

## Indicator 12: Early Childhood Transition

### Instructions and Measurement

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

**Compliance indicator:** Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

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

#### Data Source

Data to be taken from State monitoring or State data system.

#### Measurement

- a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
- e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
- f. # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

#### Instructions

*If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.*

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

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR §303.211 or a similar State option.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 12 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2005	67.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	97.44%	97.73%	93.67%	97.62%	93.94%

#### Targets

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

#### FFY 2021 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	93
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	7

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	49
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	5
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	23
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	3

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	49	55	93.94%	100%	89.09%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

The slippage can be directly attributed to small N sizes. There was a larger number of children referred to part C less than 90 days before their 3rd birthday than the prior year, which can also be part of the difference, as that decreases the denominator.

**Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f**

6

**Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.**

The children included in (a), but not in b, c, d, e, or f are from five different LEAs. The range of days was from 4 to 49. There were no reasons given for 5 of them, and summer/winter break was listed as the reason for the 6th. All five LEAs were able to complete the IEPs prior to the data being collected, and to demonstrate compliance with the regulation by having completed eligibility determinations and having IEPs in place by the 3rd birthday for the rest of the children in the fiscal year.

**Attach PDF table (optional)**

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

State database that includes data for the entire reporting year

**Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.**

The OPI uses a census-level data collection for this indicator. The Part C Lead Agency submits data regarding all children referred to a school district to the OPI. The OPI collates this data and verifies the referral through the statewide student database system. This system contains documentation of the referral, the eligibility determination and, if appropriate, the student's IEP. This allows the OPI to determine district compliance with the Part C to Part B transition requirements. By using this method, the OPI can account for all children in the state who transition from Part C to Part B.

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

For FFY 2020, at the time of data collection, the evaluation process and IEP development had occurred for the children for whom the eligibility determination had not been made or an IEP developed by their third birthday. All instances of noncompliance with this requirement had been corrected in a timely manner. The LEAs that had an identified instance of noncompliance were required to provide subsequent documentation of 100 percent compliance with the Part C to Part B transition requirements. For each of these LEAs, their FFY2021 data demonstrated that they did understand the requirements of IDEA, and they were able to get all determinations and IEPs written by the 3rd birthdays for children referred from a Part C Agency.

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

## 12 - Prior FFY Required Actions

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

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

### Response to actions required in FFY 2020 SPP/APR

For FFY 2020, at the time of data collection, the evaluation process and IEP development had occurred for the children for whom the eligibility determination had not been made or an IEP developed by their third birthday. All instances of noncompliance with this requirement had been corrected in a timely manner. This satisfies Prong 1 of the OSEP 09-02 memo. The LEAs that had an identified instance of noncompliance were required to provide subsequent documentation of 100 percent compliance with the Part C to Part B transition requirements. They were able to demonstrate compliance in FFY2020. Their FFY2021 data also demonstrated that they did understand the requirements of IDEA, and they were able to get all determinations and IEPs written by the 3rd birthdays for children referred from a Part C Agency. This satisfies Prong 2 of the OSEP 09-02 memo.

## 12 - OSEP Response

The State's FFY 2020 data for this indicator reflected less than 100% compliance. The State reported that it did not identify any findings of noncompliance in FFY 2020 because it corrected the noncompliance before it made any findings. However, OSEP could not determine if the State ensured, consistent with OSEP Memo 09-02, that each LEA 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.

## 12 - Required Actions

The State did not report that it identified any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance. In the FFY 2022 SPP/APR, the State must report how it verified that each LEA with noncompliance identified in FFY 2020: (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 LEA, consistent with OSEP Memo 09-02.

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.