seven (7) programs.

For SEA notification: A total of 139 records were reviewed. Of those 139 records, 20 parents chose to opt out of the notification. The Part C Coordinator reviewed the timeliness of the SEA notification being sent for these 119 children. Of the 119 that required SEA notification, 119 records were sent timely. Zero (0) records were not sent timely.

Indicator 8B FFY 2021 noncompliance was discovered through the APR data review process and was verified on January 10, 2023. On January 24, 2023, a Letter of Findings was issued to all seven (7) providers who had at least one instance where a child's record did not contain evidence of an LEA Notification due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	8		0

FFY 2020 Findings of Noncompliance Verified as Corrected

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

For FFY 2020, North Dakota issued a Letter of Findings to eight (8) programs due to having at least one instance where a child’s record did not contain evidence of an LEA Notification due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to eight (8) programs. Correction was verified according to Federal requirements. The finding was verified as corrected on September 9, 2022. Seven (7) programs demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. One (1) program demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

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

For FFY 2020, North Dakota issued a Letter of Findings to eight (8) programs due to having at least one instance where a child’s record did not contain evidence of an LEA Notification due to an agency reason. For FFY 2020, there were 12 individual instances where a child’s record did not contain evidence of an LEA Notification due to an agency reason. The 12 instances were attributed to eight (8) programs.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in 12 of the 12 individual cases, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for the program on May 31, 2022. Correction was verified according to Federal requirements. The eight (8) findings were verified as corrected on September 9, 2022.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8B - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2020. The State’s FFY 2020 data were not valid and reliable because when the number of parents who opted out (34) is subtracted from the number potentially eligible for Part B, the total is 86, which total 12 instances of noncompliance. However, the State reports 14 instances of delay in the description of Reasons for Delay. The State must provide valid and reliable data for FFY 2021 in the FFY 2021 SPP/APR.

Response to actions required in FFY 2020 SPP/APR

North Dakota has provided valid and reliable data for Indicator 8b FFY 2021. Below are the numbers demonstrating this:

Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B: 139

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: 111

Number of parents who opted out: 20

Instances of Noncompliance: 8

Total Number of Children: 111+20+8=139

Number of Programs with Noncompliance: 7

8B - OSEP Response

8B - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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:

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

- 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.
- 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.
- 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 timely 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 2021 SPP/APR, the data for FFY 2020), 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	83.30%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	99.36%	100.00%	97.50%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
131	139	97.50%	100%	98.56%	Did not meet target	No Slippage

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

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

0

Number of documented delays attributable to exceptional family circumstances

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

6

Provide reasons for delay, if applicable.

For FFY 2021, North Dakota had two (2) instances where a timely transition conference was not conducted due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, one (1) instance of lack of timely transition conference was due to agency oversight, one (1) was due to agency illness, and zero (0) were due to agency shortage.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

A data set for Indicator 8C is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8C, using Therap, for FFY 2021. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 139 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2021 North Dakota had 15 early intervention providers across the state. The performance of all 15 of these providers is represented in this data.

Provide additional information about this indicator (optional).

For FFY 2021, North Dakota had two (2) instances where a timely transition conference was not conducted due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, one (1) instance of lack of timely transition conference was due to agency oversight, one (1) was due to agency illness, and zero (0) were due to agency shortage.

The two (2) instances where a timely transition conference was not conducted due to an agency reason are attributed to two (2) providers. Indicator 8c FFY 2021 noncompliance was discovered through the APR data review process and was verified on January 10, 2023. On January 24, 2023, a Letter of Findings was issued to all two (2) providers who had at least one instance where a timely transition conference was not conducted due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

For FFY 2020, North Dakota issued a Letter of Findings to three (3) providers due to having at least one instance where a timely transition conference was not conducted due to agency reasons.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record. For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is

required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to three (3) providers. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022. Of the three (3) providers, three (3) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans.

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

For FFY 2020, North Dakota issued a Letter of Findings to three (3) providers due to having at least one instance where a timely transition conference was not conducted due to agency reasons.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in three (3) of the three (3) individual cases, the child was no longer in the jurisdiction of the EIS program at the time of discovery. Individual instances of noncompliance were verified as corrected for all programs on May 31, 2022. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8C - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

For FFY 2020, North Dakota issued a Letter of Findings to three (3) providers due to having at least one instance where a timely transition conference was not conducted due to agency reasons.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record. For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2020 on January 28, 2022 to three (3) providers. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022. Of the three (3) providers, three (3) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on May 31, 2022, that in three (3) of the three (3) individual cases, the child was no longer in the jurisdiction of the EIS program at the time of discovery. Individual instances of noncompliance were verified as corrected for all programs on May 31, 2022. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on September 9, 2022.

8C - OSEP Response

8C - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below.

North Dakota uses Part C due process hearing procedures under 34 CFR 303.430(d)(1), therefore this indicator is not applicable.

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

OSEP notes that this indicator is not applicable.

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

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

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

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

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

Targets: In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

11 - Indicator Data

Section A: Data Analysis

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

North Dakota Part C's State-Identified Measurable Result (SiMR) is:

There will be improved social emotional outcomes for children who come in below age expectation but make substantial gains (Indicator 3a, Summary Statement 1) as a result of participation in early intervention.

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

NO

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

NO

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

NO

Please provide a link to the current theory of action.

<https://www.nd.gov/dhs/services/disabilities/earlyintervention/partcinfo/index.html>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
FFY 2016	72.04%

Targets

FFY	2021	2022	2023	2024	2025
Target>=	70.00%	71.00%	72.00%	73.00%	74.00%

FFY 2021 SPP/APR Data

Number of infants and toddlers reported in Indicator 3a progress category (a) plus number of infants and toddlers reported in progress category (b) plus number of infants and toddlers reported in progress category (c) plus number of infants and toddlers reported in category (d)	Number of infants and toddlers reported in Indicator 3a progress category (a) plus number of infants and toddlers reported in progress category (b) plus number of infants and toddlers reported in progress category (c) plus number of infants and toddlers reported in progress category (d)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
559	673	86.91%	70.00%	83.06%	N/A	N/A

Provide the data source for the FFY 2021 data.

North Dakota Part C's State-Identified Measurable Result (SiMR) data source is child outcome Indicator 3a, Summary Statement 1, and the data for this is gathered through the states Assessment, Evaluation and Programming System Assessment, Evaluation, and Programming System for Infants and Children (AEPS) child outcomes tool.

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

North Dakota uses the Assessment, Evaluation and Programming System Assessment, Evaluation, and Programming System for Infants and Children (AEPS) as the evaluation/assessment tool for child outcomes data. The data for the SiMR is taken from child outcome Indicator 3a, Summary Statement 1. All child outcomes data is entered into the publisher's online system (AEPSi), a web-based database.

Staff enter entry/exit data into the AEPSi online tool. Initial child outcome assessment is completed and entered into the data system by early intervention providers or the Service Coordinator (DDPM) prior to eligibility, and exit data is entered for children who have been receiving services for at least 6 months. Exit data must be entered within 30 days of the child's third birthday, and if the exit date is unexpected, the exit data must be entered within 30 days of the exit. The Service Coordinator (DDPM) is responsible to ensure completion of the tool by local early intervention providers. All data is downloaded and analyzed by the Part C Data Manager for reporting.

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

NO

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

Please provide a link to the State's current evaluation plan.

The State continued work in the 4 Strand areas of the original Evaluation Plan. The 4 Strand Areas have been foundational to the SSIP work and the dynamic process of change in the state. The original evaluation plan was the basis of all SSIP work that is now culminating. In 2022, the State began the process of updating the evaluation plan. This work will continue in 2023 following the plan outlined below. The evaluation plan can be found at: <https://www.nd.gov/dhs/services/disabilities/earlyintervention/partcinfo/index.html>

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

NO

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

Strategy 1- Child Outcome Tool: Updated Child Outcomes Tool. North Dakota replaced the child outcomes assessment tool in the fall of 2017 with the Assessment, Evaluation, and Programming System (AEPS) after significant planning for several years. This is North Dakota's fourth APR year of reporting the AEPS data for this indicator, and the first year a full cohort of children on the AEPS is being reported.

Strategy 2- Child Outcome Tool: Fidelity & Inter-Rater Reliability of Child Outcomes Tool. North Dakota provided 125 early intervention professionals and service coordinators with online inter-rater reliability training from the AEPS publisher, Brookes Publishing. North Dakota is currently working with Brookes Publishing to determine future training needs.

Strategy 3- Data Visualization. The state began working with the Decision Support Services (DSS) Division in June 2019 to create additional data reports using a program called Power BI that allows users to isolate individual programs' data in several APR data areas. For FFY 2021, the APR Data was presented to the ND ICC using Power BI. This allowed the state to analyze data with the ND ICC in real-time. ND ICC members reported better engagement with the data for this review. Additionally, the Part C Coordinator prepared an APR Trend Data report which contained narrative and data visualization that was shared with both the ND ICC and the EI Stakeholder group during recent meetings.

Strategy 4- Electronic Database Improvement. The Part C Coordinator seeks input on an ongoing basis from stakeholders on how the electronic database (Therap) can be improved. When suggestions are made, or difficulties are encountered, that information is taken to the Therap development team and considered for either enhancements or fixes to the system. This ongoing process that the State uses as improvements are made or concerns arise. Stakeholder input is critical to identifying enhancements and/or additional needs, so feedback is frequently sought when meeting with EI staff or when reviewing data with the ICC, as well as additional stakeholders.

On January 4, 2021, North Dakota implemented an improved Individualized Family Service Plan (IFSP) within the provider portal of Therap. The improved IFSP increases data quality by implementing additional data checks within the system for APR data points, providing a comprehensive documentation system for all types of IFSP events, including home visits, IFSP meetings and reviews, and evaluations. The improved IFSP also allows providers to generate data reports in real-time using their program's data. In FFY 2021, North Dakota has taken steps toward moving all Prior Written Notices to the provider portal of Therap, further increasing data quality.

Strategy 5- Question and Answer Document. The Q&A document was developed in response to a request by the field to have consistent and timely clarifying information, or relevant changes in online tool usage, procedures, and expectations. After six months of use, the Part C Coordinator surveyed the group on the utility of the document and stakeholders expressed finding the document useful. A request was made by multiple stakeholders to have the Q&A document organized by topic as the questions and responses increased. As the document has evolved, it was made further interactive by creating links to each topic as well as to the top of the document. Specific topics, such as the transition to the updated IFSP, have had individualized Q&A documents created in response to the volume of questions received on that single topic. Additional materials are created to support areas of concern identified through multiple questions on the same topic.

Professional Development Improvement Strand

Strategy 6- Professional Development Platform Scale-Up: During FFY 2021, professional development system work continued with the input of

stakeholders in Early Intervention (EI), Technical Assistance (TA), and the state Part C team. A new, interactive learning platform was released in collaboration with the Resilient Early Intervention Leadership (REIL) grant. Professional development work focused on the development of a 3-part authentic assessment module, statewide face to face family assessment training, and finalization of family assessment modules with scale-up and release planned for FFY 2022.

Infrastructure Strategy 7- Statewide Mini-PD. During monthly Statewide Early Intervention Meetings, professional development is provided through mini-PD sessions on stakeholder-identified topics. Mini professional development sessions were provided on universal supports; the ND Correction, Compliance, and Support Process (C3P); ND Vision and Hearing Supports & Collaboration; and DEC Recommended Practices.

Policy and Procedures Improvement Strand

Infrastructure Strategy 8- Procedures Workgroup. The Procedures Workgroup began meeting in October 2018 and has met monthly since its inception. The workgroup has chosen to focus on procedures that their staff have expressed a desire for additional clarity or uniformity around.

The Procedures Workgroup has been updating the IFSP Checklists to reflect the improved IFSP. The workgroup also developed agendas for the North Dakota 2.7 and 2.9 transition meetings, which are currently being reviewed by the Part B 619 stakeholder groups. These agendas are part of a larger effort to review Part C to Part B transition guidance materials, set to begin in 2023.

Infrastructure Strategy 9- Therap Provider Side IFSP. In January 2021, the state instructed providers to use the improved IFSP held on the provider side of the state's electronic database, Therap. Prior to this transition, providers were given the opportunity to attend three technical trainings on the IFSP, as well as one of five content trainings on the IFSP. Materials used at this training, including an "IFSP Quick Guide" and PowerPoint presentation were emailed out to providers as well as placed on the ND Early Intervention website. In response to provider questions, two Q&A sessions were held after the implementation of the improved IFSP where providers were able to ask questions in an open forum. Frequently Asked Questions were placed into an FAQ document that continues to be updated regularly and shared with the field. The Part C Coordinator continues to provide training on the updated IFSP, including Q&A sessions, written guidance, and live trainings on specific sections of the IFSP. Most recently, a live IFSP Transition Section training was conducted and a virtual training was created that can be accessed at any time by any interested stakeholders.

Infrastructure Strategy 10- Parent Panel. In response to the need to solicit more parent involvement, North Dakota created a Parent Panel which will meet quarterly to discuss "hot topics" in Early Intervention and provide feedback to the state. The Parent Panel members will be provided with a stipend for participation. Meetings will be scheduled at times convenient to families to ensure that diverse groups of parents are able to attend.

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

Data Quality Improvement Strand

Outcome 1: Data quality will improve through a full cohort of exit child outcome data using the AEPS.

Infrastructure Strategy 1: Child Outcome Tool: Reviewing data quality of the full cohort data of the AEPS.

Stakeholder Involvement: The state utilized Statewide EI Meetings and ND ICC Meetings to inform decisions around transitioning to the AEPS, as well as the Data Drill Down stakeholder group to determine the most appropriate reports about which to train staff.

Systems Framework: Quality Standards and Data

Systems Change: Sustainability, Achievement of the SiMR

Infrastructure Strategy 2: Child Outcome Tool: Fidelity & Inter-Rater Reliability of Child Outcomes Tool.

Stakeholder Involvement: The state utilized the Statewide EI Meetings to determine timing of and interest in the Inter-Rater Reliability Modules for the AEPS.

Systems Framework: Quality Standards, Data

Systems Change: Scale-Up

Infrastructure Strategy 3: Data Visualization

Stakeholder Involvement: The state scaled up use of the data visualization using Power BI with the Data Drill Down stakeholder group, and the ND ICC for APR Reporting for FFY 2021.

Systems Framework: Data

Systems Change: Scale-Up, Scale-Up, Achievement of the SiMR

Infrastructure Strategy 4: Electronic Database Improvement

Stakeholder Involvement: The state utilized feedback from individual programs as well as numerous trainings and listening sessions regarding the data system, Therap. Specifically, in FFY 2021, the state sought ongoing feedback from users of the new IFSP on the provider side of Therap.

Systems Framework: Data, Technical Assistance, Quality Standards

Systems Change: Sustainability

Infrastructure Strategy 5: Question and Answer Document

Stakeholder Involvement: Stakeholders submitted questions to the Part C Coordinator on an ongoing basis. The Part C Coordinator documented these questions in a Q&A Document that is regularly updated. Stakeholders continue to provide feedback, through email and Statewide EI Meetings, on the usability and applicability of the Q&A Document.

Systems Framework: Technical Assistance

Systems Change: Sustainability

Professional Development Improvement Strand

Outcome 2: Design & implement a professional development system to support the EI system with evidence-based practices.

Infrastructure Strategy 6: Professional Development Scale-Up.

Stakeholder Involvement: During FFY 2021, the professional development system work continued with the input of stakeholders in Early Intervention (EI), State Technical Assistance (TA), and the state Part C team. Stakeholders met monthly to finalize a 3-part Authentic Assessment professional development modules in the new, interactive platform. The module was completed in FFY 2021 to support new staff, experienced staff, families, and community partners. A statewide, face-to-face family assessment training event was held October 25-26 and the state TA team developed sixteen

Family Assessment modules around the Routines-Based Interview (RBI) for scale-up and support in FFY 2022. Data and information about this scale-up is discussed in the Evidence-Based Practices section of this indicator.

Systems Framework: Professional Development

Systems Change: Scale-Up

Infrastructure Strategy 7: Statewide Mini-PD.

Stakeholder Involvement: During monthly Statewide Early Intervention Meetings, mini professional development sessions were provided on universal supports; the ND Correction, Compliance, and Support Process (C3P); ND Vision and Hearing Supports & Collaboration; and DEC Recommended Practices.

Systems Framework: Professional development and technical assistance

Systems Change: Scale-Up

Policy and Procedures Improvement Strand

Outcome 3: Create procedural guide to support implementation of policies to support improvement in the SIMR.

Infrastructure Strategy 8: Procedures Workgroup.

Stakeholder Involvement: The Procedures Workgroup is made up of service coordinators and EI program staff who regularly provide feedback during meetings. The group acts as leaders in their programs to gather and bring back information about procedures that are priority to their program.

Systems Framework: Governance, Technical Assistance

Systems Change: Sustainability

Infrastructure Strategy 9: Therap Provider Side IFSP.

Stakeholder Involvement: The Statewide EI Meeting provided feedback during all stages of developing the Provider Side IFSP. Prior to starting development, the group provided information about features they would like to see in the new IFSP, during development, users tested the new IFSP and provided feedback about functionality, and after deployment, users continue to provide feedback about enhancements they would like to see implemented.

Systems Framework: Data, Quality Standards, Professional Development, Technical Assistance

Systems Change: Scale-Up

Infrastructure Strategy 10: Parent Panel.

Stakeholder Involvement: A cross section of parents from across the state were engaged in APR Target Setting activities. This group will be meeting quarterly to provide ongoing feedback from a parent's perspective. The group will receive a stipend and meetings will be scheduled at times convenient to them.

Systems Framework: Quality Standards, Accountability/Monitoring, Governance

Systems Change: Sustainability

Summary

Impacts to the Part C infrastructure have been impacted by SSIP activities during FFY 2021. The SSIP activities in conjunction with the REIL grant have offered opportunities for an engaging professional development platform, website updates, improved data quality, and updated policy and procedures. The statewide web-based data system, Therap, continues to be reviewed and refined based on stakeholder feedback. Parent, EI, and Service Coordinator stakeholders work in conjunction with the Part C Coordinator regularly to review and prioritize updates for the Therap system. A sustainable process is now utilized to share data visualization documents with programs leaders, families, and community partners on a regular basis.

The improved professional development platform infrastructure has created an engaging and interactive foundation for the state PD framework activities. This PD platform will house newly created authentic assessment modules as well as allow previously created stakeholder PD to be updated over time. These PD modules will provide performance support for new and experienced early intervention professionals and community members for 'just in time' resources. Infrastructure activities continue to support early intervention through practice change and increased understanding within our EBP DEC F6. These infrastructure improvements support the work of Part C Early Intervention in North Dakota.

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

YES

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

New Infrastructure Improvement Strategy: Professional Development Platform

The new professional development platform creates an engaging and interactive foundation for the state PD framework activities. This PD platform will house newly created authentic assessment modules created during FFY 2021, as well as allow previously created stakeholder PD content to be updated over time and added to the platform. 'Just in time' performance support enhances training and resources for all stakeholders while assuring staff will have the information needed during critical moments. The new platform creates an opportunity for formalizing onboarding of new early intervention professionals.

Anticipated Outcome: Support the professional development system with a reliable and engaging PD platform providing performance support available to early intervention professionals, families, and community partners.

Summary Next Steps: The stakeholder PD Workgroup will continue to create content and update previously created content for the new platform. Data analysis will supply feedback for improvement of the content. The stakeholder PD Workgroup will review data collected from surveys completed by EI professionals, families, and community partners after reviewing each of the three authentic assessment modules. Feedback will also inform content as it is created in FFY 2022, as well as updates needed for previously developed material. The use of stakeholders offers varying perspectives and system insight in supporting the development of quality content for PD through a continuous improvement process.

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

Outcome 1: Data quality will improve by increasing the proportion of children for whom there is exit child outcome data.

Infrastructure Strategy 1: Child Outcome Tool: Data quality will improve through a full cohort of exit child outcome data with the AEPS.

Summary Next Steps: Review data quality of the full cohort data of the AEPS to inform practices at the program level.

Stakeholder Involvement: The state will utilize the Data Drill Down stakeholder group to review data and determine program needs.

Anticipated Outcomes: AEPS data will be valid and reliable, and the tool will be completed with fidelity across the state.

Infrastructure Strategy 2: Child Outcome Tool: Fidelity & Inter-Rater Reliability of Child Outcomes Tool.

Summary Next Steps: The state provided EI programs and Service Coordinators with the opportunity to complete an online Inter-Rater Reliability training. All 125 Inter-Rater Reliability training codes have been used.

Anticipated Outcomes: AEPS data will be valid and reliable, and the tool will be completed with fidelity across the state.

Infrastructure Strategy 3: Data Visualization

Summary Next Steps: Power BI Reports used for APR Data visualization are continually refined and enhanced through stakeholder involvement.

Anticipated Outcomes: Stakeholder engagement with and understanding of APR data will be increased, and outcomes for families and children will be improved.

Infrastructure Strategy 4: Electronic Database Improvement

Summary Next Steps: Feedback will continue to be collected, and improvements will be made to Therap based on provider questions and stakeholder feedback.

Anticipated Outcomes: IFSP and APR data will be valid and reliable, as well as easier to locate and analyze.

Infrastructure Strategy 5: Question and Answer Document

Summary Next Steps: Questions from the Q&A Document will be integrated into modules that will be hosted on an online Learning Management System.

Anticipated Outcomes: Services across the state will be provided consistently and according to state guidelines. New and existing staff will have access to information when they need it.

Professional Development Improvement Strand

Outcome 2: Design & implement a professional development system to support the EI system with evidence-based practices.

Infrastructure Strategy 6: Professional Development Scale-Up.

Summary Next Steps: Survey feedback data will be collected from stakeholders reviewing the three Authentic Assessment modules completed in FFY 2021. The sixteen Family Assessment modules around the Routines-Based Interview (RBI) will be rolled out in FFY 2022 in a scale-up process developed by stakeholders, including opportunities for program mentoring processes, supporting experienced and new staff, and availability of online resources for consistent performance support.

Anticipated Outcomes: Professional development modules will be available for performance support in a sustainable and engaging platform on the EI website for all stakeholders.

Infrastructure Strategy 7: Statewide Mini-PD.

Summary Next Steps: Mini-PD identified by stakeholders will be targeted for the EI Statewide Meetings during FFY 2022.

Anticipated Outcomes: Stakeholders will determine performance support content needs to be delivered at EI Statewide Meetings in support of DEC F6.

Policy and Procedures Improvement Strand

Outcome 3: Create procedural guide to support implementation of policies to support improvement in the SiMR.

Infrastructure Strategy 8: Procedures Workgroup.

Summary Next Steps: The Procedures Workgroup continues to meet monthly. The work will begin on reviewing ND's Part C to Part B transition guidance in cooperation with ND Part B 619.

Anticipated Outcomes: Providers will have access to accurate and timely guidance around state and federal policy and procedure.

Infrastructure Strategy 9: Therap Provider Side IFSP.

Summary Next Steps: Stakeholders continue to share feedback with the state regarding necessary enhancements and fixes.

Anticipated Outcomes: Data will be valid and reliable. Families will have an IFSP that is clear, accurate and easy to understand.

Infrastructure Strategy 10: Parent Panel.

Summary Next Steps: The Parent Panel will meet quarterly to provide feedback to the state regarding Early Intervention services.

Anticipated Outcomes: Services will be enhanced with parent feedback to improve outcomes for children and families.

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

The selected evidence-based practice (EBP) is DEC RP F6: Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family's preferences

Provide a summary of each evidence-based practice.

North Dakota Part C's evidence-based practice is DEC RP F6: Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family's preferences. As determined in Phase III, year one SSIP work, PD strand activities were aligned to the EBP.

Implementation Science and Leadership

Implementation science continues to be the framework for development and planning of professional development materials in PD. The Evidence-Based Practices incorporate strategies using implementation science to scale-up and support PD in the EI system. The development of consistently available, 'just in time,' PD resources on the EI website, which has now been upgraded to a new, engaging platform for performance support. Current website offerings created during the last decade of SSIP work include Mission and Key Principles videos, Triadic Strategies video and resources, Family-Centered Practices video and resources, Service Coordination video and resources, Functional Outcomes Visual Guidance, and most recently Authentic Assessment modules with Reflection Guide. A set of sixteen Family Assessment modules are also prepared for release and scale-up during FFY 2022.

Grant activities from the Resilient Early Intervention Leadership (REIL) grant, through the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant, are supporting leadership activities in early intervention. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program. The grant initiative develops EI leaders who understand and employ practices based on leadership competencies, evidence-based practices, and Part C

federal and state regulations in supporting infants and young children with disabilities and their families.

Leadership Scale-Up

Through the Resilient Early Intervention Leadership (REIL) grant, a multi-agency cross collaborative of Early Childhood members across the state joined a 14-month webinar series as a part of the Resilient Early Childhood Leadership Collaborative (RELC). This group of 100 professionals met for monthly webinars with support materials provided to consider their resilience, teaming for resilience, working with families to promote resilience, and resilience and racial equity.

A two-day face-to-face family assessment training was held in October for early interventionists and service coordinators. A set of sixteen Family Assessment modules were developed, and a scale-up and training process will occur in FFY 2022. Stakeholders will offer feedback for the scale-up based on the previous Partnering for Outcomes with Real meaning (POWR) Project for support of EBP DEC F6. Dependent on stakeholder feedback, the State TA team provides an overall structure to support training, mentorship, check-in meetings for accountability and individualized regional and program planning. The ultimate goal of the PD projects is to develop regional leaders, peer learning, and ownership at the program level for activities in support of EBP DEC F6 around family-centered principles.

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

EBP Strategy 1: Professional Development Workgroup

During FFY 2021, the Professional Development (PD) system work continued with the input of stakeholders in Early Intervention (EI), State Technical Assistance (TA), and the state Part C team. Professional Development stakeholders met monthly to create a series of three Authentic Assessment PD modules, including a Reflection Guide. The modules were completed in FFY 2021 to support new staff, experienced staff and families in the new PD platform that promotes active engagement by users. The modules will be open for users, including early interventionists, service coordinators, families, and community partners, in FFY 2022, and surveys will provide feedback for continuous improvement of the modules from all stakeholders.

Systems Change: The Authentic Assessment modules developed in FFY 2021 offer a stakeholder-driven PD process for performance support and available to EI professionals and caregivers on the EI website. This PD process using stakeholders began with the advent of SSIP planning before 2016. The PD Workgroup was formed in support of EBP DEC F6 around family-centered principles. The initial and ongoing focus was to develop regional leaders, peer learning and mentoring, and ownership at the program level through PD to impact practice change supported by data for sustainability. Using data to support continuous improvement with stakeholder driven input has created a performance support PD system available to EI professionals and caregivers on the EI website. The PD Workgroup stakeholders are now embedded in the state EI system with data reviews, progress reports, and feedback at each Statewide Early Intervention Meeting.

EBP Strategy 2: Professional Development Work Group- Family Assessment.

Stakeholder Involvement: During FFY 2020, a survey was completed with stakeholders including caregivers and EI professionals demonstrating the need around priority areas including the following: asking difficult questions, dealing with strong emotions, writing family outcomes/writing child outcomes based in routines, and creating meaningful outcomes with the family.

A family assessment caregiver survey was completed by 142 families with a child in EI. Overall, caregivers reported that their EI provider and service coordinator helped them in understanding the key principles and philosophy of early intervention (97.16%). Caregivers did share that they would like additional information in written form, available online and additional education about the early intervention and family assessment process.

Based on the survey data and a focus group discussion of EI leaders in service coordination and EI providers held at a statewide meeting on January 18, 2022, stakeholders planned how to scale-up PD in family assessment. This information informed the FFY 2021 scale-up of family assessment PD. During FFY 2021, the state coordinated a face to face 2-day training for early interventionists, experienced parents, and service coordinators on family assessment. In addition the state TA team developed 16 Family Assessment modules around the Routines-Based Interview (RBI) with guidance and support from the stakeholder PD Work Group.

Systems Change: With this SSIP work, the state has evolved a system of stakeholder feedback to drive the development of PD within the stakeholder PD Work Group that supports performance for new staff, experienced staff and families in a new PD platform that with active engagement by users. The new platform will support many modules, but the 16 Family Assessment modules in three parts including (RBI) Overview, Components of the RBI, and RBI Fidelity Coach and Practice, will be open for users, including early interventionists, service coordinators, families, and community partners, in FFY 2022. The FFY 2022 scale-up of the Family Assessment modules will be driven by stakeholders feedback, incorporating program voice in how to scale-up Family Assessment with mentoring, peer support, and leadership within their program. The TA is anticipated to follow the philosophy of previous SSIP projects.

EBP Strategy 3: Resilient Early Intervention Leadership Grant. In November 2020, ND Part C was awarded a Personnel Development (325L) grant. The work is in collaboration with the ND HHS Part C program, and the University of North Dakota Early Childhood and Special Education Program. The grant builds on the previous SSIP project utilizing implementation science called the POWR Project model of peer support and local program leadership development, aligned with state guided PD mentorship. The grant initiative activities were developed to support EI leaders in their understanding and use of practices based on leadership competencies, evidence-based practices, and Part C federal and state regulations in supporting infants and young children with disabilities and their families.

The Resilient Early Intervention Leadership (REIL) Grant involves several stakeholder groups across the state of ND, including 100 cross-agency leaders (parents, service coordinators, early interventionists, childcare, community early childhood agency staff) in the Resilient Early Intervention Leadership Collaborative (RELC). The RELC completed a 14-month series of webinars during FFY 2021 based on resilience, working with families to focus on resilience and strategies, including resilience and racial equity.

A RELC survey was sent to the 100 cross-agency leaders, and 40 completed the survey. Overall, respondents indicated that the RELC webinars have increased their confidence and understanding of resilient leadership in early intervention. RELC participants completed a pre- and post-survey about the impact of the experience on their learning and knowledge involving key principles of resilient leadership. In the pre-survey, participants went from 9.52% stating confidence in using the key principles of resilient leadership to 87.5% stating they were almost or completely confident in using the key principles. This demonstrated an inverse relationship to their level of confidence during the RELC experience.

During the post survey, RELC participants also reported the following:

89.58%- I felt supported by the Resilient Early Leadership Collaborative (RELC) process.

85.42%- The RELC webinar learning events have positively impacted my leadership practices in my role in early childhood.

89.58%- I am likely to use what I learned from the RELC experience in my work in early childhood.

The REIL Grant Early Intervention Leadership Certificate offered a 12-credit graduate certificate to two cohorts of 18 parents, early interventionists, service coordinators, and early childhood professionals in the state. Cohort 1 completed the certificate during December of FFY 2021. Cohort 1 participants completed course work in early intervention principles and completed a capstone early intervention leadership project shared with their peers and the REIL Grant Advisory Stakeholder Group.

Systems Change: The grant initiative builds a tiered, sustainable system of leadership opportunities to increase the capacity of leaders across the state, region, and local early childhood system. The REIL Grant Early Intervention Leadership Certificate and RELC supports early intervention through partnership with the early childhood community through cross-agency impact supporting early childhood partners, including parents, early interventionists, service coordinators and early childhood partners (Childcare, Early Head Start, Higher Education, Social Services, Public Health, and many others). The REIL grant will continue to build community and partnership in learning about and supporting early intervention while promoting leaders for the future.

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

RBI Data baseline data and follow-up to occur over time

Fidelity has centered on gathering data around practitioner practice change in EBP DEC F6. Previous fidelity data has focused on practitioner perception of growth from the beginning of the PIWI Project to the end of the POWR Project, leading to the current initiatives and demonstrating the continual increase of knowledge and practice change. As a part of long-term scale-up planning, family assessment caregiver survey was completed in FFY 2020, based on the components of the EBP DEC F6 fidelity checklist. The survey was completed by 142 families with a child in early intervention. Caregivers shared that they would like additional information in written form, available online and additional education about the early intervention and family assessment processes.

Further data from the the Resilient Early Intervention Leadership (REIL) included the RELC survey of 100 cross-agency leaders, of which 48 participants completed the survey. RELC participants completed a pre- and post-survey about the impact of the experience on their learning and knowledge involving key principles of resilient leadership, which impacts EBP DEC F6. In the pre-survey, participants went from 9.52% stating confidence in using the key principles of resilient leadership to 87.5% stating they were almost or completely confident in using the key principles. This demonstrated an inverse relationship to their level of confidence during the RELC experience.

During the post survey, RELC participants also reported the following:

89.58%- I felt supported by the Resilient Early Leadership Collaborative (RELC) process.

85.42%- The RELC webinar learning events have positively impacted my leadership practices in my role in early childhood.

89.58%- I am likely to use what I learned from the RELC experience in my work in early childhood.

Using implementation science, stakeholder groups had previously identified needs in family assessment. With this information, TA began developing resources to support family assessment over FFY 2020-2021. The stakeholder PD Work Group provided feedback on the needs of family assessment.

In FFY 2020, survey data indicated stakeholders need for additional support of EBP DEC F6 in family assessment areas of asking difficult questions, dealing with strong emotions, writing family outcomes/writing child outcomes based in routines, and creating meaningful outcomes with the family.

Based on the survey data and a focus group discussion of EI leaders in service coordination and EI providers held at a statewide meeting on January 18, 2022, stakeholders planned how to scale-up professional development in family assessment. This information informed the FFY 2021 scale-up of family assessment professional development. During FFY 2021, the state coordinated a face to face 2-day training for early interventionists, experienced parents, and service coordinators on family assessment.

Data was collected in a pre- and post-survey from the face to face 2-day training for early interventionists, experienced parents, and service coordinators on family assessment. Following are highlights from the pre- and post-survey:

1- In the pre-survey, 69% of participants indicated that they were almost or completely confident in using the Key Principles and Philosophy of early intervention in practice, while 93% of RBI participants indicated they were almost or completely confident in the post survey.

Impact: Participants moved from 69% to 93% confidence in practice.

2- In the pre-survey, 52.3% of participants indicated that they were almost or completely confident in using the RBI as compared to 78.6% in the post survey.

Impact: Participants moved from 52.3% to 78.6% confidence in using the RBI.

3- In the pre-survey, 64.5% of participants indicated that they were almost or completely confident in using the RBI to identify IFSP outcomes as compared to 92.8% in the post survey.

Impact: Participants moved from 52.3% to 78.6% confidence in using the RBI to identify IFSP outcomes.

Post-survey comments included the following:

I think the hardest part for me is "getting going." This training showed me just how in-depth a RBI could and should be.

Loved the training! Love how it makes the process of initial IFSPs just much more comfortable and natural for the families to talk about! Wish everyone could get the training!

The RBI is a nice tool to use. However in real life as an early interventionist I get 1 hour to have the initial IFSP meeting. So I don't have enough time to do a proper RBI as taught.

The post-survey demonstrated growth in confidence in practice, using the RBI, and identifying IFSP outcomes with families. Participants indicated a need for additional support related to the areas of difficult conversations, responding to families' emotions, and listening to the family. In addition, respondents indicated that limited time in the IFSP process influences their ability to complete the RBI in the way it was intended. More than half of participants reported having less than 5 years of experience, demonstrating the need for ongoing family assessment training for current staff and PD that supports the onboarding of new staff.

In response to performance support needs, the state TA team developed sixteen Family Assessment modules around the Routines-Based Interview (RBI) with guidance and support from the stakeholder PD Work Group to build a foundation of ongoing support for family assessment in early intervention. The Family Assessment modules were developed in three parts including (RBI) Overview, Components of the RBI, and RBI Fidelity Coach and Practice. The modules will be available on the new, engaging PD platform for users, including early interventionists, service coordinators, families, and community partners, in FFY 2022. The FFY 2022 scale-up of the Family Assessment modules was driven by stakeholder feedback, incorporating program voice in how to scale-up Family Assessment with mentoring, peer support, and leadership within their program. Data will be collected around the impact of family assessment practices for fidelity.

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

Data is collected throughout the strands of the SSIP process. Examples include data from caregivers, EI professionals, and workgroups. The data presented within the infrastructure and EBP sections reflects practice change in individual practitioners, programs, and state structures. Data reflects that the implementation of effective practices at the local level positively impacts the SiMR. Qualitative and quantitative data were collected from stakeholders to demonstrate the need for increased family assessment resources and training in support of DEC RP F6. FFY 2021 scale-up in continued support of EBP RP F6 broadened its focus to family assessment practices, which continues to align with the Theory of Action.

The Resilient Early Intervention Leadership Grant involves several stakeholder groups across the state of ND. This grant involves several projects including the previously discussed 100 cross-agency leaders in the Resilient Early Intervention Leadership Collaborative (RELC) and the EI Leadership Certificate. Other grant projects that support EBP DEC F6 include the Competency Assessment Team (CAT) made up of early childhood leaders and parents reviewing and developing a competency assessment tool for EI to be released in FFY 2022. Also, an Advisory Group made up of cross-agency leaders, parents, and higher education, meets quarterly to discuss the landscape of early intervention in North Dakota and to identify needs and provide feedback about early intervention. The grant activities to support leaders in early intervention are enhancing the work to support EBP DEC F6. The use of stakeholders across all endeavors offer varying perspectives and system insight.

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

EBP Outcome: Design & implement a professional development system to support the EI system with evidence-based practices.

EBP Strategy 1: Professional Development Workgroup

The Authentic Assessment modules will be released in FFY 2022 to support new staff, experienced staff and families. For continuous improvement within implementation science, users will complete feedback surveys following completion of each of the three modules. The Authentic Assessment modules offer a stakeholder-driven, evidence-based PD for performance support and available to EI professionals, caregivers, and community partners on the EI website.

EBP Strategy 2: Professional Development Workgroup- Family Assessment.

Stakeholder Involvement: The 16 Family Assessment modules in three parts including (RBI) Overview, Components of the RBI, and RBI Fidelity Coach and Practice, will be open for users, including early interventionists, service coordinators, families, and community partners, in FFY 2022. The FFY 2022 scale-up of the Family Assessment modules are driven by stakeholders feedback, incorporating program voice in how to scale-up Family Assessment with mentoring, peer support, and leadership within their program. The technical assistance is anticipated to follow the philosophy of previous SSIP projects with continuous improvement incorporated following implementation science with users completing feedback surveys following completion of modules.

EBP Strategy 3: Resilient Early Intervention Leadership Grant. The Resilient Early Intervention Leadership (REIL) grant, will continue with Cohort 2 of the EI Leadership Certificate. A Competency Assessment Tool (CAT) developed by stakeholders for EI will be released in FFY 2022 with training. A main focus in the upcoming year will be creating a culminating project and activities to support coaching and mentoring. Stakeholders will be used to provide insight and finalize a plan for scale-up.

Does the State intend to continue implementing the SSIP without modifications? (yes/no)

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

The state has continued to work from the original SSIP evaluation plan and Theory of Action. The original strands included Data Quality, Professional Development, Evidence-Based Practices, and Policy & Procedure, which continue to drive the systemic work in the state. The original strands are foundational to previous and continuous work in positively impacting the EI system. New outcomes supporting next steps with stakeholders begin in FFY 2021 and will be finalized in FFY 2022 to reflect the progress made and continued supports for the system. As the majority of the outcomes are met within the evaluation table, stakeholders are aiding the development of a new evaluation plan and determining if any changes need to be made to the Theory of Action during FFY 2022.

The state continues passionate work on the strategies supporting positive systems change in the original 4 strand areas. The SSIP has created the ability to develop an evidence-based systems change opportunity to focus on specific work and embracing stakeholders at each juncture of decision-making. The original focus using implementation science and Theory of Action in the SSIP has supported the State's use of Plan-Do-Study-Act (PDSA) cycle, which has enhanced outcomes to positively impact the state SiMR.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.

Partnering for Outcomes With Real Meaning (POWR) Leads Group: Scale-up group made of program representatives from across the state for EI providers and service coordination, focusing on developing program leaders.

Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.

Parent Panel: Workgroup made up of family members who have or have had a child in early intervention services to offer insight into data, procedures, experiences, and initiatives directly to the Part C Coordinator. Added during FFY 2020.

In addition, stakeholders are a part the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

Grant Stakeholder groups:

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

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

Stakeholder Engagement. The state continues to use a variety of methods to inform and engage stakeholder groups about SSIP activities, including meetings, website and newsletters. Several statewide meetings occur regularly where SSIP information is shared. The Statewide Early Intervention Meeting Group occurs at least six times per year and includes service coordinators, experienced parents, early interventionist and community partners as stakeholders. The Interagency Coordinating Council (ICC) meets four times a year with a broader stakeholder group that aligns with the federal legislation requirements; ND requires a higher percentage of caregiver members in the ICC. The State's website includes minutes of meetings as well as annual SSIP reports. The Part C Coordinator periodically shares a newsletter outlining activities as well as requests regular feedback. Stakeholder's input, collaboration and feedback are built into all aspects of the SSIP strand work as follows:

Strategy 1: Data Quality. The statewide EI Meeting Group, Policy and Procedure Group and the Interagency Coordinating Council stakeholders regularly collaborate, discuss and give feedback on the child outcome results, child outcome tool, and the use of data to answer programmatic questions. An additional stakeholder group is the Caregiver Group, which reviews material from a family perspective. The ICC also reviews data and considers statewide long-term needs. This year, the ICC reviewed an APR Trend Data report which contained data visualization and narrative.

Strategy 2: Professional Development. The Professional Development (PD) Work Group was initially created over the summer of 2016. The work group includes stakeholders from across the state (experienced parents, EI, TA, and service coordinators). The Work Group's goal was to delineate state and local responsibilities in PD, create a structure for PD and to review and develop resources, and vet PD materials. An additional stakeholder group is the Caregiver Group. The Caregiver Group reviews material from a family perspective. The Statewide EI Meeting Group also reviews material and provides feedback on the final product.

Strategy 3: Evidence-Based Practices. The Statewide EI Polycor Group, Policy and Procedure Group, Caregiver Group, REIL Grant Advisory Group, and the Interagency Coordinating Council regularly collaborate, discuss, review, and offer feedback in regard to the work of the EBP strand. The diverse stakeholders have created an effective network to inform this strand.

Strategy 4: Policy and Procedure. The Policy and Procedure Workgroup stakeholders reviews current policies, identifies procedure topics, as well as assists in writing any new policies and procedures. The Workgroup includes early intervention providers and service coordinators. Stakeholder input is crucial to ensure that policies are written with families in mind and that procedure is written effectively, so it can be carried out as efficiently as possible. The Parent Panel provides family feedback to this group and the Part C Coordinator. The Statewide Early Intervention Meeting Group and the ICC Group review policy and procedure created by the Policy and Procedure Workgroup, supplying additional input.

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

NO

Additional Implementation Activities

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

A review and update of the current SSIP evaluation plan is in process and will continue in FFY 2022. The state continues to utilize stakeholder groups to review and update the evaluation plan. The state is working from the original SSIP evaluation plan and Theory of Action. The original strands include Data Quality, Professional Development, Evidence-Based Practices, and Policy & Procedure, which drive the systemic work in the state. The original

strands are foundational to previous and continuous work in positively impacting the EI system. Stakeholders are completing a review process of the existing evaluation plan and to determine any changes needed to the Theory of Action during FFY 2022.

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

As noted above in the section describing changes to the activities, strategies, or timelines described in the previous submission, the state continues a process to update the current Evaluation Plan. Below is the timetable and activities for updating the plan:

Evaluation Plan Activities:

January to March- ICC reviews current SSIP Evaluation Plan and Theory of Action, offering insight to updates and reviewing the Statewide EI meeting feedback from FFY 2021.

April to June- State EI Team reviews feedback from stakeholders.

July to September- State EI Team drafts evaluation document and updated Theory of Action for feedback from stakeholders. Stakeholder groups (PD Workgroup, ICC, Procedures Workgroup, Statewide EI Meeting Group, Parent, and Grant Advisory Group meet and offer feedback.

October to November- Evaluation plan and Theory of Action updates finalized.

December 2023 to January 2024- Evaluation plan and Theory of Action disseminated.

Evaluation Plan Outcome: North Dakota Part C will have an updated evaluation plan and Theory of Action in place addressing outcomes in each of the 4 strand areas (Data Quality, Professional Development, Policy & Procedure & Data Quality) by January 31, 2024.

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

North Dakota's barriers during FFY 2021 have included overall staff shortages that have impacted early intervention across the state. Early intervention professionals are very dedicated and have been creative in using strategies to counter shortages. The REIL grant has been a support to staff in its focus on resilient early intervention leadership, and it has provided a foundation for being mindful of self care. The state has been thoughtful in supporting professionals and considering implementation science to not overwhelm staff when planning new and ongoing initiatives. Through stakeholder feedback processes, staff have consistently expressed needs for PD support over time with deliberate planning and consideration of their ability to participate. This feedback has led to careful planning of initiatives, offering extended time for staff to participate fully. For example, when releasing the 3-part Authentic Assessment modules, staff requested a planned release with time for program staff to review each module before releasing the next module. This also allows time for survey feedback of each part of the series to engage in open and frequent communication and collaboration. The extra time created for identification of strengths and areas of challenge so that we are truly engaging in the Plan-Do-Study-Act (PDSA) cycle. Extending the release time of the Authentic Assessment modules for the PDSA cycle and in consideration of staff time in a post-Covid climate meant delaying the release of the 16-part RBI modules, yet improved staff capacity to participate.

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Designated Lead Agency Director

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

Name:

Jacqueline Adusumilli

Title:

Part C Coordinator

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Phone:

701-328-8968

Submitted on:

04/24/23 3:35:42 PM

Determination Enclosures

RDA Matrix

2023 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination¹

Percentage (%)	Determination
81.25%	Meets Requirements

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	8	5	62.50%
Compliance	14	14	100.00%

2023 Part C Results Matrix

I. Data Quality

(a) Data Completeness: The percent of children included in your State's 2021 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e., outcome data)	780
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	1,368
Percentage of Children Exiting who are Included in Outcome Data (%)	57.02
Data Completeness Score²	1

(b) Data Anomalies: Anomalies in your State's FFY 2021 Outcomes Data

Data Anomalies Score³	1
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II. Child Performance

(a) Data Comparison: Comparing your State's 2021 Outcomes Data to other States' 2021 Outcomes Data

Data Comparison Score⁴	2
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(b) Performance Change Over Time: Comparing your State's FFY 2021 data to your State's FFY 2020 data

Performance Change Score⁵	1
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Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2021	83.06%	69.36%	66.57%	59.62%	80.68%	76.79%
FFY 2020	86.91%	75.60%	72.81%	62.65%	82.51%	80.51%

¹ For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part C."

² Please see Appendix A for a detailed description of this calculation.

³ Please see Appendix B for a detailed description of this calculation.

⁴ Please see Appendix C for a detailed description of this calculation.

⁵ Please see Appendix D for a detailed description of this calculation.

2023 Part C Compliance Matrix

Part C Compliance Indicator ⁶	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 1: Timely service provision	96.80%	YES	2
Indicator 7: 45-day timeline	99.45%	YES	2
Indicator 8A: Timely transition plan	98.56%	YES	2
Indicator 8B: Transition notification	93.28%	YES	2
Indicator 8C: Timely transition conference	98.56%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

⁶ The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf

Appendix A

I. (a) Data Completeness:

The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State's Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State's FFY 2021 IDEA Section 618 Exit Data.

Data Completeness Score	Percent of Part C Children included in Outcomes Data (C3) and 618 Data
0	Lower than 34%
1	34% through 64%
2	65% and above

Appendix B

I. (b) Data Quality:

Anomalies in Your State's FFY 2021 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e⁷⁸. In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State's data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

Outcome A	Positive Social Relationships
Outcome B	Knowledge and Skills
Outcome C	Actions to Meet Needs

Category a	Percent of infants and toddlers who did not improve functioning
Category b	Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers
Category c	Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it
Category d	Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers
Category e	Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers

⁷ Numbers shown as rounded for display purposes.

⁸ Values based on data for States with summary statement denominator greater than 199 exiters.

Expected Range of Responses for Each Outcome and Category, FFY 2021

Outcome\Category	Mean	StDev	-1SD	+1SD
Outcome A\Category a	1.43	1.62	-0.19	3.05
Outcome B\Category a	1.26	2.27	-1.01	3.53
Outcome C\Category a	1.14	1.59	-0.45	2.73

Outcome\Category	Mean	StDev	-2SD	+2SD
Outcome A\ Category b	23.62	8.94	5.75	41.49
Outcome A\ Category c	20.32	12.69	-5.05	45.69
Outcome A\ Category d	27.33	9.46	8.42	46.24
Outcome A\ Category e	27.3	15.11	-2.92	57.52
Outcome B\ Category b	25.16	9.76	5.65	44.68
Outcome B\ Category c	28.73	12.11	4.5	52.95
Outcome B\ Category d	31.76	8.06	15.64	47.87
Outcome B\ Category e	13.09	8.56	-4.02	30.21
Outcome C\ Category b	20.27	8.49	3.29	37.26
Outcome C\ Category c	23.01	13.08	-3.16	49.17
Outcome C\ Category d	34.09	8.09	17.9	50.28
Outcome C\ Category e	21.49	15.06	-8.62	51.6

Data Anomalies Score	Total Points Received in All Progress Areas
0	0 through 9 points
1	10 through 12 points
2	13 through 15 points

Anomalies in Your State's Outcomes Data FFY 2021

Number of Infants and Toddlers with IFSP's Assessed in your State	780
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	9	105	125	434	107
Performance (%)	1.15%	13.46%	16.03%	55.64%	13.72%
Scores	1	1	1	0	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	7	234	74	406	59
Performance (%)	0.90%	30.00%	9.49%	52.05%	7.56%
Scores	1	1	1	0	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	3	110	68	404	195
Performance (%)	0.38%	14.10%	8.72%	51.79%	25.00%
Scores	1	1	1	0	1

	Total Score
Outcome A	4
Outcome B	4
Outcome C	4
Outcomes A-C	12

Data Anomalies Score	1
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Appendix C

II. (a) Data Comparison:

Comparing Your State's 2021 Outcomes Data to Other States' 2021 Outcome Data

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement⁹. Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

Summary Statement 1: Of those infants and toddlers who entered or exited 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.

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.

Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	43.42%	36.60%	54.62%	29.02%	55.14%	36.15%
90	82.74%	69.30%	79.34%	55.52%	85.72%	76.15%

Data Comparison Score	Total Points Received Across SS1 and SS2
0	0 through 4 points
1	5 through 8 points
2	9 through 12 points

Your State's Summary Statement Performance FFY 2021

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	83.06%	69.36%	66.57%	59.62%	80.68%	76.79%
Points	2	2	1	2	1	2

Total Points Across SS1 and SS2(*)	10
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Your State's Data Comparison Score	2
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⁹ Values based on data for States with summary statement denominator greater than 199 exiters.

Appendix D

II. (b) Performance Change Over Time:

Comparing your State's FFY 2021 data to your State's FFY 2020 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of $p \leq .05$. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of '0', '1', or '2' for each State is based on the total points awarded. Where OSEP has approved a State's reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of 'N/A' for this element.

Test of Proportional Difference Calculation Overview

The summary statement percentages from the previous year's reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of $p \leq .05$. The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

e.g., C3A FFY2021% - C3A FFY2020% = Difference in proportions

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on¹⁰

$$\text{Sqrt}[(\text{FFY}2021\% * (1-\text{FFY}2021\%)) / \text{FFY}2021\text{N}] + ((\text{FFY}2022\% * (1-\text{FFY}2022\%)) / \text{FFY}2022\text{N}) = \text{Standard Error of Difference in Proportions}$$

Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.

Difference in proportions / standard error of the difference in proportions = z score

Step 4: The statistical significance of the z score is located within a table and the p value is determined.

Step 5: The difference in proportions is coded as statistically significant if the p value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

Indicator 3 Overall Performance Change Score	Cut Points for Change Over Time in Summary Statements Total Score
0	Lowest score through 3
1	4 through 7
2	8 through highest

¹⁰Numbers shown as rounded for display purposes.

Summary Statement/ Child Outcome	FFY 2020 N	FFY 2020 Summary Statement (%)	FFY 2021 N	FFY 2021 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	573	86.91%	673	83.06%	-3.85	0.0202	-1.9070	0.0565	NO	1
SS1/Outcome B: Knowledge and Skills	640	72.81%	721	66.57%	-6.24	0.0249	-2.5095	0.0121	YES	0
SS1/Outcome C: Actions to meet needs	486	82.51%	585	80.68%	-1.83	0.0237	-0.7696	0.4416	NO	1
SS2/Outcome A: Positive Social Relationships	672	75.60%	780	69.36%	-6.24	0.0234	-2.6664	0.0077	YES	0
SS2/Outcome B: Knowledge and Skills	672	62.65%	780	59.62%	-3.03	0.0256	-1.1836	0.2366	NO	1
SS2/Outcome C: Actions to meet needs	672	80.51%	780	76.79%	-3.71	0.0215	-1.7265	0.0843	NO	1

Total Points Across SS1 and SS2	4
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Your State's Performance Change Score	1
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Data Rubric

FFY 2021 APR¹¹

Part C Timely and Accurate Data -- SPP/APR Data		
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	N/A	0
10	1	1
11	1	1
	Subtotal	12
APR Score Calculation	Timely Submission Points - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	17

¹¹ In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

Table	618 Data ¹²			Total
	Timely	Complete Data	Passed Edit Check	
Child Count/Settings Due Date: 4/6/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
			Subtotal	9
618 Score Calculation			Grand Total (Subtotal X 2) =	18.00

Indicator Calculation	
A. APR Grand Total	17
B. 618 Grand Total	18.00
C. APR Grand Total (A) + 618 Grand Total (B) =	35.00
Total N/A Points in APR Data Table Subtracted from Denominator	1
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	35.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.

¹² In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 2 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part C 618 Data

1) Timely – A State will receive one point if it submits counts/ responses for an entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	1 st Wednesday in April
Part C Exiting	Part C Exiting Collection in EMAPS	1 st Wednesday in November
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	1 st Wednesday in November

2) Complete Data – A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

<https://sites.ed.gov/idea/how-the-department-made-determinations/>