

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2019**

North Dakota



**PART C DUE
February 1, 2021**

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

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 2019, five (5) of the regions had one (1) Infant Development program, one (1) region had two (2) Infant Development programs, and two (2) 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.

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 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 2019" contains a link to North Dakota's COVID-19 guidance.

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 the past eight (8) 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 eight (8) federal fiscal years, ND State Office staff, along with data staff, have reviewed the queries used from North Dakota's electronic data system to ensure 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.

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 and reporting the transition process to a new child outcomes tool in our last APR. The outcome tool replacement was needed due to challenges in using the Oregon Early Childhood Assessment tool (Oregon). The Oregon 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. Staff received AEPS training in June 2017 and were able to pilot the system for the months of July-September 2017. North Dakota began using the AEPS and entering data into the AEPSi data system on 10.2.17. The previous tool, the Oregon, was used as the assessment tool for child outcome data in FFY 2017 before the transition date of 10.2.17.

For child outcome data for FFY 2019, North Dakota is able to report using the AEPS. As the transition to the AEPS continues, North Dakota is monitoring the data for the AEPS cohort to assure fidelity, as well as valid and reliable data. In an effort to monitor the continued increase of use of the new tool during this transitional time, North Dakota examines the completion rate of the AEPS data monthly for increase in use. There has been an average monthly increase in entry and exit AEPS data of 50.2 children monthly. North Dakota expects that there will be continued progression in reporting AEPS data as a full cohort is realized by FFY 2020.

Technical Assistance System:

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

General Supervision/APR Preparation/SSIP Preparation/Part C Regulation Implementation – DaSy/ECPC/ECTA/ITCA/IDC/NCSI. 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 attachment labeled "Technical Assistance System ND-C FFY 2019" contains the specific instances of TA that were utilized during FFY 2019.

The State received ongoing TA from NCSI, CADRE, IDC, 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. Another focus was on implementing a new Child Outcome Tool in our system to improve Indicator 3. This work continues. In addition, ECTA provided TA in the development of Procedural Safeguards and Prior Written Notice.

The State continues to utilize federal TA to develop actions to improve Indicator 8 data transference from Part C to 619.

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, including working in the Social-Emotional Collaborative with NCSI, and other state work. This included action strand improvement plans and evaluation plans development.

Professional Development System:

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

The attachment labeled "Professional Development System ND-C FFY 2019" contains the specific instances of TA that were utilized during FFY 2019.

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.

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.

Stakeholder Involvement:

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

The North Dakota Department of Human Services (ND DHS), as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC) in reviewing the FFY 2018 SPP/APR data on January 23rd, 2020. ND DHS 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 DHS 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.

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

YES

Reporting to the Public:

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

All required public information is contained on ND Early Intervention's website. The FFY 2018 APR and SPP are posted under the Part C Info tab on ND Early Intervention's website.

Links to these documents are provided in the attachment labeled "Public Reporting information ND-C FFY 2019" included in this indicator.

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.

Intro - Prior FFY Required Actions

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

Response to actions required in FFY 2018 SPP/APR

Intro - OSEP Response

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

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	59.26%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	97.70%	98.92%	97.43%	96.70%	98.24%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
1,097	1,255	98.24%	100%	98.41%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

138

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.

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, 2019 - June 30, 2020

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 2019.

In FFY 2019, North Dakota had 13 early intervention programs across the state. The performance of all 13 of these programs is represented in this data.

If needed, provide additional information about this indicator here.

For FFY 2019, North Dakota had 20 instances of noncompliance due to agency reasons. For this indicator, three (3) instances of noncompliance were due to provider illness, one (1) instance of noncompliance was due to provider shortage, and 16 instances of noncompliance were due to provider oversight.

Of the 20 instances of noncompliance due to agency reasons, seven (7) are attributed to a single provider. This provider is in a Regional Action Plan (RAP) and has been receiving targeted Technical Assistance (TA). The remaining 13 instances were attributable to an additional nine (9) providers. Findings will be issued to all ten (10) programs in winter 2021.

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 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.

In Indicator 1, Timely Services, North Dakota was able to facilitate a smooth transition from in-person services to virtual services due to our immediate issuance of guidance and authorization for all programs to begin providing services virtually on March 1, 2020. Programs and families made individual decisions about how services should be provided, keeping in mind the health and safety of the family and home visitor, as well as the current COVID-19 levels in the area. Due to this quick transition, the effects of COVID-19 on Indicator 1 are minimal. Of the 168 instances of delay of service provision due to family reason, 12 were due to the family's request to delay services due to COVID-19 concerns, one (1) was due to the family being ill with COVID-19, and none were due to the home visitor being ill with COVID-19. The remaining 155 instances were due to exceptional family circumstances, such as family illness (not COVID-19), family request, or family out of town.

4/13/21: Upon review of the data, the number of documented delays attributable to exceptional family circumstances is correct at 138. The narrative language explaining the reasons for delay (above) is correct.

The narrative language explaining COVID-19 reasons for delay contained an error in numbers, listing 168 family reasons for delay. The corrected language is below:

Of the 138 instances of delay of service provision due to family reason, 12 were due to the family's request to delay services due to COVID-19 concerns, one (1) was due to the family being ill with COVID-19, and none were due to the home visitor being ill with COVID-19. The remaining 125 instances were due to exceptional family circumstances, such as family illness (not COVID-19), family request, or family out of town.

In response to OSEP's concern over the timeline of noncompliance notification, North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began. Letters of Findings were issued to programs in February 2021, which is 4 months after noncompliance was identified. North Dakota will implement a system to issue Letters of Findings within 3 months after noncompliance is identified.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

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 2018 on 3.3.2020 to ten (10) programs. Correction was verified according to Federal requirements. All ten (10) findings were verified as corrected on 12.3.20 and the ten (10) programs were notified on 1.20.21. Of the ten (10) programs, nine (9) demonstrated 100% compliance after one (1) data review, and one (1) program demonstrated 100% compliance after six (6) data reviews.

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

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 on 5.7.20, that in 18 of the 21 individual cases the children received their service, although late, and in 3 individual cases, the children were no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for all programs on 5.7.20. Correction was verified according to Federal requirements. All ten (10) findings were verified as corrected on 12.3.20 and the ten (10) programs were notified on 1.20.21.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

1 - Prior FFY Required Actions

None

1 - OSEP Response

In its description of correction of noncompliance, the State reported that "The state issued findings for noncompliance found in FFY 2018 on 3.3.2020 to ten (10) programs." Additionally, in discussing instances of noncompliance in its FFY 2019 data, the State reported in the "additional information about this indicator" section that "findings will be issued to all ten (10) programs in winter 2021. OSEP reminds the State that written notification of findings needs to occur as soon as possible after the State identifies noncompliance; generally, OSEP expects written findings to be issued less than three months from discovery.

1 - Required Actions

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

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

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	98.26%

FFY	2014	2015	2016	2017	2018
Target>=	99.30%	99.30%	99.30%	99.30%	99.70%
Data	99.83%	100.00%	100.00%	100.00%	99.93%

Targets

FFY	2019
Target>=	99.80%

Targets: Description of Stakeholder Input

The North Dakota Department of Human Services (ND DHS), as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC) in reviewing the FFY 2018 SPP/APR data on January 23rd, 2020. ND DHS 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 DHS 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.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,567
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	1,567

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
1,567	1,567	99.93%	99.80%	100.00%	Met Target	No Slippage

Provide additional information about this indicator (optional)

The total number of infants and toddlers with an IFSP and those served in a home or community setting in FFY 2019 data increased to 1567 as compared to 1520 served in home and community settings in FFY 2018. There were 47 more infants and toddlers with IFSPs in the child count this year as compared to FFY 2018.

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 = $\left[\frac{\text{\# of infants and toddlers who did not improve functioning}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.

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 = $\left[\frac{\text{\# of infants and toddlers reported in progress category (c) plus \# of infants and toddlers reported in category (d)}}{\text{\# of infants and toddlers reported in progress category (a) plus \# of infants and toddlers reported in progress category (b) plus \# of infants and toddlers reported in progress category (c) plus \# of infants and toddlers reported in progress category (d)}} \right] \times 100$.

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 = $\left[\frac{\text{\# of infants and toddlers reported in progress category (d) plus \# of infants and toddlers reported in progress category (e)}}{\text{total \# of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)}} \right] \times 100$.

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

The North Dakota Department of Human Services (ND DHS), as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC) in reviewing the FFY 2018 SPP/APR data on January 23rd, 2020. ND DHS 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 DHS 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.

Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2008	Target>=	37.80%	37.90%	38.00%	39.10%	39.20%
A1	33.30%	Data	44.33%	72.46%	72.04%	72.14%	71.96%
A2	2008	Target>=	44.80%	44.90%	45.00%	45.10%	60.40%
A2	60.30%	Data	42.77%	41.71%	43.42%	37.50%	67.27%
B1	2008	Target>=	61.20%	61.30%	61.40%	61.50%	62.50%
B1	47.50%	Data	59.08%	69.03%	66.67%	67.09%	64.11%
B2	2008	Target>=	46.30%	46.40%	46.50%	46.60%	52.10%
B2	52.00%	Data	38.48%	36.51%	36.96%	33.23%	51.80%
C1	2008	Target>=	67.50%	67.60%	67.70%	67.80%	68.80%
C1	64.80%	Data	64.95%	78.18%	78.30%	77.95%	69.54%
C2	2008	Target>=	68.00%	68.10%	68.20%	68.30%	81.00%
C2	80.90%	Data	59.18%	57.80%	57.78%	55.49%	73.38%

Targets

FFY	2019
Target A1>=	60.50%
Target A2>=	60.50%
Target B1>=	62.60%
Target B2>=	52.20%
Target C1>=	68.90%
Target C2>=	81.10%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

647

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	8	1.24%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	78	12.06%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	112	17.31%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	302	46.68%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	147	22.72%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	414	500	71.96%	60.50%	82.80%	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	449	647	67.27%	60.50%	69.40%	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	8	1.24%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	203	31.38%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	75	11.59%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	282	43.59%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	79	12.21%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	357	568	64.11%	62.60%	62.85%	Met Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	361	647	51.80%	52.20%	55.80%	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	0.46%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	106	16.38%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	42	6.49%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	251	38.79%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	245	37.87%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
C1. Of those children who entered or exited the program	293	402	69.54%	68.90%	72.89%	Met Target	No Slippage

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
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							
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	496	647	73.38%	81.10%	76.66%	Did Not Meet Target	No Slippage

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	1,226
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.	167

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. The previous tool, the Oregon, was used as the assessment tool for child outcome data in FFY 2017 as North Dakota transitioned to a new tool, the AEPS, which had a low N of 11 due to moving from the Oregon to the new AEPS tool.

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 second APR year of reporting the AEPS data for this indicator since the performance data represents the larger sample of children, N=647, more than doubling since FFY 2018. The Oregon performance data continue to decline in numbers of children as expected due to the transition to the AEPS with a continued decrease to N=76 during FFY 2019.

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 October 2nd has their entry and exit using the AEPS.

North Dakota continues to transition from the Oregon tool to the AEPS. The performance data for this indicator is comprised of AEPS data for the 647 infants and toddlers for whom the state had entry and exit ratings with the AEPS, which is higher than the 76 children for whom the state had entry and exit data with the old tool, the Oregon. North Dakota had 1226 children who exited in FFY 2019. Entry/exit data of 76 children were recorded using the phased-out Oregon tool. The new tool, AEPS, database includes 647 children with entry/exit data, and 167 children with less than 6 months of service.

The AEPS data is included in the performance data for this indicator with the larger N=647; the Oregon FFY 2019 data has an N=76, which continues to decrease with the transition to the AEPS. The Oregon is currently embedded into North Dakota's electronic data system (Therap), and entry occurs online. The Service Coordinator (DDPM) is responsible to ensure completion of the tool by local early intervention providers. Initial child outcome assessment (also known as the Child PAR) is completed and entered into the data system by early intervention providers and activated by the Service Coordinator (DDPM) within 30 calendar days prior to the child's third birthday or exiting services.

With the transition to the AEPS, the data is much improved from the previous tool reflecting no slippage in FFY 2019. The FFY 2019 data demonstrates

an increase in five out of six summary statements. This is an improvement from FFY 2018, which had three out of six summary statements showing an increase in performance and is considered more accurate and reliable with use of the new tool. As the transition to the AEPS continues, North Dakota is monitoring the data for the AEPS cohort to assure fidelity, as well as valid and reliable data. In an effort to monitor the continued increase of use of the new tool during this transitional time, North Dakota examines the completion rate of the AEPS data monthly for increase in use. There has been an average monthly increase in AEPS entry and exit data of 50.2 children monthly.

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. This resulted in no impact to Indicator 3 due to COVID-19.

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

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

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2006	Target>=	87.50%	87.60%	87.70%	87.80%	88.20%
A	88.12 %	Data	99.51%	97.67%	98.77%	98.08%	98.45%
B	2006	Target>=	93.10%	93.20%	93.30%	93.40%	94.00%
B	88.46 %	Data	99.76%	98.00%	100.00%	98.63%	99.07%
C	2006	Target>=	91.70%	91.80%	91.90%	92.00%	92.60%
C	85.79 %	Data	99.51%	96.66%	99.38%	98.36%	98.76%

Targets

FFY	2019
Target A>=	90.00%
Target B>=	94.10%
Target C>=	92.70%

Targets: Description of Stakeholder Input

The North Dakota Department of Human Services (ND DHS), as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC) in reviewing the FFY 2018 SPP/APR data on January 23rd, 2020. ND DHS 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 DHS 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.

FFY 2019 SPP/APR Data

The number of families to whom surveys were distributed	1,614
Number of respondent families participating in Part C	451
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	438
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	451
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	448
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	451
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	441
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	451

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	98.45%	90.00%	97.12%	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)	99.07%	94.10%	99.33%	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)	98.76%	92.70%	97.78%	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 families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.	NO

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

The 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, and technical assistance from ECTA, Sioban Colgan. 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 continues its focus on increasing the return rate of underrepresented families, specifically American Indian. Historically, the response rate for American Indian has been the lowest of all demographic areas. The ICC began work on increasing the response rate for this population in FFY 2018. Strategies that were employed in FFY 2018 were largely successful in increasing the response rate for American Indian. As such, the ICC has decided to continue to focus on increasing this return rate in future years. Additionally, North Dakota has several large American Indian reservations and has a large American Indian population. The State and ICC will continue its review and data drill-down of family survey methodology in the upcoming year. The Part C Coordinator maintains contact with technical assistance from ECTA to improve strategies for representativeness.

Due to the in-person restrictions implemented during COVID-19, a drastic change in distribution methodology was necessary. In FFY 2018 surveys were individually delivered to families at an in-person visit. In FFY 2019, it was necessary to mail surveys out to families who had been in services for at least 3 months at the time of the survey. Primary Early Intervention Professionals (PEIPs) followed-up with families at the next virtual home visit to encourage families to complete the survey. With the extenuating circumstances of COVID-19, the decreased response rate and change in representativeness was anticipated.

A variety of strategies were used in FFY 2018, including a specific survey period marketed to families, parent awareness materials, and coordination

between the state office, Service Coordinators, and PEIPs in survey distribution. In FFY 2020, North Dakota plans to return to the strategies used in FFY 2018 which resulted in an increase in representativeness.

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

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 decrease to 97.12% in FFY 2019 from 98.45% in FFY 2018. 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 an increase to 99.33% in FFY 2019 from 99.07% in FFY 2018. 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, increasing to 97.78% in FFY 2019 from 98.76% in FFY 2018. A total of 451 surveys returned in FFY 2019, which is a decrease from 645 surveys in FFY 2018. The return rate decreased to 27.94 % in FFY 2019 from 39.74% in FFY 2018.

Due to the in-person restrictions implemented during COVID-19, a drastic change in distribution methodology was necessary. In FFY 2018 surveys were individually delivered to families at an in-person visit, whereas in FFY 2019, it was necessary to mail surveys. Families of children who received services for at least three months between January 1, 2020, and March 31, 2020, 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 to be mailed and handed out to the state office by May 3rd. One survey 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 virtual home visit after receiving 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. With the extenuating circumstances of COVID-19, the decreased response rate and change in representativeness was anticipated.

The ECO Family Outcomes Survey-Revised (FOS-R) was used, and it included a cover letter and newsletter with the FFY 2018 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.

Based on the electronic record, there were 1614 families whose child was in service for at least three months between January 1, 2020, and March 21, 2020, and therefore eligible to receive a survey. A total of 451 surveys were returned in FFY 2019, which is a decrease from 645 surveys in FFY 2018. The return rate decreased to 27.94% in FFY 2019 from 39.74% in FFY 2018. This was a decrease of 194 surveys from 645 in FFY 2018.

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

American Indian/AK Native: Returned 4.4%, In Program 8.74%
Asian: Returned 1.1%, In Program 0.67%
Black/African American: Returned 3.1%, In Program 3.9%
Hispanic or Latino: Returned 0.7%, In Program 4.71%
Native Hawaiian or Pacific Islander: Returned 0.4%, In Program 0.20%
White: Returned 81.6%, In Program 70.34%
More than One Race: Returned, 8.6% In Program 11.43%

Based on the information above, in FFY 2019, the response rate was under representative for Black/African American, American Indian/AK Native, Hispanic or Latino, and More than One race. The response rate was representative for Asian. . The response rate was over representative for Native Hawaiian or Pacific Islander, and White. In FFY 2019, the state increased representativeness in White and More than One race. Asian, Black/African American and Native Hawaiian or Pacific Islander representativeness remained the same from FFY 2018. American Indian/AK Native and Hispanic or Latino representativeness decreased from FFY 2018. The survey does not have an identifier and participants must choose to self-identify their race. There is a survey question about race/ethnicity allowing participants to choose more than one race/ethnicity.

Provide additional information about this indicator (optional)

Due to the in-person restrictions implemented during COVID-19, a drastic change in methodology was necessary. In FFY 2018 surveys were individually delivered to families at an in-person visit. In FFY 2019, it was necessary to mail surveys out to families who had been in services for at least 3 months at the time of the survey. Primary Early Intervention Professionals (PEIPs) followed-up with families at the next virtual home visit to encourage families to complete the survey. With the extenuating circumstances of COVID-19, the decreased response rate and change in representativeness was anticipated.

A variety of strategies were used in FFY 2018, including a specific survey period marketed to families, parent awareness materials, and coordination between the state office, Service Coordinators, and PEIPs in survey distribution. In FFY 2020, North Dakota plans to return to the strategies used in FFY 2018 which resulted in an increase in representativeness.

4 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Response to actions required in FFY 2018 SPP/APR

As discussed in Indicator 4 data above:

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 decrease to 97.12% in FFY 2019 from 98.45% in FFY 2018. 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 an increase to 99.33% in FFY 2019 from 99.07% in FFY 2018. 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, increasing to 97.78% in FFY 2019 from 98.76% in FFY 2018. A total of 451 surveys returned in FFY 2019, which is a decrease from 645 surveys in FFY 2018. The return rate decreased to 27.94 % in FFY 2019 from 39.74% in FFY 2018.

Due to the in-person restrictions implemented during COVID-19, a drastic change in distribution methodology was necessary. In FFY 2018 surveys were individually delivered to families at an in-person visit, whereas in FFY 2019, it was necessary to mail surveys. Families of children who received services for at least three months between January 1, 2020, and March 31, 2020, 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

to be mailed and handed out to the state office by May 3rd. One survey 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 virtual home visit after receiving 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. With the extenuating circumstances of COVID-19, the decreased response rate and change in representativeness was anticipated.

The ECO Family Outcomes Survey-Revised (FOS-R) was used, and it included a cover letter and newsletter with the FFY 2018 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.

Based on the electronic record, there were 1614 families whose child was in service for at least three months between January 1, 2020, and March 21, 2020, and therefore eligible to receive a survey. A total of 451 surveys were returned in FFY 2019, which is a decrease from 645 surveys in FFY 2018. The return rate decreased to 27.94% in FFY 2019 from 39.74% in FFY 2018. This was a decrease of 194 surveys from 645 in FFY 2018.

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

American Indian/AK Native: Returned 4.4%, In Program 8.74%

Asian: Returned 1.1%, In Program 0.67%

Black/African American: Returned 3.1%, In Program 3.9%

Hispanic or Latino: Returned 0.7%, In Program 4.71%

Native Hawaiian or Pacific Islander: Returned 0.4%, In Program 0.20%

White: Returned 81.6%, In Program 70.34%

More than One Race: Returned, 8.6% In Program 11.43%

Based on the information above, in FFY 2019, the response rate was under representative for Black/African American, American Indian/AK Native, Hispanic or Latino, and More than One race. The response rate was representative for Asian. . The response rate was over representative for Native Hawaiian or Pacific Islander, and White. In FFY 2019, the state increased representativeness in White and More than One race. Asian, Black/African American and Native Hawaiian or Pacific Islander representativeness remained the same from FFY 2018. American Indian/AK Native and Hispanic or Latino representativeness decreased from FFY 2018. The survey does not have an identifier and participants must choose to self-identify their race. There is a survey question about race/ethnicity allowing participants to choose more than one race/ethnicity.

4 - OSEP Response

4 - Required Actions

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

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	1.58%

FFY	2014	2015	2016	2017	2018
Target >=	2.00%	2.00%	2.00%	2.10%	2.20%
Data	1.76%	1.93%	2.29%	2.31%	2.35%

Targets

FFY	2019
Target >=	2.24%

Targets: Description of Stakeholder Input

The North Dakota Department of Human Services (ND DHS), as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC) in reviewing the FFY 2018 SPP/APR data on January 23rd, 2020. ND DHS 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 DHS 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.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	255
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	10,483

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
255	10,483	2.35%	2.24%	2.43%	Met Target	No Slippage

Compare your results to the national data

This is above the state target and showed a slight increase from last year's performance. On November 1st, 2019 there were 255 children birth to one year of age with IFSPs in North Dakota. The number of children served is from Table 1 (618 data). North Dakota met their target of 2.35% for this indicator. The total number of children birth to one year of age showed an increase of one child from FFY 2018. The national average for FFY 2019 is 1.37%. North Dakota exceeded the national average. The population of children birth to one year of age decreased from 10,802 to 10,483.

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	3.02%

FFY	2014	2015	2016	2017	2018
Target >=	3.43%	3.43%	3.43%	3.43%	3.46%
Data	3.66%	3.75%	3.73%	4.17%	4.62%

Targets

FFY	2019
Target >=	3.48%

Targets: Description of Stakeholder Input

The North Dakota Department of Human Services (ND DHS), as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC) in reviewing the FFY 2018 SPP/APR data on January 23rd, 2020. ND DHS 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 DHS 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.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	1,567
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	32,084

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
1,567	32,084	4.62%	3.48%	4.88%	Met Target	No Slippage

Compare your results to the national data

This is above state target and shows a slight increase. On November 1st, 2019 there were 1567 children birth to three years of age with IFSPs in North Dakota. The number of children served is from Table 1 (618 data). North Dakota met their target of 4.62% for this indicator. The national average for FFY 2019 is 3.70%. North Dakota exceeded the national average. The total number of children birth to three years of age with an IFSP increased from 1521 in FFY 2018 to 1567 in FFY 2019. The population of children birth to three years of age was 32,084 in FFY 2019.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	39.39%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	98.04%	98.76%	98.00%	97.84%	98.94%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
912	1,021	98.94%	100%	99.02%	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.

99

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, 2019 - June 30, 2020

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 on Indicator 7, using Therap, for FFY 2019.

In FFY 2019, North Dakota had thirteen early intervention programs across the state. The performance of all thirteen of these programs is represented in this data.

Provide additional information about this indicator (optional)

For FFY 2019, North Dakota had 10 instances of noncompliance due to agency reasons. For this indicator, one (1) instance of noncompliance was due to provider illness, three (3) instances of noncompliance were due to provider shortage, and six (6) instances of noncompliance were due to provider oversight.

The ten (10) instances of noncompliance in this indicator are attributable to five (5) providers. Findings will be issued to all five (5) programs in winter 2021.

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 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.

In Indicator 7, 45-Day Timeline, North Dakota was able to facilitate a smooth transition from in-person services to virtual services due to our immediate issuance of guidance and authorization for all programs to begin providing services virtually on March 1, 2020. Programs and families made individual decisions about how services should be provided, keeping in mind the health and safety of the family and home visitor, as well as the current COVID-19 levels in the area. Due to this quick transition, the effects of COVID-19 on Indicator 7 are minimal. Of the 99 instances of delay of service provision due to family reason, 12 were due to the family's request to delay services due to COVID-19 concerns, one (1) was due to the family being ill with COVID-19, and none were due to the home visitor being ill with COVID-19. The remaining 86 instances were due to exceptional family circumstances such as family illness (not COVID-19), family request, or family out of town.

4/13/21: In response to OSEP's concern over the timeline of noncompliance notification, North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began. Letters of Findings were issued to programs in February 2021, which is 4 months after noncompliance was identified. North Dakota will implement a system to issue Letters of Findings within 3 months after noncompliance is identified.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

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 2018 on 3.3.2020 to four (4) programs. Correction was verified according to Federal requirements. All four (4) findings were verified as corrected on 6.15.20 and the four (4) programs were notified on 1.20.21. Of the four (4) programs, four (4) demonstrated 100% compliance after one (1) data review.

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

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 on 5.7.20, that in four (4) of the four (4) individual cases, the child received their meeting, although late, and 0 individual cases were no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for all programs on 5.7.20. Correction was verified according to Federal requirements. All four (4) findings were verified as corrected on 6.15.20 and the four (4) programs were notified on 1.20.21.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

7 - Prior FFY Required Actions

None

7 - OSEP Response

In its description of correction of noncompliance, the State reported that "The state issued findings for noncompliance found in FFY 2018 on 3.3.2020 to four (4) programs." Additionally, in discussing instances of noncompliance in its FFY 2019 data, the State reported in the "additional information about this indicator" section that "findings will be issued to all five (5) programs in winter 2021. OSEP reminds the State that written notification of findings needs to occur as soon as possible after the State identifies noncompliance; generally, OSEP expects written findings to be issued less than three months from discovery.

In providing additional information about this indicator, the State reported that, "North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began." However, the State also reported that, "For FFY 2019, North Dakota had 10 instances of noncompliance due to agency reasons." Therefore, OSEP is unclear how many instances of noncompliance occurred in FFY 2019.

7 - Required Actions

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

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

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.33%	100.00%	100.00%	95.92%	98.09%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
165	170	98.09%	100%	97.06%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

In FFY 2019, ten (10) of the thirteen (13) early intervention programs had 100% compliance in Indicator 8A. Two (2) of the instances of noncompliance were attributable to a new early intervention program. The remaining three (3) instances were due to staff turnover and training in established early intervention programs. North Dakota is providing ongoing training and focus on transition outcomes through the Partnering for Outcomes With Real Meaning (POWR) project, and improved and updated IFSP format in Therap. Extensive training has been provided to all providers in these areas.

Number of documented delays attributable to exceptional family circumstances

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

0

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 2019. Child records, using a random sample representative of all ten programs, were pulled from the data set for review based on the size of the program. 170 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements. In FFY 2019, North Dakota had thirteen early intervention programs across the state. The performance of all thirteen of these programs is represented in this data.

Provide additional information about this indicator (optional)

For FFY 2019, North Dakota had five (5) instances of noncompliance due to agency reasons. For this indicator, all five (5) instances of noncompliance were due to provider oversight.

The five (5) instances of noncompliance due to agency reasons are attributed to three (3) programs. Findings will be issued to all three (3) programs in winter 2021.

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 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.

In Indicator 8a, Transition Steps and Services, North Dakota was able to facilitate a smooth transition from in-person services to virtual services due to our immediate issuance of guidance and authorization for all programs to begin providing services virtually on March 1, 2020. Programs and families made individual decisions about how services should be provided, keeping in mind the health and safety of the family and home visitor, as well as the current COVID-19 levels in the area. Due to this quick transition, the effects of COVID-19 on Indicator 8a are minimal. Within the data that were pulled, there were no instances of delay attributed to a family reason or COVID-19.

4/13/21: In response to OSEP's concern over the timeline of noncompliance notification, North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began. Letters of Findings were issued to programs in February 2021, which is 4 months after noncompliance was identified. North Dakota will implement a system to issue Letters of Findings within 3 months after noncompliance is identified.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

The state issued findings for noncompliance found in FFY 2018 on 3.3.20 to three programs.

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 2018 on 3.3.2020 to three (3) programs. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on 6.1.20 and the three (3) programs were notified on 1.20.21. Of the three (3) programs, three (3) demonstrated 100% compliance after one (1) data review.

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

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 on 5.7.20, that in three (3) of the three (3) individual cases, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for all programs on 5.7.20. Correction was verified according to Federal requirements. All three (3) findings were verified as corrected on 6.1.20 and the three (3) programs were notified on 1.20.21.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8A - Prior FFY Required Actions

None

8A - OSEP Response

In its description of correction of noncompliance, the State reported that "The state issued findings for noncompliance found in FFY 2018 on 3.3.2020 to three programs." Additionally, in discussing instances of noncompliance in its FFY 2019 data, the State reported in the "additional information about this indicator" section that "findings will be issued to all three (3) programs in winter 2021. OSEP reminds the State that written notification of findings needs to occur as soon as possible after the State identifies noncompliance; generally, OSEP expects written findings to be issued less than three months from discovery.

In providing additional information about this indicator, the State reported that, "North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began." However, the State also reported that, "For FFY 2019, North Dakota had 5 instances of noncompliance due to agency reasons." Therefore, OSEP is unclear how many instances of noncompliance occurred in FFY 2019.

8A - Required Actions

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

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

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	95.52%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	22.46%	68.60%	93.41%	88.71%	85.00%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
122	170	85.00%	100%	89.71%	Did Not Meet Target	No Slippage

Number of parents who opted out

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

34

Describe the method used to collect these data

The state used a full year of data from its electronic record system, Therap, to identify children whose records were reviewed to monitor for the presence of the notification to the LEA/SEA. 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 2019. Child records, using a random sample representative of all thirteen programs, were pulled from the data set for review based on the size of the program. 170 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements. In FFY 2019, North Dakota had thirteen early intervention programs across the state. The performance of all thirteen 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.

The state used a full year of data from its electronic record system, Therap, to identify children whose records were reviewed to monitor for the presence of the notification to the LEA/SEA. 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 2019. Child records, using a random sample representative of all thirteen programs, were pulled from the data set for review based on the size of the program. 170 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements. In FFY 2019, North Dakota had thirteen early intervention programs across the state. The performance of all thirteen of these programs is represented in this data.

Provide additional information about this indicator (optional)

For LEA notification: A total of 170 records were reviewed. Of those 170 records, 34 parents chose to opt-out of the notification. Of the 136 that required LEA notification, 125 of the records contained documentation of the notification. Eleven (11) records did not contain a notification, therefore, North Dakota's performance for LEA notification is at 91.91%. Ten (10) programs had noncompliance and will be issued letters of findings. The state will continue to track correction of noncompliance until verification is completed according to federal requirements.

For SEA notification: A total of 170 records were reviewed. Of those 170 records, 34 parents chose to opt out of the notification. The Part C Coordinator reviewed the timeliness of the SEA notification being sent for these 136 children. Of the 136 that required SEA notification, 133 records were sent timely. Three (3) records were not sent timely. This is a decrease from FFY 2018 when seven (7) records were not sent timely.

For FFY 2019, North Dakota had 14 instances of noncompliance due to agency reasons. For LEA notification on this indicator, in six (6) instances of noncompliance, the LEA Notification was sent late due to provider oversight, and in eight (8) instances of noncompliance, the Notification was not sent due to provider oversight.

The 14 instances of noncompliance due to agency reasons are attributed to 12 programs. Findings will be issued to all 12 programs in winter 2021.

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 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.

In Indicator 8b, SEA/LEA Notification, North Dakota was able to facilitate a smooth transition from in-person services to virtual services due to our immediate issuance of guidance and authorization for all programs to begin providing services virtually on March 1, 2020. Programs and families made individual decisions about how services should be provided, keeping in mind the health and safety of the family and home visitor, as well as the current COVID-19 levels in the area. Due to this quick transition, the effects of COVID-19 on Indicator 8b are minimal. There were no delays attributable to COVID-19, as notification continued as per usual.

4/13/21: In response to OSEP's concern over the timeline of noncompliance notification, North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began. Letters of Findings were issued to programs in February 2021, which is 4 months after noncompliance was identified. North Dakota will implement a system to issue Letters of Findings within 3 months after noncompliance is identified.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

The state issued letters of findings to six (6) programs on 3.3.20.

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. For programs with less than 30 children, the highest number of current records possible were pulled that were available for review. 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.

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

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 on 5.7.20, that in three (3) of the 11 individual cases, an LEA notification was sent, although late, and in 8 of the individual cases, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for all programs on 5.7.20. Correction was verified according to Federal requirements. All six (6) findings were verified as corrected on 6.1.20 and the six (6) programs were notified on 1.20.21.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8B - Prior FFY Required Actions

None

8B - OSEP Response

In its description of correction of noncompliance, the State reported that "The state issued letters of findings to six (6) programs on 3.3.20." Additionally, in discussing instances of noncompliance in its FFY 2019 data, the State reported in the "additional information about this indicator" section that "findings will be issued to all twelve (12) programs in winter 2021. OSEP reminds the State that written notification of findings needs to occur as soon as possible after the State identifies noncompliance; generally, OSEP expects written findings to be issued less than three months from discovery.

In providing additional information about this indicator, the State reported that, "North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began." However, the State also reported that, "For FFY 2019, North Dakota had 14 instances of noncompliance due to agency reasons." Therefore, OSEP is unclear how many instances of noncompliance occurred in FFY 2019.

8B - Required Actions

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

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

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

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

Instructions

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	83.30%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.38%	97.32%	100.00%	100.00%	99.36%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
169	170	99.36%	100%	100.00%	Met Target	No Slippage

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

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

0

Number of documented delays attributable to exceptional family circumstances

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

1

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

State monitoring

Describe the method used to select EIS programs for monitoring.

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 2019. Child records, using a random sample representative of all thirteen programs, were pulled from the data set for review based on the size of the program. 170 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements. In FFY 2019, North Dakota had thirteen early intervention programs across the state. The performance of all thirteen of these programs is represented in this data.

Provide additional information about this indicator (optional)

For FFY 2019, North Dakota had 0 instances of noncompliance due to agency reasons.

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 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.

In Indicator 8c, Transition Conference, North Dakota was able to facilitate a smooth transition from in-person services to virtual services due to our immediate issuance of guidance and authorization for all programs to begin providing services virtually on March 1, 2020. Programs and families made individual decisions about how services should be provided, keeping in mind the health and safety of the family and home visitor, as well as the current COVID-19 levels in the area. Due to this quick transition, the effects of COVID-19 on Indicator 8c are minimal. Of the one (1) instance of delay of service provision due to family reason, 0 were due to COVID-19.

4/13/21: In response to OSEP's concern over the timeline of noncompliance notification, North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began. Letters of Findings were issued to programs in February 2021, which is 4 months after noncompliance was identified. North Dakota will implement a system to issue Letters of Findings within 3 months after noncompliance is identified.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

The state issued letters of findings to one program on 3.3.20.

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 2018 on 3.3.2020 to one (1) programs. Correction was verified according to Federal requirements. All one (1) findings was verified as corrected on 5.22.20 and the one (1) program was notified on 1.20.21. Of the one (1) program, one (1) demonstrated 100% compliance after one (1) data review.

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

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 on 5.7.20, 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 all programs on 5.7.20. Correction was verified according to Federal requirements. All one (1) findings was verified as corrected on 5.22.20 and the one (1) programs were notified on 1.20.21.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8C - Prior FFY Required Actions

None

8C - OSEP Response

In its description of correction of noncompliance, the State reported that "The state issued findings for noncompliance found in FFY 2018 on 3.3.2020 to one (1) program." OSEP reminds the State that written notification of findings needs to occur as soon as possible after the State identifies noncompliance; generally, OSEP expects written findings to be issued less than three months from discovery.

In providing additional information about this indicator, the State reported that, "North Dakota became aware of the 20 instances of noncompliance for FFY 2019 in October 2020 when the review of APR data began." However, the State also reported that, "For FFY 2019, North Dakota had 0 instances of noncompliance due to agency reasons." Therefore, OSEP is unclear whether noncompliance occurred in FFY 2019.

8C - Required Actions

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

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the EDFacts 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

This Indicator is not applicable to the State.

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

The North Dakota Department of Human Services (ND DHS), as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC) in reviewing the FFY 2018 SPP/APR data on January 23rd, 2020. ND DHS 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 DHS 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.

North Dakota reported fewer than ten mediations held in FFY 2019. 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	2014	2015	2016	2017	2018
Target>=					
Data					

Targets

FFY	2019
Target>=	

FFY 2019 SPP/APR Data

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

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Designated Lead Agency Director

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

Name:

Tina Bay

Title:

Director, Developmental Disabilities Division

Email:

tbay@nd.gov

Phone:

701-328-8966

Submitted on:

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