

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**

Kentucky



**PART C DUE
February 1, 2021**

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The Department for Public Health is the administrative lead agency within the Cabinet for Health and Family Services (CHFS) for the Kentucky Early Intervention System. The system is comprised of fifteen (15) regional lead agencies, known as Points of Entry (POE). Contracts with two Local Health Departments (that jointly operate three POEs) and ten Community Mental Health Centers fund the majority of POEs. One POE operates jointly through a Community Mental Health Center and private hospital. The Office for Children with Special Health Care Needs (OCSHCN), a state agency, operates one POE. POEs are responsible for all referrals, initial evaluations and assessments, eligibility determination, service coordination, and child find activities. Over 1000 service providers, representing a variety of professional disciplines, provide early intervention services through contracts with the Department for Public Health. Kentucky uses an online-integrated data management system known as the Technology-assisted Observation and Teaming Support system (TOTS). TOTS provides an electronic early intervention record for each child referred to the early intervention system integrated that includes financial and management data.

Despite the Covid-19 pandemic positive results for children and families continued. Emergency regulations were promulgated to allow tele-intervention service delivery, effective March 23, 2020 in anticipation of the suspension of Part C services by Executive Order of the Governor on March 26, 2020. Tele-intervention, not previously used in the Kentucky Part C system, was implemented on April 6, 2020. The period between ordered suspension and implementation of tele-intervention was necessary for changes to the billing process and preparation of early intervention providers. Tele-intervention forced providers to use coaching as the methodology for services. Tele-intervention clearly identified "internet deserts" and inequity due to data plans that families hold. Over half the families enrolled in First Steps at the start of the state of emergency chose to suspend services until in-person services resumed. Referrals to First Steps were significantly less at this time. Referrals continue to be sixteen percent (16%) less than in FFY18.

Additional information related to data collection and reporting

Data collected prior to March 26, 2020 indicated an increase of children served by Part C. Compliance indicator monthly reports depicted an early intervention system that continued high rates of compliance to policies and procedures. The suspension of all but essential services in the Commonwealth caused a significant loss of referrals. Ongoing services were suspended, therefore creating missed deadlines. The total data available for Child Outcomes reports is 25% less than last year. This impacted the results along with the implementation of a new analysis. Children transitioning from Part C to Part B were unable to make a smooth transition. Many children could not be evaluated for Part B eligibility or, if already determined eligible, were unable to receive services because schools were closed.

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.

Contracts with the Point of Entry (POE) offices and early intervention providers require compliance with all applicable federal and state statutes and regulations. Contracts are enforced with noncompliance addressed by Corrective Action Plans (CAP), technical assistance, and training. Untimely correction of noncompliance results in sanctions including restricting services, financial penalties, and contract termination.

The State Lead Agency (SLA) has a variety of enforcement actions to use in conjunction with local determinations, lack of timely correction of noncompliance, or other circumstances that warrant SLA actions.

List of Enforcement Actions

- Increased frequency of technical assistance phone calls that addresses areas of concern and noncompliance;
- Focused onsite monitoring on a specific area of noncompliance;
- Development or revision of a professional development plan related to the areas of noncompliance;
- Completion of record reviews verified by the SLA staff at a frequency determined by the SLA and;
- Mentoring with other POE districts/providers demonstrating best practices in the identified area(s) of noncompliance;
- Collection and analysis of data related to area(s) of noncompliance at a frequency determined by the SLA and reviewed with SLA staff;
- Discussions with local stakeholders to identify barriers to compliance, CAP strategies and additional avenues for technical assistance and support;
- Withholding of POE payment, or if it is determined that one or more provider/providers are responsible for an area of noncompliance, withholding of payment from the provider agency;
- Recovery of funds; and,
- Termination of the district POE contract or, if it is determined that one or more providers are responsible for an area of noncompliance, termination the agency contract(s).

Methods to assess compliance include: comprehensive reviews (POE and providers), POE data reports, and desk audits of the POEs and early intervention providers. Onsite verification visits may occur, depending upon the issues discovered by the desk audits and resources of the SLA.

Billing Audits of the POEs and Early Intervention Providers

The lead agency conducts quarterly reviews of billing records for a POE and/or an early intervention provider. An ad hoc review of billing records for a POE or provider are conducted when there is a suspicion or report of billing irregularities. Claims are matched to the IFSP authorizations and service logs. Should billing irregularities be identified, the review is forwarded to the Office of the Inspector General for further investigation. The provider agency is suspended from new referrals while the investigation is pending. In the case of a POE, payment of submitted invoices are suspended (in part or in full) while the investigation is pending.

Chart Audits

POE Managers conduct chart audits a minimum of every six months, with each Service Coordinator (SC) being reviewed at least once a year. The audits consist of reviewing selected hard copy files as well as the associated information in the online data management system, TOTS, to ensure regulations and policies are followed. The results are maintained at the POE office and available to the SLA upon request. POE Managers summarize findings from these audits on a summary form and provide to the SLA. The General Supervision Coordinator tracks the completion of these forms and coordinates any technical assistance that may be needed.

District Determinations

All State Performance Plan indicators (compliance and results) are part of the District Determination process. District issuance of Determinations occurs in June (within the timelines established by law) and posted on the Department for Public Health/First Steps website. Each indicator has a point value based upon exceeding, meeting, or not meeting the target for the indicator. Comparison of the total point score to cut-off scores for each level of the determination (Meets Requirements, Needs Assistance, Needs Improvement, and Needs Substantial Improvement) follows. Any POE that does not achieve "Meets Requirements" must participate in technical assistance. POEs that achieve a designation of "Needs Improvement" may be required to implement a State-Directed CAP depending upon the cause of the noncompliance and the number of years they have received this designation. If the issue is systemic and/or longstanding, a CAP is required. POEs that achieve a designation of "Needs Substantial Improvement" must implement a State-Directed CAP. A root cause analysis may be required to determine the underlying issues.

Corrective Action Plans

The CAP is a plan implemented by the POE or early intervention provider that describes a set of integrated strategies targeting the SPP/APR performance or areas of noncompliance. CAP strategies ensure correction of noncompliance as soon as possible but no later than one year from the date of the SLA's written notification of the finding. The SLA issues a State-Directed CAP when a previously submitted CAP failed to result in full correction of the issue(s) found noncompliant. The SLA identifies the strategies the POE or provider must take for correction, including the date for full compliance.

Dispute Resolution System: Kentucky adopted the Part C dispute resolution provisions of the Individuals with Disabilities Education Improvement Act.

Complaint Investigations: Formal Complaints

A formal complaint is a written, signed complaint. Investigations of formal complaints is no more than sixty (60) calendar days of receipt of the complaint. During the investigation the early intervention provider is suspended from receiving new referrals but is allowed to continue to provide ongoing services for the children currently on his or her caseload. The investigation involves a desk audit of the TOTS records for other children on the provider's current caseload as well as interviews of other parents to determine if the complaint is a systemic issue. Once the investigation is completed, release of the suspension occurs. When a finding of noncompliance is issued to the provider, the provider either develops a CAP or is placed under a State-Directed CAP. The complainant receives notification of the findings of the investigation.

Complaint Investigations: Informal Complaints

Informal complaints are defined as concerns provided to the SLA and/or POE by telephone or email. The issue is not related to a specific child or to systemic issues related to regulation but may involve topics such as late arrival for service provision, late response to phone calls, number of referrals another provider receives, etc. Informal complaints are monitored for trends related to a particular service provider or service delivery area. Receipt of at least three (3) informal complaints about an early intervention provider triggers an investigation as a formal complaint.

Mediation

Each POE ensures that parties may resolve disputes concerning the identification, evaluation, placement of the child or the provision of appropriate early intervention services through a mediation process. The Department for Public Health has a voluntary mediation system, available without a request for due process, and does not deny or delay a parent's right to a due process hearing.

Due Process Hearings for Parents and Children

An impartial hearing officer appointed by the Secretary of the Cabinet conducts an administrative hearing within fifteen (15) calendar days of receipt of a request for hearing. The hearing meets the requirements of state law, KRS Chapter 13B.080. A recommended decision conforming in content to the requirements of KRS 13B.110 is forwarded to the family and the Cabinet within ten (10) calendar days of the administrative hearing. The Secretary of the Cabinet makes a final decision on the recommendation by the administrative hearing officer no later than thirty (30) days.

Technical Assistance System:

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

The SLA has dedicated staff for training and technical assistance including the Part C Assistant Coordinator, three (3) full-time technical assistance positions and one (1) part-time technical assistance position (shared position with Kentucky Birth Surveillance Registry). Other SLA staff as needed and typically related to general supervision provide technical assistance.

SLA staff assists districts in understanding and analyzing district data, developing and monitoring CAPs and self-assessments, and in providing ongoing training related to compliance. Email and telephone communications are the most frequent methods on technical assistance. As needed, in-person meetings/presentations were used to provide technical assistance prior to the COVID-19 restrictions. Written guidance documents are provided and created when needed. Webinars also add to the communication strategies to support POEs and providers.

SLA staff addresses implementation of early intervention evidence-based practices. Contracts with University of Kentucky and University of Louisville provide technical assistance on assessment and evaluation practices for both POE staff and Early Intervention Providers. Collaboration with the Kentucky Deaf-Blind Project, Kentucky School for the Deaf, and the Early Hearing Detection and Treatment Program results in highly specific technical assistance for the sensory impaired population.

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.

On-going training is required for all personnel as one of the contract obligations. The SLA provides specific mandatory early intervention training modules. Delivery of SLA sponsored training happens through webinar, online modules and face-to-face sessions. The SLA uses two Learning Management Systems (LMS), Adobe Connect and ZOOM, for webinar and online training purposes. The systems provide a learner tracking system so that the SLA can monitor compliance to required trainings. The addition or revision of modules occurs when needed. The platform ZOOM, a new addition to the professional development set of tools, facilitates interactive live training.

The SLA also contracts for the provision of specific training:

- University of Louisville provides training to POE Managers, District Child Evaluation Specialists (DCES), early intervention service providers and Service Coordinators.
- University of Kentucky provides training for approved assessment instruments (used for outcome measures) and operation of the Kentucky Early Childhood Data System (KEDS).
- Wendell Foster Resource and Technology Center hosts an online assistive technology community of practice.

New early intervention providers are required to complete Orientation training that includes two modules: Mission and Key Principles of Part C Early Intervention and Foundational Pillars of Early Intervention. These two modules provide the foundational knowledge required to participate as an early

intervention provider in Kentucky. Other topics addressed in Orientation are child assessment, First Steps model of early intervention, documentation, and billing. Prerequisite modules for new providers emphasize the KEIS Program Standards, Early Intervention Core Competencies, the Early Intervention Provider Performance Standards and the Early Intervention Provider Self-Assessment Tools. These prerequisite modules help the new provider learn what is expected performance in the program.

Specific activities associated with the State Systemic Improvement Plan (SSIP) enrich the professional development of those working in the early intervention system. Intense, individualized training and mentoring is provided in the Coaching in Early Intervention Training and Mentorship Program. POE Managers have an online leadership curriculum and Service Coordinators received a family assessment refresher course.

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).

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

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.

Annually, the SPP/APR is available on the First Steps website upon submission to the US Department of Education, Office of Special Education Programs. The website address is: <https://chfs.ky.gov/agencies/dph/dmch/ecdb/Pages/firststeps.aspx>

Interested parties without web access can contact the SLA for a copy. In addition, all of the public libraries in Kentucky have web access, so anyone in Kentucky can access the web and thus the report at the local public library.

Local POE Determinations, based on the achievement of performance plan targets, are published on the website no later than 120 days from the submission of the SPP/APR to OSEP. These reports are on the website in the section labeled First Steps Reports and State Performance.

Intro - Prior FFY Required Actions

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

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

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	79.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.50%	97.95%	94.85%	97.82%	97.19%

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
4,849	5,222	97.19%	100%	96.73%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

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

Timely service is defined as delivered no later than 30 days from date of IFSP meeting in which service was initially authorized by written parent consent. A variation to the process of obtaining written consent occurred during the state of emergency. Documented verbal consent was allowed for on-going early intervention services without change to frequency, duration, location and method. Consent forms are sent through US Mail or securely delivered to the family using an electronic signature software. The thirty (30) day timeline does not start until the POE receives the signed consent form.

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 through June 30, 2020

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

Every IFSP (initial, six-month, requested review, and annual) is entered into TOTS, the online database management system. One section of the IFSP (Planned Services) includes all services planned for delivery during the period of the IFSP and serves as the authorization for each service. The date of the IFSP meeting is matched to the date of service delivery for the first payment claim. Then the number of days between date of the IFSP and the date of the first service is calculated. A report, Timely Services, lists every initial date of service for the IFSP period. The POE Manager reviews the Timely Services report and SLA staff verify the POE Manager's assessment. As part of the preparation of the State Performance Report, a different individual at the SLA reviews and verifies the report. For consistency, a comparison of the results of the report with the monthly reports submitted by the POEs occurs. During the state of emergency, Service Coordinators document in TOTS the date the signed consent is received and notify providers that services may begin. When the POE Manager or SLA staff reviews the Timely Services report, they must look at the record in TOTS to determine the date the consent was received, the date the first service was provided, and recalculate the number of days between these events.

If needed, provide additional information about this indicator here.

This reporting period had a total of 171 cases of late initial services. Seventy-seven (77) cases occurred prior to the declaration of a pandemic with a range in days late from one (1) to sixty-three (63). Of this group of children, seventy-four (74) children received the service late. Three (3) children did not receive services and case was closed after the declaration of the state of emergency at parent request. Cases with more than twenty-five days late were due to unknown changes to foster homes and/or lack of response from the child protection caseworker to obtain contact information. Reasons for late service included poor scheduling, provider error in scheduling and provider illness. A state of emergency was declared March 26, 2020 due to the COVID-19 pandemic. The impact of COVID-19 delayed the provision of initial services. Home visitation and face-to-face services were suspended. Data collection is electronic and providers must submit a claim for services rendered. Providers unable to meet families could not submit a claim. The Timely Services report listed all initial services by number of days late. COVID -19 Governor ordered restrictions impacted ninety-four (94) of the one hundred seventy-four cases beginning April 7, 2019 with a range in days late from one (1) to ninety-two (92). Of this group of children, forty-five (45) continued to be active on June 30, 2020 and forty-nine (49) children exited Part C. All received the initial service prior to exit. Thus, the full fiscal year total of late cases was one hundred seventy-one (171).

The State Lead Agency verified that all authorized initial services were provided by:

1. Reviewing each case with a late initial service.
2. Verifying that initial services for each case were delivered (although late).
3. Reviewing monthly data by SLA staff to ensure compliance with the requirement at 100%. Any deviation from 100% resulted in technical assistance with the POE.

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	0	0	1

FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

One finding of noncompliance was issued for FFY2018 for this indicator. The reason for the low number is that only one POE had noncompliance during the monitoring period, a total of fifteen (15) cases. During FFY18, Kentucky had a formal monitoring three (3) month period (March, April, and May).

The State Lead Agency verified that all authorized initial services were provided by:

1. Reviewing each case with a late initial service.
2. Verifying that initial services for each case were delivered (although late).
3. Reviewing monthly data by SLA staff to ensure compliance with the requirement at 100%. Any deviation from 100% resulted in technical assistance with the POE.

Of the fifteen (15) cases identified as noncompliant, all received services eventually. The range in days late was five (5) to thirty-three (33). Four (4) children exited Part C by the end of the reporting year. Eleven (11) children were active in the system with IFSPs and services. No systemic issue was found as the type of service and provider varied and did not establish a trend.

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

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	98.70%

FFY	2014	2015	2016	2017	2018
Target>=	98.70%	98.70%	98.70%	98.70%	98.70%
Data	99.66%	99.58%	99.57%	99.53%	99.81%

Targets

FFY	2019
Target>=	98.70%

Targets: Description of Stakeholder Input

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

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	5,402
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	5,411

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
5,402	5,411	99.81%	98.70%	99.83%	Met Target	No Slippage

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2019	Target>=	86.01%	86.02%	86.03%	86.04%	86.05%
A1	64.00%	Data	85.71%	88.30%	87.98%	86.50%	86.27%
A2	2019	Target>=	68.98%	68.99%	69.00%	69.00%	69.00%
A2	44.00%	Data	65.19%	65.83%	63.76%	64.05%	62.46%
B1	2019	Target>=	90.66%	90.67%	90.68%	90.69%	90.70%
B1	63.00%	Data	91.39%	91.74%	91.23%	91.79%	91.21%
B2	2019	Target>=	71.54%	71.55%	71.55%	71.55%	71.55%
B2	42.00%	Data	68.47%	69.96%	68.92%	68.28%	67.91%
C1	2019	Target>=	85.77%	85.78%	85.79%	85.80%	85.80%
C1	62.00%	Data	83.92%	84.91%	85.23%	83.13%	83.75%
C2	2019	Target>=	53.80%	53.81%	53.82%	53.83%	53.84%
C2	48.00%	Data	48.86%	49.23%	46.71%	46.16%	44.41%

Targets

FFY	2019
Target A1>=	64.00%

Target A2>=	44.00%
Target B1>=	63.00%
Target B2>=	42.00%
Target C1>=	62.00%
Target C2>=	48.00%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

2,652

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	105	3.96%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	900	33.94%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	661	24.92%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	736	27.75%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	250	9.43%

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	1,397	2,402	86.27%	64.00%	58.16%	Did Not Meet Target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	986	2,652	62.46%	44.00%	37.18%	Did Not Meet Target	Slippage

Provide reasons for A1 slippage, if applicable

Kentucky did not meet the target as this was the baseline year for the second SPP period (FFY219-FFY25) and the Commonwealth implemented a new analysis methodology (see attached request). A reduced data pool also impacted the results by inflating the discrepancy from FFY18 and FFY19 results. The two years of results are not comparable.

Provide reasons for A2 slippage, if applicable

Kentucky did not meet the target as this was the baseline year for the second SPP period (FFY219-FFY25) and the Commonwealth implemented a new analysis methodology (see attached request). A reduced data pool also impacted the results by inflating the discrepancy from FFY18 and FFY19 results. The two years of results are not comparable.

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	92	3.47%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	885	33.37%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	634	23.91%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	719	27.11%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	322	12.14%

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	1,353	2,330	91.21%	63.00%	58.07%	Did Not Meet Target	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	1,041	2,652	67.91%	42.00%	39.25%	Did Not Meet Target	Slippage

Provide reasons for B1 slippage, if applicable

Kentucky did not meet the target as this was the baseline year for the second SPP period (FFY219-FFY25) and the Commonwealth implemented a new analysis methodology (see attached request). A reduced data pool also impacted the results by inflating the discrepancy from FFY18 and FFY19 results. The two years of results are not comparable.

Provide reasons for B2 slippage, if applicable

Kentucky did not meet the target as this was the baseline year for the second SPP period (FFY219-FFY25) and the Commonwealth implemented a new analysis methodology (see attached request). A reduced data pool also impacted the results by inflating the discrepancy from FFY18 and FFY19 results. The two years of results are not comparable.

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	60	2.26%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	856	32.28%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	612	23.08%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	710	26.77%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	414	15.61%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,322	2,238	83.75%	62.00%	59.07%	Did Not Meet Target	Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	1,124	2,652	44.41%	48.00%	42.38%	Did Not Meet Target	Slippage

Provide reasons for C1 slippage, if applicable

Kentucky did not meet the target as this was the baseline year for the second SPP period (FFY219-FFY25) and the Commonwealth implemented a new analysis methodology (see attached request). A reduced data pool also impacted the results by inflating the discrepancy from FFY18 and FFY19 results. The two years of results are not comparable.

Provide reasons for C2 slippage, if applicable

Kentucky did not meet the target as this was the baseline year for the second SPP period (FFY219-FFY25) and the Commonwealth implemented a new analysis methodology (see attached request). A reduced data pool also impacted the results by inflating the discrepancy from FFY18 and FFY19 results. The two years of results are not comparable.

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	4,841
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.	23

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."

All items were assigned to a three-month age band to determine age-appropriate functioning. The first level of instrument crosswalks included two detailed steps. First, specific items on each approved assessment instrument were aligned to the Kentucky Early Learning Standards and benchmarks by the publisher of each assessment tool. These alignments were reviewed, revised, and approved by Kentucky early childhood staff. Second, each instrument crosswalk was reviewed in detail by an expert panel (including assessment and child development experts) to ensure coverage of the developmental continuum, alignment with Kentucky benchmarks, and inclusion of examples describing each benchmark. This process included cross-assessment analyses. Once the review was completed, the expert panel age-anchored items for each benchmark. To determine consistent age anchors across tools, the panel utilized age-identified items for each instrument and, when not available, recommended behavioral sequences (Cohen & Gross, 1979). They also examined item similarity across assessments.

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

1. Assessment, Evaluation and Programming System for Infants and Children Second Edition (AEPS; Bricker et al., 2002);
2. Carolina Curriculum for Infants and Toddlers with Special Needs (CCITSN; Johnson-Martin et al., 2004); and
3. Hawaii Early Learning Profile (HELP; Parks, 2006).

These instruments were selected based on current use in the field, technical adequacy, use of functional goals and multiple domains, utility for diverse populations, use of multiple modalities for collecting data, involvement of families, and ease of administration (KDE, 2004). Providers used one or more of these instruments to assess children as they entered early intervention services, annually, and prior to exit from Part C. Assessment information for all children was collected through the Kentucky Early Childhood Data System (KEDS) website.

Provide additional information about this indicator (optional)

There are two significant impacts to the Child Outcomes data reported for FFY19. One, the data pool is twenty-five percent (25%) smaller than in previous years due to the COVID-19 pandemic. As a check, the Outcome data was analyzed using the previous method and results indicated slippage. This appears to support the lower results based on the smaller data pool. Some children left the program without an exit assessment once the state of emergency lasted longer than a couple of weeks.

The Commonwealth of Kentucky requests that FFY19 child outcomes results be the baseline for the years FFY19-FFY25. Please refer to the attached document justifying this request.

Early intervention providers were unable to assess all exiting children timely during the time period between the suspension of home visiting and implementation of tele-intervention. An exception to the inclusion criteria was granted this year for one hundred forty-five (145) children who turned three (3) years of age and had an exit assessment completed in FFY19 but did not exit until after July 1, 2020 due to receiving compensatory services. These children were included in the FFY19 analysis. The reduction in size of the data pool contributes to lower results and most definitely impacted the OSEP business rule of assessing of 65% of the number of children who exited. Fifty-four percent (54%) of exiting children are reported for FFY19. Kentucky typically meets the benchmark set by OSEP.

The second impact on results was the change in analysis introduced and approved by OSEP in the FFY18 SPP/APR. Beginning in FFY19, the analysis algorithms were formally modified to measure change more accurately in child functioning by focusing on a single six-month age band corresponding to the child's age at time of assessment to identify age-appropriate functioning compared to same-age-peers. In consultation with First Steps stakeholders, age-appropriate functioning for categories c, d, and e was set at 40%; i.e., a child had to have mastered 40% of the items within the child's chronological six-month age band at time of assessment. The 40% criteria level was decided based on research and consultation with national and state assessment experts. Analyses examined items in all age bands covered by the assessments when determining absolute progress for categories a and b. Three percentages (one for each OSEP outcome) were computed for each child on each assessment.

The state lead agency and stakeholders knew that by changing the analysis without adjusting targets set under a different analysis, the results would be lower. The state proposed new targets that were not accepted by OSEP because they were lower than previous targets. However, the state chose to implement the new analysis because of increased accuracy in the depiction of functioning.

3 - Prior FFY Required Actions

None

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.

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	2007	Target>=	99.45%	99.45%	99.45%	99.45%	99.45%
A	83.20 %	Data	99.77%	99.61%	99.14%	99.10%	98.81%
B	2007	Target>=	99.52%	99.52%	99.52%	99.52%	99.52%
B	74.30 %	Data	99.70%	99.55%	99.39%	99.28%	99.16%
C	2007	Target>=	99.03%	99.03%	99.03%	99.03%	99.03%
C	89.60 %	Data	99.62%	99.16%	99.20%	98.97%	99.02%

Targets

FFY	2019
Target A>=	99.45%
Target B>=	99.52%
Target C>=	99.03%

Targets: Description of Stakeholder Input

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists

as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

FFY 2019 SPP/APR Data

The number of families to whom surveys were distributed	4,107
Number of respondent families participating in Part C	1,040
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,007
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,010
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	1,004
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,010
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,001
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,010

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)	98.81%	99.45%	99.70%	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)	99.16%	99.52%	99.41%	Did Not Meet Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	99.02%	99.03%	99.11%	Met Target	No Slippage

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously-approved sampling plan changed?	NO

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

A list of families across the state from the fifteen (15) Point of Entry offices, whose child had participated in First Steps within a 120-day period, is generated from TOTS (data management system). This method of surveying was approved by the state's OSEP project officer in FFY10. The sampling was determined to be valid since it includes all families who received Kentucky Early Intervention System services for the 120-day period. No stratification of the sample population is conducted. The instrument used to collect the family data has not changed; Kentucky continues to use the Child Outcomes form, Section B as provided in the FFY10 OSEP approval.

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.

Kentucky will no longer use the approved sampling plan but instead survey all families who had an active IFSP during the reporting year. This will be a much larger pool of potential respondents. Collaboration with a variety of parent groups will help to encourage families to respond. The KEIS parent consultant will lead this effort to engage parent support groups and the KY parent training center, KY-SPIN.

FFY20 planned data collection:

- Survey all parents who received services by emailing the survey to all families who have an email address in the system with an active IFSP during the last year.
- Paper mail all families that do not have an email address in the data system and have had an active IFSP in the last year.

- Explore feasibility of contracting for telephone follow-up to non-respondents.
- Explore feasibility to disseminate link to the online survey via text messaging, originating from the data system. Implement as a response methodology if feasible.
- Provide alternative method of response (phone call or in-person) at parent request.

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.

Kentucky's Early Intervention System (KEIS) reviews data from the most recent December 1 Child Count, FFY18 Indicator 4 response data, and the Kentucky State Data Center (<http://www.ksdc.louisville.edu/data-downloads/estimates/>). KEIS compares the most recent population estimates to the family survey responses by race.

The KEIS FFY19 Child Count data indicates that the following race/ethnicity populations are served by Part C:

77% White;
9% Black;
7% Hispanic;
1% Asian;
0% American Indian or Alaska Native;
0% Native Hawaiian or Other Pacific Islander; and
6% Two or more races

The FFY19 family survey response data disaggregated by race is:

81.83% White;
7.02% Black or African American;
5.19% Hispanic/Latino;
1.06% Asian;
0% American Indian or Alaska Native;
00.19% Native Hawaiian or other Pacific Islander; and,
4.17% Two or more races.

Another data source that was reviewed is the Kentucky Population Estimate data, updated on the Kentucky State Data Center website on 06/25/2020. The population estimates are determined by sex, age group, and race. KEIS looks specifically at the data related to age and race. The age category for the Kentucky population estimates is birth to four, a larger data pool than the birth to three demographic. The population estimates are provided in the following categories: White, Black, Asian, Hispanic, and Other. These data, while not an exact match to the Part C data, provides a broader context for understanding the Part C data. The most recent Kentucky population estimates for the B-4 age range indicate that the population is:

77% White;
9% Black;
2% Asian;
7% Hispanic; and,
5% Other.

The Part C specific data shows that survey responses are slightly lower than the population served. Based on the data, Kentucky's Early Intervention System has determined that while the family survey responses represent all racial types, there are significantly more responses from white respondents. Respondents are lower for black or African American, Hispanic and two or more races.

The FFY18 family survey data results show 83% White, 5% Black, 4% two or more races, 2% Asian, 0.27 Native Hawaiian or other Pacific Islander and 5% Hispanic. Responses from black families increased in FFY19 but otherwise the results are consistent.

A rough comparison to the most recent Kentucky population estimates for the B-4 age range indicate that the population is:

77.27% White;

9.13% Black;
1.65% Asian;
7.09% Hispanic; and,
4.86% Other.

The Kentucky State Data Center Population Estimates are not a direct match, but do provide significant guidance in determining the representativeness of the Part C Family Survey response data in comparison to the population estimates for Kentucky's birth to four residents. Please keep in mind that although there is some discrepancy among the percentages of population estimates and the family survey responses, the population estimates are based on the total birth to four population and not related to the portion of the population who have significant developmental delays, which would be a much smaller percentage of the population.

Provide additional information about this indicator (optional)

The COVID-19 pandemic impacted the Family Survey sample. The sample is obtained during a 120-day period (March- June). In March, all services were temporarily suspended due to the pandemic. During the suspension period all new referrals were put on hold. Since FFY 2016, there has been a steady increase in sample size on an average of two hundred sixty-four (264) more responses each year. For FFY 2019, the sample was 1322 less than FFY 2018. Due to COVID a significant decrease in the size of the sample occurred. Since services were suspended during part of the time that the Family Survey was being conducted this impacted our response rate. Since FFY 2014, the Family Survey response rate has averaged 32.59%. For FFY 2019, the Family Survey response rate was 25.32%. Due to COVID, fewer surveys were distributed and received in response. Surprisingly, the responses received remained positive about the early intervention services that families received other than a few outliers who wanted face-to-face services.

4 - Prior FFY Required Actions

None

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	0.49%

FFY	2014	2015	2016	2017	2018
Target >=	0.51%	0.52%	0.52%	0.52%	0.52%
Data	0.59%	0.57%	0.66%	0.62%	0.54%

Targets

FFY	2019
Target >=	0.52%

Targets: Description of Stakeholder Input

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

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	338
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	53,154

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
338	53,154	0.54%	0.52%	0.64%	Met Target	No Slippage

Compare your results to the national data

The national percentage of children ages birth to one is 1.37. Kentucky has a restrictive eligibility so it is expected that Kentucky data is less than the national data. According to data from the Infant and Toddler Coordinators Association (ITCA), Kentucky is fifteenth (15th) of sixteen (16) states identified as having restrictive eligibility. The highest performing state in this category has a participation rate that is more than twice the Kentucky rate. Further, Kentucky has the lowest participation rate of all health lead agencies nationwide.

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

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	2.17%

FFY	2014	2015	2016	2017	2018
Target >=	2.54%	2.55%	2.55%	2.55%	2.55%
Data	2.67%	2.69%	2.92%	3.08%	3.17%

Targets

FFY	2019
Target >=	2.55%

Targets: Description of Stakeholder Input

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

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	5,411
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	161,730

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
5,411	161,730	3.17%	2.55%	3.35%	Met Target	No Slippage

Compare your results to the national data

The national percentage of children ages birth to three is 3.70%. Kentucky's result for Indicator 6 was 3.35%, which is closer to the national rate than it has ever been before. According to the ITCA data, Kentucky is fourth (4th) in Category C (restrictive eligibility states) and twelfth (12th) for states with a health lead agency. The largest number of children served were two (2) to three (3) year olds (N= 3580).

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

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	61.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	98.80%	88.01%	89.07%	95.43%	95.97%

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
1,986	2,020	95.97%	100%	99.01%	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.

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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 through June 30, 2020

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

All referrals are entered into the online database management system known as TOTS and assigned a unique identifier. The system matched the date of the initial IFSP with the date of referral and calculated the forty-five (45) day timeline. A report, Single Timeline Report, was generated for the date range indicated above (July 1, 2019-June 30, 2020) that includes all children who had an initial IFSP developed during the period.

Monthly, POE Managers are required to verify the reason an initial IFSP is late. SLA staff review monthly reports to verify the reason for late initial IFSPs. In preparation for submitting the Annual Performance Report, a different SLA staff person reviews the statewide report to verify late initial IFSPs. This is then compared to the monthly POE reports for consistency.

The impact of the COVID-19 pandemic on data collection was the decrease in referrals to First Steps. All referrals are entered in the electronic data base system upon receipt and verification of demographic information. All referrals that were received are in the data system. Across the state programs that serve the birth to three population had decreases in referrals, including well-baby checks. Contributing factors include parent fears of infection, closed primary referral sources, and assumptions that First Steps was closed.

Provide additional information about this indicator (optional)

The 45-day timeline was typically met for IFSP development through tele-intervention. Cases that were in process but had not reached the IFSP development phase were suspended until the process could be completed. Emergency procedures for assessment to verify significant developmental delay were developed that allowed for assessment using a criterion-referenced instrument administered remotely. As tele-intervention was the only service methodology for a period of time, families without access or capacity for telecommunication were unable to have eligibility determined. These families were given the option to re-refer when restrictions are lifted. Procedures and safety protocols have since been implemented to allow those families without access to technology to participate in-person.

Referrals from primary referral sources such as physician's offices and other early childhood serving programs decreased significantly. One reason is that they too had to comply with state-ordered restrictions. Another reason appears to be unwillingness for families to go to offices where they fear infection of COVID-19.

FFY19 data indicates fewer late initial IFSPs over last year. Thirty-four (34) initial IFSPs were untimely; the FFY18 number was one hundred twenty-two (122). The range in days was one (1) to sixty-one (61) days. While improved performance was the main reason for the timely IFSPs, the lack of referrals and suspended processing of referrals contributed to the low number of untimely IFSPs. Of the late initial IFSPs, nine (9) children exited Part C and therefore no longer under Part C jurisdiction and twenty-five (25) continued to receive services as of June 30, 2020.

Nine (9) POEs achieved 100% timely IFSPs. Three (3) POEs performed at 99%, one POE achieved 98% and two (2) POEs were at 97%. Reasons for delay included poor time management by the service coordinator and human error.

The SLA verified the data by:

1. Reviewing each child's record on TOTS that was over 45 days from referral to IFSP. This was five hundred seventy-seven (577) records of which three hundred forty (340) indicated "Other" as reason for delay. One hundred eighty-six (186) indicated delay in receiving medical records. Since this is out of the control of the POE, these do not constitute noncompliance. The remaining two hundred thirty-seven (237) were reviewed. Review included the dates of the IFSP, initial referral, communication log entries and service log entries. A timeline was established for each case, noting gaps in documentation along with possible reasons for delays. Often service coordinators selected "Other" as the reason for delay. The true reason for delay was frequently found in the service logs or communication log. Only those that indicated delays caused by POE staff (late contacting parent, no actions for days, misplaced file, service coordinator illness, primary level evaluator delays, etc.) were considered untimely. Reasons such as parent delay, COVID-19 restrictions, and medical record delays were not held against the POE. It appeared that service coordinators were more likely to choose

"other" over taking time to decide a more accurate choice.

2. An IFSP was verified for each case (although late) that met the regulatory requirements.

3. Compensatory services were offered for cases where the delay was longer than 10 days.

4. There was ongoing review of monthly data by SLA staff to ensure compliance with the requirement at 100%. Any deviation from 100% resulted in technical assistance with the POE.

5. Of the thirty-four (34) children with an untimely initial IFSP, ten (10) exited the Part C system by June 30, 2020. The remaining twenty-four (24) cases continue to receive services, according to regulations.

Response to OSEP: In FFY18, the percentage of timely initial IFSPs was 85% (n=573) for the POE with the finding of noncompliance and 15% untimely. This was one hundred four (n=104) untimely initial IFSPs for this POE. All 104 late cases had an IFSP developed although past the 45 day timeline. The range in days late meeting the 45-day timeline was 1-97. Thirty-five (35) children exited Part C by 6/30/19. The remaining sixty-nine children remained in Part C receiving services after July 1, 2019. The majority of all late cases were late by 1 to 15 days. The extremely late cases (more than 22 days late) were late due to unknown placement of file in office, low performing intake administrative assistant not alerting intake staff of new referral, and multiple redundant steps to process new referrals. High case loads and staff vacancies impacted timely processing of referrals.

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	0	0	1

FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

This is the third year that the POE was unable to achieve and sustain compliance with this requirement. Improvement towards the target was noted in FFY17 but performance dropped in FFY18. A state-directed corrective action plan (CAP) was developed with POE Manager and her leadership team in FFY17, which appeared to be working as the performance improved. However, due to the COVID-19 pandemic, elements of this CAP had to be put on hold. As a result, the SLA did not believe sufficient time was given for the previously developed CAP to be fully implemented and successful. The POE will continue on the previously developed CAP. The POE Manager must continue sending quarterly reports to the SLA, specifically the General Supervision Coordinator. These reports must indicate effectiveness of any procedures the POE is still able to implement despite the pandemic and any new procedures the POE implements. If nothing is able to be implemented due to the pandemic, the report should simply state this. The POE Manager must address all identified noncompliance immediately. Failure to submit the data monitoring reports, address identified noncompliance, or improve the district performance by December 2021 may result in other enforcement actions by the SLA.

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

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:

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

Account for 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	

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

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
4,668	4,790	100.00%	100%	100.00%	Met Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

122

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 through June 30, 2020

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

TOTS, Kentucky's state database system, requires a transition outcome with appropriate steps and early intervention services in every IFSP. Guidance to service coordinators and early intervention services providers includes this requirement and provides a framework for identifying typical transitions that infants and toddlers experience. As a child nears two (2) years of age, transition focus becomes planning for exit from Part C services.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8A - Prior FFY Required Actions

None

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child's record. If a State chooses to report in its

calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child's record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

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

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
4,034	4,219	100.00%	100%	100.00%	Met Target	No Slippage

Number of parents who opted out

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

185

Describe the method used to collect these data

A list of all children potentially eligible for Part B services and whose parent has not opted-out of Local Education Agency (LEA) notification is generated on a quarterly basis by Part C. The list originates from the birthdates for children with active records in TOTS. This list is disaggregated by school district and forwarded to the LEA. The list is also sent to the Kentucky Department of Education (KDE). Service Coordinators are required to verify that the LEA received the notification as part of the transition process. The total unduplicated number of notifications to the LEAs and KDE is then compared to original list to ensure no child was dropped between the lists.

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

YES

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

YES

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

State database

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

July 1, 2019 through June 30, 2020

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

Every child's record in TOTS includes a Transition section. The screen includes all key elements of the transition from Part C to Part B. An electronic file exchange process with the State Education Agency (SEA) was developed as a part of the State Improvement Grant several years ago. A report is available through TOTS that lists all directory information for children ages 2 and older. The list is generated quarterly.

There is a data-sharing agreement between Part C and the SEA to facilitate transition. The database system is designed to default to parent agreement for transition activities. Parents have the option to refuse notification of the local education agency and/or the SEA. Parents that choose this option must provide written indication of their desire to opt-out and the Service Coordinator must change the field on TOTS so that the refusal is stored electronically. Parents are informed both verbally and in writing that this refusal can be changed at any time.

Provide additional information about this indicator (optional)

Notification of children turning three continued throughout the program year, despite LEA closures. Service Coordinators continued to provide services to the families on their caseloads and followed through with procedures for transition at age 3.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

8B - Prior FFY Required Actions

None

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	90.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.47%	96.82%	98.57%	98.23%	98.95%

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
3,508	3,828	98.95%	100%	99.64%	Did Not Meet Target	No Slippage

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

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

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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.

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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 through June 30, 2020

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

TOTS includes a list of all children assigned to the Service Coordinator with an upcoming transition period. The transition screen in TOTS includes a banner that clearly provides the window of time for the timely transition conference. Other data elements collected on the screen are date parent consented to convene the meeting and date of LEA invitation to the meeting. These prompts assist the Service Coordinator's compliance with timelines.

POE Managers monitor the timeliness of transition conferences monthly and address any administrative or provider issue with the Service Coordinator that resulted in an untimely transition conference. This monthly monitoring is verified by the SLA staff.

Provide additional information about this indicator (optional)

During the initial months of the pandemic, families received compensatory services for the IFSP services missed during the suspension of home visits. Once tele-intervention began in April, families had a choice—use tele-intervention to make-up missed services or wait for resumption of home visits. Families without capacity for tele-intervention began home visits in June, 2020. Thirteen (13) children had transition conferences held late due to the disruption of home visits and initiation of tele-intervention. Transition conferences were held without LEA representatives. Information about Part B services were provided to the families. Of the thirteen, nine (9) turned three and no longer under the jurisdiction of Part C. The remaining four (4) children had not turned three as of June 30, 2020. These children and several more children who had already had a transition meeting turned three during the months of March through May and had compensatory services assigned. Guidance from the SLA directed IFSP teams to make-up the session even if the child had turned three (3). But for the pandemic, the services would have been provided to a two (2) year old child.

No findings of noncompliance were found for this indicator during FFY18 monitoring period. Kentucky monitors all POEs for compliance year-round however, the months of February, March and April are formal monitoring for noncompliance. The data from those three months is the basis for written letters of noncompliance findings and corrective action plan. Noncompliance found during the other nine (9) months is dealt with swiftly for correction through email and technical assistance.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2017	2	2	0

FFY 2017**Findings of Noncompliance Verified as Corrected****Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements**

There were two (2) findings of non-compliance for FFY17 during the formal monitoring period. One POE corrected within one month of the issuance of the finding and the other corrected within six (6) months of issuance. SLA staff monitored the POE's compliance to this indicator monthly. Additionally, the SLA staff discussed reasons for the noncompliance with leadership of each agency. Required corrective actions focused on re-examination of internal procedures to ensure service coordinators understood actions needed to meet the timelines. Re-training on regulatory requirements was also part of the corrective action for the POE with the lowest performance. Meetings with the agency's staff occurred to inform them of the regulatory requirements.

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

The SLA verified correction of each case by:

1. Based on the POE Transition Report, sixty-one (61) cases were identified as late. Each child's record on TOTS with a late transition meeting was reviewed, focusing on the date of the meeting, the date parent consented to the meeting, date of the LEA invitation to the transition meeting, and communication log and service log (service note) documentation. Each finding of noncompliance was checked to ensure a meeting was held, even when less than ninety (90) days prior to the third birthday or if the child had exited the program; and,
2. Review of data between the initial date the meeting was scheduled and the eventual meeting date to determine if the reason for the delay was a family-driven reason or service provider-driven reason. Of the sixty-one cases, fifty-three (53) had a transition meeting prior to exit from Part C although the meetings were held after the timeline. The remaining eight (8) cases had no transition meeting prior to exit from Part C.
3. There was ongoing review of monthly data by SLA staff to ensure compliance with the requirement.

8C - Prior FFY Required Actions

None

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.

NO

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 C: Due Process Complaints	11/04/2020	3.1 Number of resolution sessions	0
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/04/2020	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

Historical Data

Baseline Year	Baseline Data

FFY	2014	2015	2016	2017	2018
Target>=					
Data					

Targets

FFY	2019
Target>=	

FFY 2019 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

Kentucky implements the Part C dispute resolution process which does not include resolution sessions.

9 - Prior FFY Required Actions

None

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

Stakeholder input is a foundational component of the Kentucky Early Intervention System. Stakeholders include parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including

Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented. Parent input increased once a parent consultant was hired to fill a vacancy. She has maintained long-term partnerships while also creating new ones.

Stakeholders receive regular updates on the early intervention systems performance. Issues are presented for discussion and possible resolution. Ad hoc groups of stakeholders approach the SLA with their issues such as contractual requirements, reimbursement, referrals, education surrogate appointments, etc. The SLA is open to meeting with such groups to share accurate information. New ad hoc workgroups are created to address specific topics/issues as needed.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) continues to include gathering data, verifying data, setting targets, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Every year the ICC and other stakeholders receive a formal presentation of the SPP/APR. The ICC has certified the APR each year due to this collaborative process for development.

Ongoing communication with stakeholders occurs through a ListServ and specifically for early intervention providers through an announcement page in the database system, TOTS.

Historical Data

Baseline Year	Baseline Data
2005	0.00%

FFY	2014	2015	2016	2017	2018
Target>=	80.00%	80.00%	80.00%	80.00%	80.00%
Data					

Targets

FFY	2019
Target>=	80.00%

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		80.00%		N/A	N/A

Provide additional information about this indicator (optional)

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:

Paula E. Goff

Title:

Part C Coordinator/Early Childhood Branch Manager

Email:

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Phone:

502-564-3756 ext. 4375

Submitted on:

04/27/21 12:25:07 PM