IA Part C

FFY2017 State Performance Plan / Annual Performance Report

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Executive Summary:										
Indicator	Target %	Data %	Status	Slippage						
1	100	99.56	Did Not Meet Target	No Slippage						
2	96.60	98.39	Met Target	No Slippage						
3A1	46.13	46.36	Met target	No Slippage						
3A2	71.40	60.46	Did Not Meet Target	Slippage						
3B1	51.83	53.86	Met target	No Slippage						
3B2	51.59	44.20	Did Not Meet Target	Slippage						
3C1	57.58	55.02	Did Not Meet Target	Slippage						
3C2	72.74	63.32	Did Not Meet Target	Slippage						
4A	93.00	86.75	Did Not Meet Target	No Slippage						
4B	93.00	90.06	Did Not Meet Target	No Slippage						
4C	93.00	87.95	Did Not Meet Target	No Slippage						
5	1.40	1.08	Did Not Meet Target	No Slippage						
6	2.70	2.46	Did Not Meet Target	No Slippage						
7	100	99.56	Did Not Meet Target	No Slippage						
8A	100	96.78	Did Not Meet Target	Slippage						
8B	100	100	Met Target	No Slippage						
8C	100	98.14	Did Not Meet Target	No Slippage						
9	NA	NA	NA	NA						
10	NA	NA	NA	NA						
All findings of noncompliance reported	All findings of noncompliance reported in the FFY 2016 APR were corrected and verified within the 365 day timeline.									

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) **Attachments** File Name **Uploaded By Uploaded Date** Remove introduction iowa apr ffy17 final.pdf Cindy Weigel 1/24/2019 8:55 PM **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. See attached PDF which includes all sections of the introduction. **Attachments** File Name Uploaded By **Uploaded Date** No APR attachments found. 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. See PDF attached to General Supervision System section which includes all sections of the introduction. **Attachments** File Name Uploaded By **Uploaded Date** No APR attachments found. **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. See PDF attached to General Supervision System section which includes all sections of the introduction. **Attachments** File Name Uploaded By **Uploaded Date** No APR attachments found. **Stakeholder Involvement:** apply this to all Part C results indicators The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

See PDF attached to General Supervision System section which includes all sections of the introduction.

Attachments

File Name

Uploaded By

Uploaded Date

No APR attachments found.

Reporting to the Public:

How and where the State reported to the public on the FFY 2016 performance of each EIS Program or Provider 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 2016 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2016 APR in 2018, is available.

See PDF attached to General Supervision System section which includes all sections of the introduction.

Attachments

File Name

Uploaded By

Uploaded Date

No APR attachments found.

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Actions required in FFY 2016 response

OSEP Response

States were instructed to submit Phase III Year Three of the State Systemic Improvement Plan (SSIP) by April 1, 2019. The State provided the required information.

Required Actions

The State's IDEA Part C determination for both 2018 and 2019 is Needs Assistance. In the State's 2019 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2018 SPP/APR submission, due February 3, 2020, on: (1) the etchnical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

In the FFY 2018 SPP/APR, the State must report FFY 2018 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 4; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2019); (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- and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities are impacting the State's capacity to improve its SiMR data.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 1: Timely provision of services

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)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		100%	100%	100%	100%	99.25%	97.51%	99.45%	99.44%	98.86%	97.19%

FFY	2015	2016		
Target	100%	100%		
Data	99.56%	98.80%		

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY		2017	2018	
	Target	100%	100%	

Explanation of Changes

FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data
615	680	98.80%	100%	99.56%

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).

Services are considered timely if initiated within 30 calendar days from the date in which consent for services was obtained. Data are based on the actual number of days, not the average, between parental consent and the date specified on the IFSP service log notes for delivery of first service.

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

State monitoring

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).

The data was selected from the full reporting period.

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

Data for this indicator were taken from lowa's statewide Information Management System (IMS) database for the current full reporting period and reflect all new early intervention services from both initial IFSPs and subsequent IFSPs. The monitoring cycle occurs annually with all regional grantees. A random sample of children from all regional grantees was created ensuring a confidence level of 95% +/- 5% margin of error. The lead agency conducted the reviews using an Excel data collection form. Data are based on the actual number of days, not the average, between parental consent and the date specified on the IFSP service log notes for delivery of first service. Services are considered timely if initiated within 30 calendar days from the date in which consent for services was obtained (state criteria).

lowa has reported separately the number of documented delays attributable to exceptional family circumstances in the appropriate field above. Three children's services were untimely due to system reasons defined as staff illness or scheduling.

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Actions required in FFY 2016 response

none

Correction of Findings of Noncompliance Identified in FFY 2016

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

FFY 2016 Findings of Noncompliance Verified as Corrected

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

Six regional grantees did not meet the 100% target in FFY 2016 and were notified of findings of noncompliance. Regional grantees were required to analyze root causes and correct each case of noncompliance, unless the child was no longer within the jurisdiction of the provider, as soon as possible and no later than one year from the date of notification of noncompliance. The corrective actions were completed, followed by verification by the lead agency.

The regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency monitoring consultant was responsible for verifying timely correction via lowa's System to Achieve Results (I-STAR). In each region that had findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. The regional grantees demonstrated implementation of the requirement with 100% compliance for timely services.

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

The lead agency verified that the regional grantees corrected noncompliance for FFY 2016 using I-STAR. I-STAR has been used for monitoring correction of all individual child noncompliance including verification of correction (Prong 2) within the 365 day timeline. The lead agency monitoring consultant is responsible for verifying timely correction of noncompliance via I-STAR.

Corrective actions included assuring that services were provided even though the timeline was not met unless the child was no longer within the jurisdiction of the EIS program. The infants and toddlers that did not receive services within 30 days did, in fact, receive services at a later date. The regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction.

OSEP Response

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator. (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017. although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 2: Services in Natural Environments

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)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			96.20%	96.30%	96.40%	96.50%	96.60%	96.60%	96.60%	96.60%	96.60%
Data		96.40%	97.61%	98.40%	98.52%	99.05%	98.89%	98.64%	98.57%	98.51%	98.92%

FFY	2015	2016		
Target ≥	96.60%	96.60%		
Data	98.69%	99.07%		

Key:		Gray - Data Prior to Baseline		Yellow - Baseline	Blue – Data Update
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FFY 2017 - FFY 2018 Targets

FFY	2017	2018		
Target ≥	96.60%	96.60%		

Key:

Explanation of Changes

Targets: Description of Stakeholder Input

Several key stakeholder groups were integral in providing input on setting targets. The group, members, and meeting dates specific to the setting targets are provided in the below table.

Group, Members and Meeting Dates of Key Stakeholders for Setting Targets

Group	Members	Meeting Dates
State Interagency Coordinating Council (Iowa Council for Early ACCESS)	Parents of Children with Disabilities Service Providers Signatory Agencies at the State and Regional Level Representative of Insurance Commission Mental Health Providers Representative of Head Start Local/Regional/State Representatives of Mental Health, Private Medical and Physicians Higher Education	September 19, 2014
Regional Grantee Administrators	Directors of Special Education for nine Regional Grantees	January 22, 2015
Early ACCESS Leadership Group	Representatives of the: • Regional Grantees • Signatory Agencies	August 26-27, 2014 January 21-22, 2015

The Lead Agency, with input from stakeholder groups, established measurable and rigorous targets. The FFY 2013 target will remain at 96.60% and continue as the target through FFY 2018.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data

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Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,873	
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Total number of infants and toddlers with IFSPs	2,920	

FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data
2,873	2,920	99.07%	96.60%	98.39%

Actions required in FFY 2016 response	
none	
OSEP Response	
Required Actions	

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) **Indicator 3: Early Childhood Outcomes**

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)

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)? No

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2008	Target≥						40.13%	41.63%	43.13%	44.63%	44.63%	44.63%
AI	2008	Data					40.13%	40.33%	40.14%	43.36%	43.33%	46.53%	45.22%
A2	2008	Target≥						65.40%	66.90%	68.40%	69.90%	69.90%	69.90%
AZ	2006	Data					65.40%	66.35%	68.94%	68.38%	68.03%	71.40%	68.00%
B1	2008	Target≥						45.83%	47.33%	48.83%	50.33%	50.33%	50.33%
БІ		Data					45.83%	40.20%	47.20%	47.83%	47.34%	50.26%	49.70%
B2	2 2008	Target≥						45.59%	47.09%	48.59%	50.09%	50.09%	50.09%
D2	2008	Data					45.59%	46.05%	51.07%	51.04%	51.99%	54.38%	52.06%
C1	2008	Target≥						51.58%	53.08%	54.58%	56.08%	56.08%	56.08%
Ci	2008	Data					51.58%	48.82%	52.72%	54.13%	55.53%	58.99%	56.56%
C2	2008	Target≥						66.74%	68.24%	69.74%	71.24%	71.24%	71.24%
62	2008	Data					66.74%	64.93%	71.38%	70.97%	69.86%	72.77%	69.83%

	FFY	2015	2016
A1	Target≥	45.13%	45.63%
AI	Data	49.74%	45.53%
A2	Target≥	70.40%	70.90%
A2	Data	69.81%	65.24%
B1	Target≥	50.83%	51.33%
ы	Data	53.03%	50.48%
B2	Target≥	50.59%	51.09%
B2	Data	54.19%	48.39%
C1	Target≥	56.58%	57.08%
Ci	Data	59.42%	58.54%
C2	Target≥	71.74%	72.24%
G2	Data	71.78%	68.24%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A1 ≥	46.13%	46.63%
Target A2 ≥	71.40%	71.90%
Target B1 ≥	51.83%	52.33%
Target B2 ≥	51.59%	52.09%
Target C1 ≥	57.58%	58.08%
Target C2 ≥	72.74%	73.24%

Key:

Explanation of Changes

Targets: Description of Stakeholder Input

Several key stakeholder groups were integral in providing input on setting targets. The group, members, and meeting dates specific to the setting targets are provided in the below table. 2/4/2020

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Group, Members and Meeting Dates of Key Stakeholders for Setting Targets

Group	Members	Meeting Dates
State Interagency Coordinating Council (Iowa Council for Early ACCESS)	Parents of Children with Disabilities Service Providers Signatory Agencies at the State and Regional Level Representative of Insurance Commission Mental Health Providers Representative of Head Start Local/Regional/State Representatives of Mental Health, Private Medical and Physicians Higher Education	September 19, 2014
Regional Grantee Administrators	Directors of Special Education for nine Regional Grantees	January 22, 2015
Early ACCESS Leadership Group	Representatives of the: Regional Grantees Signatory Agencies	August 22, 2015 January 21-22, 2015

The lead agency, with input from stakeholder groups, established measurable and rigorous targets. The FFY 2013 and FFY 2014 targets will remain the same as FFY 2012. For FFY 2015 through FFY 2018, targets for all outcome summary statements will increase by 0.5% each year.

FFY 2017 SPP/APR Data

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	16	0.78%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	639	31.00%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	160	7.76%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	406	19.70%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	840	40.76%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
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 (c+d)/(a+b+c+d).	566.00	1221.00	45.53%	46.13%	46.36%
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 (d+e)/(a+b+c+d+e).	1246.00	2061.00	65.24%	71.40%	60.46%

Reasons for A2 Slippage

Data indicate that the percent of infants and toddlers who were functioning within age expectations for positive social-emotional skills by the time they turned three years of age or exited the Part C program was below the target of 71.40% by 10.94% (60.46%). This was also a decrease from the previous reporting period (65.24%) by 4.78%. Additional analysis of the data for functioning within age expectations showed that none of the nine regional grantees met the target of 71.40%.

Year-end reports from the regional grantees indicated a need for Child Outcome Summary process training for new and existing staff as the main reason for slippage. A second reason reported was the need for continued training and support for providers use of family-guided routines-based interventions and caregiver coaching in order to improve child and family outcomes.

The lead agency continued to emphasize the ECO decision-making process: 1) align the "progress" question on the ECO form with procedures; 2) use of the Decision-Making Tree document; 3) use of assessment data when making ECO rating decisions; and 4) understanding the relationship of ECO with lowa's Early Learning Standards, curriculum and assessment. The lead agency has used the OSEP-funded National ECO Center's training materials and resources to ensure quality professional development for ECO (e.g., Decision tree for summary rating discussions, age-expected child development sources and Child Outcomes Summary (COS) process training materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have been trained to implement consistent procedures for gathering, analyzing and reporting these data.

In addition, a state level team consisting of staff from early intervention, early childhood special education and the K-12 system has formed to address ECO processes and data use in order to have a statewide child outcomes measurement system that is consistent from early intervention through entering the kindergarten classroom. In 2019, a self-assessment of the current early childhood outcomes measurement process, such as the State Child Outcomes Measurement System (S-COMS) Self-Assessment by ECTA/DaSY, will be used to identify strengths and weakness in lowa's system. The team will then build a plan to address improvements. Stakeholders from the various agencies and programs providing services will be included in the processes for improvement.

The lead agency will continue to monitor progress for all regions on this indicator through regularly scheduled data verification reports, file reviews, technical assistance, support and monitoring implementation of corrective action plans. Monitoring will include data and root cause analysis by both the lead agency and regional grantees.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Outcome B. Acquisition and use of knowledge and skills (including early language/ communication)

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	14	0.68%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	793	38.48%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	343	16.64%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	599	29.06%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	312	15.14%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
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 (c+d)/(a+b+c+d).	942.00	1749.00	50.48%	51.83%	53.86%
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 (d+e)/(a+b+c+d+e).	911.00	2061.00	48.39%	51.59%	44.20%

Reasons for B2 Slippage

Data indicate that the percent of infants and toddlers who were functioning within age expectations in the acquisition and use of knowledge and skills including early language by the time they turned three years of age or exited the Part C program was below the target of 51.59% by 7.39% (44.20). This was also a decrease from the previous reporting period (48.39%) by 4.19%. Additional analysis of the data for functioning within age expectations showed that none of the nine regional grantees met the target of 51.59%.

Year-end reports from the regional grantees indicated a need for Child Outcome Summary process training for new and existing staff as the main reason for slippage. A second reason reported was the need for continued training and support for providers use of family-guided routines-based interventions and caregiver coaching in order to improve child and family outcomes

The lead agency continued to emphasize the ECO decision-making process: 1) align the "progress" question on the ECO form with procedures; 2) use of the Decision-Making Tree document; 3) use of assessment data when making ECO rating decisions; and 4) understanding the relationship of ECO with lowa's Early Learning Standards, curriculum and assessment. The lead agency has used the OSEP-funded National ECO Center's training materials and resources to ensure quality professional development for ECO (e.g., Decision tree for summary rating discussions, age-expected child development resources and Child Outcomes Summary (COS) process training materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have been trained to implement consistent procedures for gathering, analyzing and reporting these data. The lead agency is working towards the development of a new online data system that will embed Early Childhood Outcomes throughout the IFSP. Additionally, members of the state work team are participating in the COS Learning Community facilitated by the Early Childhood Technical Assistance Center (ECTA).

In addition, a state level team consisting of staff from early intervention, early childhood special education and the K-12 system has formed to address ECO processes and data use in order to have a statewide child outcomes measurement system that is consistent from early intervention through entering the kindergarten classroom. In 2019, a self-assessment of the current early childhood outcomes measurement process, such as the State Child Outcomes Measurement System (S-COMS) Self-Assessment by ECTA/DaSY, will be used to identify strengths and weakness in lowa's system. The team will then build a plan to address improvements. Stakeholders from the various agencies and programs providing services will be included in the processes for improvement.

The lead agency will continue to monitor progress for all regions on this indicator through regularly scheduled data verification reports, file reviews, technical assistance, support and monitoring implementation of corrective action plans. Monitoring will include data and root cause analysis by both the lead agency and regional grantees.

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	10	0.49%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	572	27.75%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	174	8.44%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	538	26.10%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	767	37.21%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
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 (c+d)/(a+b+c+d).	712.00	1294.00	58.54%	57.58%	55.02%
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 (d+e)/(a+b+c+d+e).	1305.00	2061.00	68.24%	72.74%	63.32%

Reasons for C1 Slippage

Data indicate that the percent of infants and toddlers who substantially increased their rate of growth for positive social-emotional skills by the time they turned three years of age or exited the Part C program was below the target of 57.58% by 2.56% (55.02%). This was also a decrease from the previous reporting period (58.54%) by 3.52%. Additional analysis of the data for substantially increasing rate of growth showed that six of the nine regional grantees did not meet the target of 57.58%.

Year-end reports from the regional grantees indicated a need for Child Outcome Summary process training for new and existing staff as the main reason for slippage. A second reason reported was the need for continued training and support for providers use of family-guided routines-based interventions and caregiver coaching in order to improve child and family outcomes.

The lead agency continued to emphasize the ECO decision-making process: 1) align the "progress" question on the ECO form with procedures; 2) use of the Decision-Making Tree document; 3) use of assessment data when making ECO rating decisions; and 4) understanding the relationship of ECO with lowa's Early Learning Standards, curriculum and assessment. The lead agency has used the OSEP-funded National ECO Center's training materials and resources to ensure quality professional development for ECO (e.g., Decision tree for summary rating discussions, age-expected child development resources and Child Outcomes Summary (COS) process training materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have been trained to implement consistent procedures for gathering, analyzing and reporting these data. The lead agency is working towards the development of a new online data system that will embed Early Childhood Outcomes throughout the IFSP. Additionally, members of the state work team are participating in the COS Learning Community facilitated by the Early Childhood Technical Assistance Center (ECTA).

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
In addition, a state level team consisting of staff from early intervention, early childhood special education and the K-12 system has formed to address ECO processes and data use in order to have a statewide child outcomes measurement system that is consistent from early intervention through entering the kindergarten classroom. In 2019, a self-assessment of the current early childhood outcomes measurement process, such as the State Child Outcomes Measurement System (S-COMS) Self-Assessment by ECTA/DaSY, will be used to identify strengths and weakness in lowa's system. The team will then build a plan to address improvements. Stakeholders from the various agencies and programs providing services will be included in the processes for improvement.

The lead agency will continue to monitor progress for all regions on this indicator through regularly scheduled data verification reports, file reviews, technical assistance, support and monitoring implementation of corrective action plans. Monitoring will include data and root cause analysis by both the lead agency and regional grantees.

Reasons for C2 Slippage

Data indicate that the percent of infants and toddlers who were functioning within age expectations for positive social-emotional skills by the time they turned three years of age or exited the Part C program was below the target of 72.74% by 9.42% (63.32%). This was also a decrease from the previous reporting period (68.24%) by 4.92%. Additional analysis of the data for functioning within age expectations showed that eight of the nine regional grantees did not meet the target of 72.74%.

Year-end reports from the regional grantees indicated a need for Child Outcome Summary process training for new and existing staff as the main reason for slippage. A second reason reported was the need for continued training and support for providers use of family-guided routines-based interventions and caregiver coaching in order to improve child and family outcomes

The lead agency continued to emphasize the ECO decision-making process: 1) align the "progress" question on the ECO form with procedures; 2) use of the Decision-Making Tree document; 3) use of assessment data when making ECO rating decisions; and 4) understanding the relationship of ECO with lowa's Early Learning Standards, curriculum and assessment. The lead agency has used the OSEP-funded National ECO Center's training materials and resources to ensure quality professional development for ECO (e.g., Decision tree for summary rating discussions, age-expected child development resources and Child Outcomes Summary (COS) process training materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have been trained to implement consistent procedures for gathering, analyzing and reporting these data. The lead agency is working towards the development of a new online data system that will embed Early Childhood Outcomes throughout the IFSP. Additionally, members of the state work team are participating in the COS Learning Community facilitated by the Early Childhood Technical Assistance Center (ECTA).

In addition, a state level team consisting of staff from early intervention, early childhood special education and the K-12 system has formed to address ECO processes and data use in order to have a statewide child outcomes measurement system that is consistent from early intervention through entering the kindergarten classroom. In 2019, a self-assessment of the current early childhood outcomes measurement process, such as the State Child Outcomes Measurement System (S-COMS) Self-Assessment by ECTA/DaSY, will be used to identify strengths and weakness in lowa's system. The team will then build a plan to address improvements. Stakeholders from the various agencies and programs providing services will be included in the processes for improvement.

The lead agency will continue to monitor progress for all regions on this indicator through regularly scheduled data verification reports, file reviews, technical assistance, support and monitoring implementation of corrective action plans. Monitoring will include data and root cause analysis by both the lead agency and regional grantees.

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

The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	3208
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.	1145

Please note that this data about the number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program is optional in this FFY16 submission. It will be required in the FFY17 submission.

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes

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

The ECO Summary form is used to summarize the child's skills and behaviors in comparison to the functioning expected for the age of the child and the child's progress in each of the three ECO areas.

The procedures used by IFSP teams have included, but were not limited to, a review of initial evaluation data, interviews, observations, behavior checklists, structured interactions, play-based assessments, adaptive and developmental scales, and curriculum-based, criterion-referenced and norm-referenced assessment instruments. The assessment instruments commonly used by teams included, but were not limited to the: Developmental Assessment of Young Children; Carolina Curriculum for Infants and Toddlers with Special Needs Assessment; Hawaii Early Learning Profile; Developmental Observation Checklist System; and the Assessment, Evaluation and Programming System for Infants and Children.

Data for this indicator were taken from lowa's statewide Information Management System (IMS) database, and reflect year round count (July 1, 2017 to June 30, 2018) of children who have exited Part C services and were reported on lowa's current reporting year's IDEA Part C Exiting Collection. Missing data was checked by comparing ECO data with the number of children exiting Part C and reported in current reporting year's IDEA Part C Exiting Collection minus the number of children who had received Part C services for less than six months.



Provide additional information about this indicator (optional)

Two children did not have ECO scores at exit because they were deceased. This accounts for the difference in reported exiting (3208) from the number with ECO scores (3206). Four child who were deceased in the 618 exit data did have ECO scores.

Actions required in FFY 2016 response

none

OSEP Response

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) **Indicator 4: Family Involvement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
	2005	Target≥			90.00%	90.00%	91.00%	92.00%	93.00%	93.00%	93.00%	93.00%	93.00%
A	2005	Data		89.90%	96.40%	96.36%	96.25%	97.29%	97.91%	98.19%	90.00%	84.02%	79.84%
В	2005	Target≥			89.50%	89.50%	90.00%	91.00%	92.00%	93.00%	93.00%	93.00%	93.00%
В	2005	Data		89.20%	95.90%	95.05%	95.97%	97.29%	97.62%	98.19%	93.49%	87.57%	85.86%
	0005	Target≥			91.00%	91.00%	92.00%	93.00%	94.00%	93.00%	93.00%	93.00%	93.00%
	2005	Data		90.50%	95.80%	94.61%	95.82%	96.72%	96.72%	97.29%	91.11%	84.91%	83.25%

	FFY	2015	2016
A	Target≥	93.00%	93.00%
^	Data	83.80%	81.45%
В	Target≥	93.00%	93.00%
В	Data	87.21%	88.19%
С	Target≥	93.00%	93.00%
	Data	86.35%	85.54%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A ≥	93.00%	93.00%
Target B ≥	93.00%	93.00%
Target C ≥	93.00%	93.00%

Key:

Explanation of Changes

Targets: Description of Stakeholder Input

Several key stakeholder groups were integral in providing input on setting targets. The group, members, and meeting dates specific to the setting targets are provided in the below table.

Group, Members and Meeting Dates of Key Stakeholders for Setting Targets

Group	Members	Meeting Dates
State Interagency Coordinating Council (Iowa Council for Early ACCESS)	Parents of Children with Disabilities Service Providers Signatory Agencies at the State and Regional Level Representative of Insurance Commission Mental Health Providers Representative of Head Start Local/Regional/State Representatives of Mental Health, Private Medical and Physicians Higher Education	September 19, 2014
Regional Grantee Administrators	Directors of Special Education for nine Regional Grantees	January 22, 2015

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Early ACCESS Leadership
Group

Representatives of the: August 26-27, 2014

Regional Grantees
Signatory Agencies

August 26-27, 2014

January 21-22, 2015

The lead agency, with input from stakeholder groups, established measurable and rigorous targets. The FFY 2013 target will remain at 93.00% and continue as the target through FFY 2018.

FFY 2017 SPP/APR Data

Number of families to whom surveys were distributed	1,320
Number of respondent families participating in Part C 25.15%	332
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	288
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	332
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	299
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	332
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	292
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	332

	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	81.45%	93.00%	86.75%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	88.19%	93.00%	90.06%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	85.54%	93.00%	87.95%

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

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

Samples were pulled periodically for all children who had annual reviews and sent to families who then completed their surveys during the current reporting period. Families with recorded email addresses were emailed a survey through the I-STAR data system. The generated emails contained a unique child passcode for families to enter when completing the survey online.

Families who did not have a current email address were mailed surveys with a return postage envelope. If families needed an interpreter or help reading and understanding the survey, the lead agency worked with the regional grantees to have a paper survey completed. All paper surveys were anonymously mailed to the lead agency and recorded in the I-STAR system by the monitoring consultant or support staff. A unique passcode was also included on all paper surveys so that survey data remained anonymous upon entry into the data system.

Of the 1320 families who were sent a survey, 332 surveys were completed, yielding a 25.15% response rate with a confidence interval of 95% +/-5% margin of error.

Was a collection tool used? 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.

Yes

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.

Names of all children who have annual IFSP reviews are pulled quarterly therefore ensuring they have been in early intervention at least 12 months. Families completing their surveys during the current reporting period are included in the data. The State experienced a return rate of 25%, yielding a 95% confidence level with a +/- 5 % margin of error.

Respondent population rates by race/ethnicity were also analyzed and compared to the survey population and compared to the Part C population. Efforts to get increased response rates from all participants include sending multiple emails/paper surveys to families who have not responded to previous requests. In addition, at annual IFSP meetings the service coordinators remind families a survey is coming and emphasizes the importance of completing the survey. Further efforts to support return rates for race categories other than white may include increased personal contacts and reducing time between annual meeting and receiving the invitation to complete a survey.

Overall, the greatest difference in race/ethnicity categories is the rate in which families classified as white responded, which was 3.65% greater than the Part C population. However, less than a three percent difference in the returned survey for all other race/ethnicity categories indicates that the survey was representative for these populations.

Percent of Race/Ethnicity Survey Population Compared to Part C Population

Percent Race/Ethnicity Survey Population Compared to Part C Population.

Race/Ethnicity	Part C Population	Returned Survey Population	Difference
Hispanic/Latino	10.96%	8.91%	2.05%

American Indian or Alaska Native	0.34%	Plan (SPP)/Annual Perfor	-0.11%
Asian	2.77%	1.44%	1.34%
Black or African American	6.10%	5.29%	0.81%
lative Hawaiian or Other lacific Islander	0.14%	0.15%	-0.01%
Vhite	73.01%	76.66%	-3.65%
wo or More Races	6.68%	7.10%	-0.42%
Source. Iowa nformation Management System (IMS), FFY2017			
Gender	Part C Population	Returned Survey Population	Difference
emale	37.16%	42.47%	-5.31%
ale	62.84%	57.53%	5.31%
ource. lowa formation Management ystem (IMS), FFY2017			
he above table shows that the	survey population is representa	ative of the Part C population for gender as	both categories show only a 5.31% difference in the returned survey responses to the Part C population.
ctions required in FF	Y 2016 response		
ione			

Actions required in FFY 2016 respons	e		
none			
OSEP Response			
Required Actions			

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 5: Child Find (Birth to One)

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)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			1.10%	1.10%	1.10%	1.20%	1.30%	1.30%	1.30%	1.30%	1.35%
Data		1.22%	1.42%	1.54%	1.59%	1.74%	1.63%	1.56%	1.71%	1.68%	1.61%

FFY	2015	2016		
Target ≥	1.35%	1.40%		
Data	1.56%	1.13%		

Gray - Data Prior to Baseline Yellow - Baseline Blue - Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	1.40%	1.45%

Explanation of Changes

Targets: Description of Stakeholder Input

Several key stakeholder groups were integral in providing input on setting targets. The group, members, and meeting dates specific to the setting targets are provided in the following table.

Group, Members and Meeting Dates of Key Stakeholders for Setting Targets

Group	Members	Meeting Dates
State Interagency Coordinating Council (Iowa Council for Early ACCESS)	Parents of Children with Disabilities Service Providers Signatory Agencies at the State and Regional Level Representative of Insurance Commission Mental Health Providers Representative of Head Start Local/Regional/State Representatives of Mental Health, Private Medical and Physicians Higher Education	September 19, 2014
Regional Grantee Administrators	Directors of Special Education for nine Regional Grantees	January 2, 2015
Early ACCESS Leadership Group	Representatives of the: Regional Grantees Signatory Agencies	August 26-27, 2014 January 21-22, 2015

The Lead Agency, with input from stakeholder groups, established measurable and rigorous targets ranging from 1.30 to 1.45% for FFY 2013-FFY 2018.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
Source	Date	Description	Data	Over write Data

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Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers birth to 1 with IFSPs	419	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 1	38,976	null

FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
419	38,976	1.13%	1.40%	1.08%

Compare your results to the national data

As reported in the Part C Child Count and Settings report developed November 1, 2018 https://osep.grads360.org/#communities/pdc/documents/9795, lowa was only 0.17% below the national percent of children ages birth to one year old (1.25%). Compared to the other 49 states and federal district that reported data, 21 reported a lower percentage served than lowa, and 29 reported a higher percentage served. Therefore, lowa appears to fall near the middle.

Actions required in FFY 2016 response			
none			
00ED D			
OSEP Response			
Required Actions			

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 6: Child Find (Birth to Three)

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)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			2.10%	2.10%	2.10%	2.30%	2.50%	2.50%	2.50%	2.50%	2.50%
Data		2.33%	2.52%	2.69%	2.89%	3.05%	3.01%	3.08%	3.03%	3.03%	2.94%

	FFY	2015	2016		
	Target≥	2.60%	2.60%		
ſ	Data	2.91%	2.50%		

Gray - Data Prior to Baseline Yellow - Baseline Blue - Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	2.70%	2.70%

Key:

Explanation of Changes

Targets: Description of Stakeholder Input

Several key stakeholder groups were integral in providing input on setting targets. The group, members, and meeting dates specific to the setting targets are provided in the following table.

Group, Members and Meeting Dates of Key Stakeholders for Setting Targets

Group	Members	Meeting Dates
State Interagency Coordinating Council (Iowa Council for Early ACCESS)	 Parents of Children with Disabilities Service Providers Signatory Agencies at the State and Regional Level Representative of Insurance Commission Mental Health Providers Representative of Head Start Local/Regional/State Representatives of Mental Health, Private Medical and Physicians Higher Education 	September 19, 2014
Regional Grantee Administrators	Directors of Special Education for nine Regional Grantees	January 22, 2015
Early ACCESS Leadership Group	Representatives of the: Regional Grantees Signatory Agencies	August 26-27, 2014 January 21-22, 2015

The Lead Agency, with input from stakeholder groups, established measurable and rigorous targets ranging from 2.50% to 2.70% for FFY 2013-FFY 2018.

Prepopulated Data

Source Date Description Data Overwrite Data

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Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers birth to 3 with IFSPs	2,920	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 3	118,784	

FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	
2,920	118,784	2.50%	2.70%	2.46%	

Compare your results to the national data

lowa's percentage of children birth through age two for the current reporting period was 2.46%, which was 0.80% below the national percentage of 3.26%. Of the 49 other states and federal district that reported data, 11 reported a percentage served that was lower than lowa and 39 reported a higher percentage served.

Actions required in FFY 2016 res	ponse		
none			
OSEP Response			
Required Actions			

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 7: 45-day timeline

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)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		87.00%	90.90%	97.66%	98.73%	99.36%	99.85%	99.76%	99.84%	99.68%	99.29%

FFY	2015	2016
Target	100%	100%
Data	99.72%	99.49%

Key: Gray – Data Prior to Baseline Yellow – Baselin

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

Explanation of Changes

FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data
2,843	3,434	99.49%	100%	99.56%

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.

576

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

State monitoring

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).

The data was selected from the full reporting period.

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

Data for this indicator were taken from lowa's statewide Information Management System (IMS) database for the current full reporting period and reflect all infants and toddlers evaluated and assessed for whom an initial IFSP was required to be conducted. No sampling was used. The monitoring cycle occurs annually with all regional grantees. The lead agency conducted the reviews using an Excel data collection form for every regional grantee. Data are based on the actual number of days, not the average, between date of referral and the date of the initial IFSP meeting.

lowa has reported separately the number of documented delays attributable to exceptional family circumstances in the appropriate field above. Fifteen children's evaluations, assessments and initial IFSP meetings were untimely due to system reasons defined as staff shortages, vacation, illness, or scheduling.

Actions required in FFY 2016 response

none

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Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
16	16	0	0

FFY 2016 Findings of Noncompliance Verified as Corrected

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

Four regional grantees did not meet the 100% target in FFY 2016 and were notified of findings of noncompliance. The regional grantees were required to analyze root causes and correct each case of noncompliance, unless the child was no longer within the jurisdiction of the provider, as soon as possible and no later than one year from the date of notification of noncompliance. The corrective actions were completed, followed by verification by the lead agency.

The regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency monitoring consultant was responsible for verifying timely correction via lowa's System to Achieve Results (I-STAR). In each region that had findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. The regional grantees demonstrated implementation of the requirement with 100% compliance for timely services.

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

The lead agency verified that the regional grantees corrected noncompliance for FFY 2016 using I-STAR . I-STAR has been used for monitoring correction of all individual child noncompliance including verification of correction (Prong 2) within the 365 day timeline. The lead agency monitoring consultant is responsible for verifying timely correction of noncompliance via I-STAR.

Corrective actions included assuring that services were provided even though the timeline was not met unless the child was no longer within the jurisdiction of the EIS program. The infants and toddlers that did not receive evaluations and initial IFSP meetings within 45 days did, in fact, have the evaluations completed and meetings held at a later date. The regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction.

OSEP Response

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator. (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017, although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		87.00%	94.00%	97.96%	99.68%	100%	100%	100%	100%	99.76%	99.47%

FFY	2015	2016
Target	100%	100%
Data	99.16%	98.01%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

Explanation of Changes

FFY 2017 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.



C No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
765	838	98.01%	100%	96.78%

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.

46

Reasons for Slippage

The FFY 2017 data for indicator C8A (96.78%) was 1.23 % lower than the FFY 2016 data (98.01%). Of the 838 toddlers who were randomly selected for reviews, 37 cases were considered noncompliant. All regional grantees with noncompliance received notification. Three regional grantees were below 95% compliant and will complete a corrective action plan. Most reasons for noncompliance were cited as staff illness or temporary leave of absence due to staffs' family emergency.

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

State monitoring

State database

Describe the method used to select EIS programs for monitoring.

All regional grantees were selected for monitoring as part of the Part C statewide file review process. Data were obtained from files of children exiting Part C and potentially eligible for Part B or children exiting Part C for other services. The monitoring cycle occurs annually with all regional grantees. A random sample of children exiting Part C was created using a confidence level of 95% with a +/- 10% margin of error for each regional grantee. State staff conducted IFSP file reviews and then desk audits were completed by the lead agency monitoring consultant. The data were then entered into the I-STAR system which sends written notification of noncompliance to regional grantees.

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Actions required in FFY 2016 response

none

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
16	16	0	0

FFY 2016 Findings of Noncompliance Verified as Corrected

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

Five regional grantees did not meet the 100% target in FFY 2016 and were notified of findings of noncompliance. Regional grantees were required to analyze root causes and correct each case of noncompliance, unless the child was no longer within the jurisdiction of the provider, as soon as possible and no later than one year from the date of notification of noncompliance. The corrective actions were completed, followed by verification by the lead agency

The regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency monitoring consultant was responsible for verifying timely correction via lowa's System to Achieve Results (I-STAR). In each region that had findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. The regional grantees demonstrated implementation of the requirement with 100% compliance for timely services.

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

The lead agency verified that the regional grantees corrected noncompliance for FFY 2016 using I-Star. I-STAR has been used for monitoring correction on all individual child noncompliance including verification of correction (Prong 2) within the 365 day timeline. The lead agency monitoring consultant is responsible for verifying timely correction of noncompliance via I-STAR.

Corrective actions included assuring that transition activities occurred even though the timeline was not met unless the child was no longer within the jurisdiction of the EIS program. All regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction.

OSEP Response

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017, although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		96.00%	100%	100%	100%	100%	100%	100%	100%	100%	100%

FFY	2015	2016
Target	100%	100%
Data	100%	100%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

Explanation of Changes

FFY 2017 SPP/APR Data

Data include notification to both the SEA and LEA



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 2016 Data	FFY 2017 Target	FFY 2017 Data
483	483	100%	100%	100%

Describe the method used to collect these data

Data were obtained from files of children exiting Part C and potentially eligible for Part B as part of the Part C statewide file review process using lowa's System to Achieve Results (I-STAR) monitoring system. The monitoring cycle occurs annually with all regional grantees. A random sample of children exiting Part C was created using a confidence level of 95% with a +/- 10% margin of error for each regional grantees. State staff conducted IFSP file reviews and then desk audits were completed by the lead agency monitoring consultant. The data were then entered into the I-STAR system which sends written notification of noncompliance to regional grantees.

Do you have a written opt-out policy? No

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



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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)							
	Describe the method used to select EIS programs for monitoring.						
All nine regional grantees in the state were selected for	monitoring.						
Actions required in FFY 2016 response	}						
none							
Correction of Findings of Noncomplian	ce Identified in FFY 2016						
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				
OSEP Response							
Required Actions							

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) **Indicator 8C: Early Childhood Transition**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		87.00%	91.00%	95.25%	99.40%	99.37%	99.35%	98.73%	100%	98.71%	99.30%

FFY	2015	2016
Target	100%	100%
Data	98.70%	98.19%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

Explanation of Changes

FFY 2017 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

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least 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 2016 Data	FFY 2017 Target	FFY 2017 Data
446	483	98.19%	100%	98.14%

Number of toddlers for whom the parent did not provide approval for the transition conference This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.	0
Number of documented delays attributable to exceptional family circumstances This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.	28

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

State monitoring State database

Describe the method used to select EIS programs for monitoring.

All regional grantees were selected for monitoring as part of the Part C statewide file review process. Data were obtained from files of children exiting Part C and potentially eligible for Part B. The monitoring cycle occurs annually with all regional grantees. A random sample of children exiting Part C and potentially eligible for Part B was created using a confidence level of 95% with a +/- 10% margin of error for each regional grantees. State 2/4/2020

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) staff conducted IFSP file reviews and then desk audits were completed by the lead agency monitoring consultant. The data were then entered into the I-STAR system which sends written notification of noncompliance to regional grantees.

Actions required in FFY 2016 response

none

Correction of Findings of Noncompliance Identified in FFY 2015

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

FFY 2016 Findings of Noncompliance Verified as Corrected

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

Five regional grantees did not meet the 100% target in FFY 2016 and were notified of findings of noncompliance. Regional grantees were required to analyze root causes and correct each case of noncompliance, unless the child was no longer within the jurisdiction of the provider, as soon as possible and no later than one year from the date of notification of noncompliance. The corrective actions were completed, followed by verification by the lead

The regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction. The lead agency monitoring consultant was responsible for verifying timely correction via lowa's System to Achieve Results (I-STAR). In each region that had findings of noncompliance, after technical assistance and corrective activities occurred, a follow-up review of data from five IFSPs with dates subsequent to the corrective activities was conducted. The regional grantees demonstrated implementation of the requirement with 100% compliance for timely services.

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

The lead agency verified that the regional grantees corrected noncompliance for FFY 2016 using I-STAR. I-STAR has been used for monitoring correction on all individual child noncompliance including verification of correction (Prong 2) within the 365 day timeline. The lead agency monitoring consultant is responsible for verifying timely correction via I-STAR.

Corrective actions included assuring that transition activities occurred even though the timeline was not met unless the child was no longer within the jurisdiction of the EIS program. All regional grantees made corrections within the 365 day timeline (including the State's verification of correction) and met requirements for timely correction.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 9: Resolution Sessions

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures under section 615 of the IDEA are adopted).

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

Historical Data

Baseline Data:

	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
F	Target ≥											
	Data											

FFY	2015	2016
Target ≥		
Data		

Key:		Gray - Data Prior to Baseline		Yellow - Baseline	Blue – Data Update
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FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥		

Key:

Explanation of Changes

Targets: Description of Stakeholder Input

Not applicable as Iowa has adopted the Part C due process procedures under 34 CFR §303.420.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/8/2018	3.1(a) Number resolution sessions resolved through settlement agreements	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/8/2018	3.1 Number of resolution sessions	n	null

FFY 2017 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2016 FFY 2017 Target		FFY 2017 Data
0	0			

Actions required in FFY 2016 response

none

OSEP Response

This Indicator is not applicable to the State.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 10: Mediation

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)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥											
Data											

FFY	2015	2016
Target ≥		
Data		

Key:		Gray - Data Prior to Baseline		Yellow - Baseline	Blue – Data Update
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FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥		

Key:

Explanation of Changes

Targets: Description of Stakeholder Input

The state of Iowa has had less than 10 mediations a year. Therefore, the state is not required to set targets for indicator C10.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.a.i Mediations agreements related to due process complaints	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.b.i Mediations agreements not related to due process complaints	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1 Mediations held	n	null

FFY 2017 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
0	0	0			

Actions required in FFY 2016 response

none

OSEP Response

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)			
The State reported fewer than ten mediations held in FFY 2017. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.			
Required Actions			

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 11: State Systemic Improvement Plan

Monitoring Priority: General Supervision

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

Reported Data

Baseline Data: 2013

FFY	2013	2014	2015	2016	2017
Target		87.00%	89.00%	91.00%	93.00%
Data	84.91%	83.25%	86.35%	85.54%	87.95%
Valley Pecaline					

Key: Gray – Data Prior to Baseline Yellow – Baseline

Blue – Data Update

FFY 2018 Target

FFY	2018		
Target	93.00%		
Key:			

Explanation of Changes

Description of Measure

See SSIP Phase I, II and III. No changes.

Targets: Description of Stakeholder Input

See attached PDF.

Overview

See attached PDF.

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., EIS program and/or EIS provider, geographic region, race/ethnicity, socioeconomic status, gender, etc.) As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

See attached PDF for all components of the Iowa Part C SSIP.

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

See attached PDF for all components of the Iowa Part C SSIP.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an
SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure
Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional
skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under
Indicator 4 (helping their child develop and leam)).
Statement
See attached PDF for all components of the Iowa Part C SSIP.
Description
*

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

See attached PDF for all components of the Iowa Part C SSIP.

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

Submitted Theory of Action: No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

Infrastructure Development

- (a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.

 (b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- (c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- (d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

See attached FFY 14 APR SSIP Phase II Iowa Part C report.

See attached Appendices A-E.

Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

See attached FFY 14 APR SSIP Phase II Iowa Part C report.

See attached Appendices A-E.

Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

See attached FFY 14 APR SSIP Phase II Iowa Part C report.

See attached Appendices A-E.

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Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

See attached FFY 14 APR SSIP Phase II Iowa Part C report.

See attached Appendices A-E.

Phase III submissions should include:

- Data-based justifications for any changes in implementation activities.
- Data to support that the State is on the right path, if no adjustments are being proposed.
- Descriptions of how stakeholders have been involved, including in decision-making.

A. Summary of Phase 3

- 1. Theory of action or logic model for the SSIP, including the SiMR.
- 2. The coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies.
- 3. The specific evidence-based practices that have been implemented to date.
- 4. Brief overview of the year's evaluation activities, measures, and outcomes.
- Highlights of changes to implementation and improvement strategies.

See attached PDF Iowa Part C SSIP Phase III Year 3 FFY 2017.

B. Progress in Implementing the SSIP

- 1. Description of the State's SSIP implementation progress: (a) Description of extent to which the State has carried out its planned activities with fidelity—what has been accomplished, what milestones have been met, and whether the intended timeline has been followed and (b) Intended outputs that have been accomplished as a result of the implementation activities.
- 2. Stakeholder involvement in SSIP implementation: (a) How stakeholders have been informed of the ongoing implementation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP.

See attached PDF Iowa Part C SSIP Phase III Year 3 FFY 2017.

C. Data on Implementation and Outcomes

- 1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan: (a) How evaluation measures align with the theory of action, (b) Data sources for each key measure, (c) Description of baseline data for key measures, (d) Data collection procedures and associated timelines, (e) [If applicable] Sampling procedures, (f) [If appropriate] Planned data comparisons, and (g) How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements
- 2. How the State has demonstrated progress and made modifications to the SSIP as necessary: (a) How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR, (b) Evidence of change to baseline data for key measures, (c) How data support changes that have been made to implementation and improvement strategies, (d) How data are informing next steps in the SSIP implementation, and (e) How data support planned modifications to intended outcomes (including the SIMR)—rationale or justification for the changes or how data support that the SSIP is on the right path 3. Stakeholder involvement in the SSIP evaluation: (a) How stakeholders have been informed of the ongoing evaluation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing evaluation of the SSIP

See attached PDF Iowa Part C SSIP Phase III Year 3 FFY 2017.

D. Data Quality Issues: Data limitations that affected reports of progress in implementing the SSIP and achieving the SIMR

- 1. Concern or limitations related to the quality or quantity of the data used to report progress or results
- 2. Implications for assessing progress or results
- 3. Plans for improving data quality

See attached PDF Iowa Part C SSIP Phase III Year 3 FFY 2017.

E. Progress Toward Achieving Intended Improvements

- 1. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up
- 2. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects
- 3. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SIMR
- Measurable improvements in the SIMR in relation to targets

See attached PDF Iowa Part C SSIP Phase III Year 3 FFY 2017.

F. Plans for Next Year

- 1. Additional activities to be implemented next year, with timeline
- 2. Planned evaluation activities including data collection, measures, and expected outcomes
- 3. Anticipated barriers and steps to address those barriers
- 4. The State describes any needs for additional support and/or technical assistance

See attached PDF lowa Part C SSIP Phase III Year 3 FFY 2017.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
OSEP Response
Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Certify and Submit your SPP/APR

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.

Selected: Designated by the Lead Agency Director to certify

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: Kimberly Villotti

Title: Administrative Consultant
Email: kimberly.villotti@iowa.gov

Phone: 515-339-5519

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