

# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on  
FFY 2020

Texas



**PART C DUE**  
**February 1, 2022**

U.S. DEPARTMENT OF EDUCATION  
WASHINGTON, DC 20202

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

The Data, Analysis, and Reporting section of the Early Childhood Intervention Part C system within the Health, Developmental and Independence Services Department at the Texas Health and Human Services Commission (HHSC) gathered and analyzed data for the Individuals with Disabilities Education Act (IDEA) Part C Federal Fiscal Year (FFY) 2020 Annual Performance Report (APR) for the Texas Early Childhood Intervention (ECI) Part C system. A stakeholder meeting was held on December 14, 2021, to share information about the APR, including how baselines and targets are set and target recommendations for FFY 2020-2025, and allow stakeholders to ask questions and provide input on the APR. The APR draft, along with actual data, targets and activities, was presented to the State Interagency Coordinating Council (SICC), the ECI Advisory Committee, on January 26, 2022. The SICC and stakeholders assisted Texas Part C in examining data as well as targets from FFY2020-FFY2025 and activities. During these meetings, stakeholders and the council provided input and recommendations for improvement. In particular, stakeholders requested that Texas Part C consider increasing Indicators 5 and 6 targets related to child find, which we did in response to these comments.

#### Additional information related to data collection and reporting

#### 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.**

Texas' Part C system is administered by the Health and Human Services Commission. Texas' supervision of the state system involves many avenues of monitoring and improvement. The performance of contracted agencies is reviewed through analysis of a large number of functions, criteria, and factors, using both state criteria and national standards. An analysis is conducted on a monthly, quarterly, and annual basis using data in the Texas Kids Intervention Data System (TKIDS), the online application used for submission of client data to the state. The TKIDS Reporting and Data (TRAD) system provides 33 different reports that aggregate data around functions of the ECI system for individual programs and 1 internal report listing average delivered hours per program for use by the ECI state office.

ECI monitors contracted agency performance on contract terms and conditions, including contract amendments; program rules, policies, and procedures; other requested contractor reporting; identified areas of associated risk; and any issues that require special attention and monitoring as determined by ECI. Depending on the analysis of the data, performance management activities may include desk reviews of provider data, policies, and consumer records, as well as on-site visits and other activities determined necessary.

The systematic, ongoing, on-site monitoring of contractor compliance and finance is performed by a team of highly qualified experts in these procedures. The team identifies areas of non-compliance and ensures necessary corrective actions are implemented. The team verifies the accuracy of data reports and provides evaluation of functions that are not covered by data analysis. ECI conducts quality assurance reviews based on a risk assessment. This process involves clinical and analytical expertise by ECI quality assurance therapists and quality assurance specialists, with a primary focus on providing assistance to contractors on eligibility determination, IFSP service planning and outcomes, the delivery of therapy services and specialized skills training, and quality record keeping, as well as promoting quality and reliable outcomes data reporting. Results are communicated to the programs both informally and by written report.

Complaints are received through the ECI family liaison or through the HHS Office of the Ombudsman. ECI uses three formal processes for resolving complaints or disputes: filing a formal, written complaint to ECI; mediation; or requesting an administrative due process hearing. Formal complaints are received by the ECI Director. ECI completes an investigation and provides a resolution within 60 days from the date the complaint was received. If a complainant chooses to pursue mediation, both parties must agree to participate. A neutral mediator is assigned at ECI's expense to try to reach a resolution. An administrative due process hearing is a more formal process than filing a formal complaint or requesting mediation. A hearing officer makes a decision within 30 days from the date the request for the hearing was filed. A complainant has the right to access any and all of these options when trying to resolve a disagreement about a child's services or any aspect of the ECI system believed to violate legal requirements. The HHSC Executive Commissioner is provided with a quarterly report detailing information on ECI and other complaint trends.

Section 618 of IDEA requires that each state submit data about the infants and toddlers, birth through age 2, who receive early intervention services under Part C of IDEA. Annually, ECI uses IDEA Section 618 Data, APR indicators, local reports and monitoring reports from onsite monitoring visits to assist in evaluating compliance and performance of each contractor. These data are considered in final program determinations and are used to communicate overall contractor strengths and weaknesses, resulting in recommendations for improvements. In addition, local reports, determination reports, family outcomes surveys, and child outcomes data are used to identify opportunities for improvement or recognition for excellent performance.

#### Technical Assistance System:

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

The technical assistance system includes supports that the ECI State Office has in place to offer timely delivery of information and resources to early intervention contractors in Texas. Technical assistance may be provided directly to contractors who have a specific need or may be delivered via webinar when a need is perceived to be more widespread. Most webinars are archived so direct service providers and other contract staff who cannot participate during the "live" webinar can access the information when it is convenient for them. The use of technology to deliver technical assistance allows ECI to provide consistent information to all staff at any time. General information about ECI, data, reports, webinars, and training modules are available to all staff at the contracting programs and the general public through the ECI website. ECI offers technical assistance and professional development through interactive web-based modules, webinars from various partners, videos, written documents, and publications. In addition, individualized technical assistance is provided to contractor leadership based on compliance or quality issues identified during compliance monitoring, quality assurance visits, and analysis of information entered by contractors into the statewide data system.

#### 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.**

ECl provides professional personnel development to contractors across the state to comply with the IDEA Part C requirement that a state system must include a Comprehensive System of Personnel Development. ECl state office staff have expertise in principles of adult learning strategies; development, implementation, and evaluation of training; and methodologies for developing and disseminating information/content both in person and via web-based training. State office subject matter experts in early intervention (i.e., IDEA Part C, quality practices in early intervention, Medicaid, interagency collaborations, fiscal requirements, third party reimbursement, policy, etc.) collaborate on content for professional development and technical assistance products. Professional development needs are identified through a variety of methods including review of individual program and statewide data, information from compliance monitoring and quality assurance reviews, new research and current evidence-based practices and initiatives in early intervention, input from contractor program directors and supervisors, results from training surveys, and national and state-level policy changes. All professional personnel development provided by ECl is offered at no cost to the contractors. Additionally, contracting agencies use contract funds to pay for professional development opportunities not offered by the state office. ECl professional personnel development is offered to contractors through a variety of formats including interactive online training modules, webinars, videos, written documents, the central directory of resources, workbooks, the ECl library materials, and training packages that include materials and activities for contractor staff to complete individually or as a group. ECl technical assistance materials are available for contractors, community partners, and families.

#### **Broad Stakeholder Input:**

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

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECl Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECl contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECl Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECl data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECl services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

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

YES

#### **Number of Parent Members:**

6

#### **Parent Members Engagement:**

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

Parents and parent center staff, including those on the ECl Advisory Committee and others, were invited to participate in both the Advisory Committee meeting and the stakeholder meeting in December to review and discuss APR targets. Before the stakeholder meeting was held in December 2021, information showing the data for the past 10 years, targets and baselines, and how the data has been analyzed was shared with stakeholders. This helped to provide education about the data and facilitate the discussion to ensure that planning for evaluation and implementation going forward would have a positive impact on the future of the program. Stakeholders reported in a post-meeting survey that this information was extremely helpful for them, and we will be sharing similar information going forward to maintain a strong relationship and ensure stakeholders are informed and educated and engaged in both improvement strategies as well as evaluation.

In addition to these two official meetings, these parents have also been engaged in other activities that focused on developing strategies for improving ECl services and evaluating progress. Some of these opportunities included: participating in panel presentations to increase knowledge of ECl and ways to better collaborate with programs and partners who also serve children birth to 3 with disabilities and/or developmental delays, serving on the personnel retention workgroup to help identify ways to improve hiring and ongoing training to ensure ECl personnel were qualified and retained to address the impact of staff turnover on families, reviewing publications and other materials to increase knowledge of both ECl and other early childhood programs, and participating on the team evaluating the family outcomes survey and developing ways to increase both responsiveness and equity.

#### **Activities to Improve Outcomes for Children with Disabilities:**

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

During the year the HHS ECl office conducted several projects and activities to increase the capacity of parents and to improve outcomes. These include collaborating with the BUILD Initiative to facilitate a series of focus groups with parents to identify strengths and gaps in our child find, coordinating support and inclusion of a representative from Texas Parent 2 Parent in the TA project that focused on increasing responsiveness and equity in our Family Outcomes Survey and connecting with Partners Resource Network to increase education and build advocacy of parents of children who have a disability or developmental delay. Additionally, parent representatives on the ECl Advisory Committee, participated in the development and review of an Inter-agency webpage designed to bring all early childhood information into one place so that parents can more easily access information about early childhood programs, including ECl, preschool, child care options, home visiting programs, and more. Through this project, parents were connected with other agencies and organizations and were provided the opportunity to expand their knowledge while also helping to ensure that ECl's work resonates and has an impact on families of infants and toddlers who have a disability.

#### **Soliciting Public Input:**

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

Public input was sought through the process outlined in the Texas Open Meetings Act (OMA), requiring all information shared and discussed in ECI Advisory Committee meetings be both provided on site and posted electronically. The meeting notice with the date, time and location is posted both in the Texas Register and on the HHSC webpage, at a minimum 10 days in advance of the meeting. The OMA also requires that any member of the public wishing to make comments be allowed to do so in the public meeting. Additionally, an interest email was sent to all interagency partners and other stakeholders inviting them to attend and participate in the discussion about the APR data, target setting, improvement and evaluation ideas. The invitation for this meeting was sent out more than 2 weeks in advance and for those members who were unable to attend they were given the opportunity to receive the information and provide feedback either by email or by setting up an individual call within 2 weeks of the initial meeting.

**Making Results Available to the Public:**

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

All information discussed in the ECI Advisory Committee, including public comment, is made available by posting of a recording of the meeting on the HHSC webpage within 3 days of the meeting. For those who participated in the stakeholder workgroup, the final results of the target setting, and other discussions was provided by email within 7 days of the meeting. These timelines provided plenty of time for any final comments to be shared before the APR was submitted in the final format and targets were set.

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2019 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2019 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.**

The state posts information about the performance of each local ECI program and a complete copy of its APR, including any revisions that may be made to the APR targets, on the ECI Data and Reports page of the Texas Health and Human Services Commission website.

<https://hhs.texas.gov/doing-business-hhs/provider-portals/assistive-services-providers/early-childhood-intervention-programs/data-reports/eci-local-program-performance-reports>

The APR is published no later than 120 days following the State's submission of its report.

**ECI Consumer Profile:**

Describes various characteristics of the children and families served by the ECI program in the most recent fiscal year.

**ECI Served by County:**

Presents the number of children served by the ECI program in the most recent fiscal year, statewide and by each county. Also provides the number of children served as a percentage of the birth-to-three population.

**Part C Annual Performance Report:**

Describes progress in meeting the targets established in the State Performance Plan and includes the State Systemic Improvement Plan.

**ECI Local Program Performance Reports:**

The performance of each local ECI program is reported on a number of indicators from the Annual Performance Report.

**Intro - Prior FFY Required Actions**

**Response to actions required in FFY 2019 SPP/APR**

**Intro - OSEP Response**

**Intro - Required Actions**

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

### Data Source

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

### Measurement

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

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

### Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	82.70%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	96.34%	95.61%	95.88%	95.76%	96.01%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

### FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
7,447	8,654	96.01%	100%	96.04%	Did not meet target	No Slippage

**Number of documented delays attributable to exceptional family circumstances**

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

864

**Provide reasons for delay, if applicable.**

Exceptional family circumstances such as a child or family illness, hospitalization of the child or another family member, or other family circumstances; other exceptional circumstances such as natural disasters or extreme weather-related conditions; staff shortage; staff illness, scheduling difficulties; and unclear documentation are reasons for the delay.

**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).**

Early Childhood Intervention services needed by the child must be initiated in a timely manner and delivered as planned in the IFSP. Texas defines "timely" as the percentage of children with IFSPs who received planned services with a start date within 28 days of the family signing the IFSP.

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

State database

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

All records were from infants and toddlers enrolled before or during the period of September 1, 2020 through November 30, 2020 and the initiation of new early intervention services from initial IFSPs or subsequent IFSPs.

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

The data reflects all infants and toddlers with new early intervention services from IFSPs between September 1, 2020 through November 30, 2020 (the first quarter of the state fiscal year 2021). This data reflects stable enrollment trends; it is considered representative of the entire year's data and the full reporting period. All ECI programs are reviewed to ensure all required IFSP data was entered into the state database (TKIDS) during the state fiscal year for all eligible infants and toddlers.

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

ECI services were required to begin no later than 28 days from the date the parent provided the written consent, as shown on the IFSP. The start date of the service is a required field in the TKIDS database. If the services were not provided in a timely manner, due to either exceptional circumstances or other reasons, this information was documented in the child record in the database. Documented exceptional family circumstances are included in the numerator and denominator for calculating the actual data target.

Actual Data for FFY 2020 include

1. Total children reviewed from all ECI programs: 8,654
2. Children with IFSPs receiving early intervention services in a timely manner (begin on or before 28 days with the parent's consent): 7,447
3. Children with IFSPs who received services late, due to documented exceptional circumstances, such as child or family illness, hospitalization of the child or another family member, or other family circumstances and other exceptional circumstances such as natural disasters or extreme weather-related conditions: 864
4. Children with IFSPs not receiving timely services delivery for other reasons such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 343

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
32	32	0	0

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

In compliance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements for the timely service initiation (within 28 days of development of the IFSP). ECI provides a list of the potentially noncompliant cases to each ECI contractor and gives them the opportunity to review the data for accuracy and provide additional evidence that demonstrates compliance. Once the data is confirmed, ECI identifies cases that are, in fact, non-compliant. ECI issues findings based on the non-compliant cases. ECI identified 32 programs that were noncompliant. After this, performance specialists reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI program to verify that the 32 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all non-compliance related to each case.

Through this process, Texas Part C confirmed 100% correction of the cases in the 32 programs. The corrections were verified based on either onsite record review or verification of all non-compliant cases in the TKIDS database for IFSPs that were developed within one year from the identification of the finding.

**Correction of System Findings**

ECI ensures correction of a system finding of all non-compliant cases by pulling data from subsequent time periods. System findings are cleared when

the data indicates zero non-compliant cases for each program and the expectation is for each case to be cleared within one year of the issuance of the finding.

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

In compliance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements for the 45-day timeline (i.e., an initial evaluation, initial assessment, and an initial IFSP meeting conducted for eligible children), for each individual case.

**Correction of Individual Child Findings**

ECI ensures the correction of individual child findings by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child is no longer in the jurisdiction of the ECI program.

**Process to Address Continued Noncompliance.**

If an ECI contractor is unable to clear a child and/or system finding within one year of the issuance of the finding and demonstrates continued noncompliance with a lack of significant improvement, ECI may take remedial additional action, up to and including contract termination. This also negatively impacts the ECI contractor’s annual determination

For this reporting period, all programs had every case corrected for all non-compliance at individual and systems-level and hence no program was identified for continued non-compliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**1 - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2019 SPP/APR**

**1 - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2020 - June 30, 2021). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

**1 - Required Actions**

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

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

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	98.50%

FFY	2015	2016	2017	2018	2019
Target>=	99.00%	99.00%	99.00%	99.00%	99.20%
Data	99.58%	99.29%	99.26%	99.28%	99.06%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	99.20%	99.20%	99.20%	99.20%	99.20%	99.20%

### Targets: Description of Stakeholder Input

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	26,959



Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Total number of infants and toddlers with IFSPs	27,020

**FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
26,959	27,020	99.06%	99.20%	99.77%	Met target	No Slippage

Provide additional information about this indicator (optional).

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**2 - Required Actions**

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

#### Summary Statements for Each of the Three Outcomes:

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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

### 3 - Indicator Data

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

NO

#### Targets: Description of Stakeholder Input

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

Texas ECI has chosen to revise the baseline for this Indicator. In addition to routine data analyses, Texas ECI conducted an in-depth data analysis of the child outcomes data at the state and local level and presented the revised baseline and new targets to stakeholders and to the members of the ECI Advisory Committee.

As of last reporting year, the baseline data for this Indicator is from FFY 2013, which was based on data from years FFY 2009-FFY 2012. The baseline data included pilot data for the years FFY 2009 and FFY 2010. These years involved data from the pilot phase of implementing child outcomes reporting across the state. While training was provided on assigning child outcomes ratings at the local level during implementation, Texas is still building on inter-rater and intra-rater reliability of the child outcomes ratings.

As years progressed, Texas observed a consistent downward trend for summary statement 2 and fluctuations in the recent years with summary statement 1. Texas attributes this decrease over time to the following reasons:

- Routine coaching through webinars, online training modules, and technical assistance
- Implementation of the State Systemic Improvement Plan (SSIP)
- Data quality monitoring

We believe the above steps and procedures have led to improvements in the data quality of the child outcomes ratings. This could have led to fewer children exiting in progress categories a and e thereby leading to the percentage of summary statements 2 being lower than the target and baseline. Similarly, fewer children are exiting in progress categories a and d leading to fluctuations in the percentages for summary statement 1. With the newly established baseline and targets, Texas ECI will continue to monitor the progress of this Indicator.

#### Historical Data

Outcome	Baseline	FFY	2015	2016	2017	2018	2019
A1	2019	Target>=	71.20%	71.40%	71.60%	71.80%	71.72%
A1	69.50%	Data	71.90%	72.30%	72.28%	71.74%	69.50%
A2	2019	Target>=	53.90%	54.10%	54.30%	54.40%	53.69%
A2	46.29%	Data	52.88%	52.40%	48.71%	49.33%	46.29%
B1	2019	Target>=	77.20%	77.30%	77.40%	77.50%	78.22%
B1	77.10%	Data	77.94%	78.55%	78.42%	78.19%	77.10%
B2	2019	Target>=	45.15%	45.20%	45.30%	45.40%	45.02%
B2	35.30%	Data	42.40%	42.23%	39.27%	38.01%	35.30%
C1	2019	Target>=	77.50%	77.60%	77.70%	77.80%	79.52%
C1	77.46%	Data	79.85%	80.43%	80.35%	79.53%	77.46%
C2	2019	Target>=	51.60%	51.65%	51.70%	51.80%	51.41%
C2	44.13%	Data	51.21%	49.88%	47.79%	47.42%	44.13%

#### Targets

FFY	2020	2021	2022	2023	2024	2025
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Target A1>=	69.51%	69.51%	69.51%	69.52%	69.52%	69.52%
Target A2>=	46.30%	46.30%	46.30%	46.31%	46.31%	46.31%
Target B1>=	77.11%	77.11%	77.11%	77.12%	77.12%	77.12%
Target B2>=	35.31%	35.31%	35.31%	35.32%	35.32%	35.32%
Target C1>=	77.47%	77.47%	77.47%	77.48%	77.48%	77.48%
Target C2>=	44.14%	44.14%	44.14%	44.15%	44.15%	44.15%

**FFY 2020 SPP/APR Data**

**Number of infants and toddlers with IFSPs assessed**

20,193

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	73	0.36%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	5,750	28.48%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	5,310	26.30%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	6,232	30.86%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2,828	14.00%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	11,542	17,365	69.50%	69.51%	66.47%	Did not meet target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	9,060	20,193	46.29%	46.30%	44.87%	Did not meet target	Slippage

**Provide reasons for A1 slippage, if applicable**

Challenges for families and ECI service providers stemming from the COVID-19 pandemic may have impacted children's progress in ECI, resulting in lower child outcomes during this period.

ECI continues to focus its efforts on improving the data quality and data completeness that is used for this outcome. The state office relies on management reports that show whether data are collected and reported as required; contractors have access to two different reports that indicate whether data are complete as required at entry and exit; and detail and aggregate reports display actual results for entry ratings, progress data, and summary statements. ECI continuously monitors the child outcomes ratings on a quarterly basis by tracking the missing data entries for entry and exit ratings to ensure data completeness. The quality assurance team reviews the accuracy of the entry and exit outcome ratings over a period of time.

As part of the State Systemic Improvement Plan (SSIP), technical assistance has been provided in addition to the online training modules, particularly with regard to how to assign realistic, accurate ratings of children in the ECI program compared to their same-age peers, including a new webinar released in September 2020 to educate ECI providers in making connections between the information gathered during the referral, intake, evaluation, and IFSP processes and using that information to accurately document functioning and coding for each of the child's daily routines and assign Global Child Outcome ratings that align with the information and codes in the IFSP, as well as the rest of the child's record. These efforts could have resulted in improved data quality resulting in low counts in exit categories of a and d.

All the above-stated reasons could have resulted in more accurate but less positive outcome ratings. These changes may have additionally contributed to the fluctuation in percentages of summary statements 1 and 2.

**Provide reasons for A2 slippage, if applicable**

Challenges for families and ECI service providers stemming from the COVID-19 pandemic may have impacted children's progress in ECI, resulting in lower child outcomes during this period.

ECI continues to focus its efforts on improving the data quality and data completeness that is used for this outcome. The state office relies on management reports that show whether data are collected and reported as required; contractors have access to two different reports that indicate whether data are complete as required at entry and exit; and detail and aggregate reports display actual results for entry ratings, progress data, and summary statements. ECI continuously monitors the child outcomes ratings on a quarterly basis by tracking the missing data entries for entry and exit ratings to ensure data completeness. The quality assurance team reviews the accuracy of the entry and exit outcome ratings over a period of time.

As part of the State Systemic Improvement Plan (SSIP), technical assistance has been provided in addition to the online training modules, particularly with regard to how to assign realistic, accurate ratings of children in the ECI program compared to their same-age peers, including a new webinar released in September 2020 to educate ECI providers in making connections between the information gathered during the referral, intake, evaluation, and IFSP processes and using that information to accurately document functioning and coding for each of the child's daily routines and assign Global Child Outcome ratings that align with the information and codes in the IFSP, as well as the rest of the child's record. These efforts could have resulted in improved data quality resulting in low counts in exit categories of a, d and e.

All the above-stated reasons could have resulted in more accurate but less positive outcome ratings. These changes may have additionally contributed to the fluctuation in percentages of summary statements 1 and 2.

**Outcome B: Acquisition and use of knowledge and skills (including early language/communication)**

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	51	0.25%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	5,216	25.83%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	8,210	40.66%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	6,019	29.81%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	697	3.45%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	14,229	19,496	77.10%	77.11%	72.98%	Did not meet target	Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	6,716	20,193	35.30%	35.31%	33.26%	Did not meet target	Slippage

**Provide reasons for B1 slippage, if applicable**

Challenges for families and ECI service providers stemming from the COVID-19 pandemic may have impacted children's progress in ECI, resulting in lower child outcomes during this period.

ECI continues to focus its efforts on improving the data quality and data completeness that is used for this outcome. The state office relies on management reports that show whether data are collected and reported as required; contractors have access to two different reports that indicate whether data are complete as required at entry and exit; and detail and aggregate reports display actual results for entry ratings, progress data, and summary statements. ECI continuously monitors the child outcomes ratings on a quarterly basis by tracking the missing data entries for entry and exit ratings to ensure data completeness. The quality assurance team reviews the accuracy of the entry and exit outcome ratings over a period of time.

As part of the State Systemic Improvement Plan (SSIP), technical assistance has been provided in addition to the online training modules, particularly with regard to how to assign realistic, accurate ratings of children in the ECI program compared to their same-age peers, including a new webinar released in September 2020 to educate ECI providers in making connections between the information gathered during the referral, intake, evaluation, and IFSP processes and using that information to accurately document functioning and coding for each of the child's daily routines and assign Global Child Outcome ratings that align with the information and codes in the IFSP, as well as the rest of the child's record. These efforts could have resulted in improved data quality resulting in low counts in exit categories of a and d.

All the above-stated reasons could have resulted in more accurate but less positive outcome ratings. These changes may have additionally contributed to the fluctuation in percentages of summary statements 1 and 2.

**Provide reasons for B2 slippage, if applicable**

Challenges for families and ECI service providers stemming from the COVID-19 pandemic may have impacted children's progress in ECI, resulting in lower child outcomes during this period.

ECI continues to focus its efforts on improving the data quality and data completeness that is used for this outcome. The state office relies on management reports that show whether data are collected and reported as required; contractors have access to two different reports that indicate whether data are complete as required at entry and exit; and detail and aggregate reports display actual results for entry ratings, progress data, and summary statements. ECI continuously monitors the child outcomes ratings on a quarterly basis by tracking the missing data entries for entry and exit ratings to ensure data completeness. The quality assurance team reviews the accuracy of the entry and exit outcome ratings over a period of time.

As part of the State Systemic Improvement Plan (SSIP), technical assistance has been provided in addition to the online training modules, particularly with regard to how to assign realistic, accurate ratings of children in the ECI program compared to their same-age peers, including a new webinar released in September 2020 to educate ECI providers in making connections between the information gathered during the referral, intake, evaluation, and IFSP processes and using that information to accurately document functioning and coding for each of the child's daily routines and assign Global Child Outcome ratings that align with the information and codes in the IFSP, as well as the rest of the child's record. These efforts could have resulted in improved data quality resulting in low counts in exit categories of a, d, and e.

All the above-stated reasons could have resulted in more accurate but less positive outcome ratings. These changes may have additionally contributed to the fluctuation in percentages of summary statements 1 and 2.

**Outcome C: Use of appropriate behaviors to meet their needs**

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	52	0.26%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	4,689	23.22%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	7,194	35.63%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	7,305	36.18%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	953	4.72%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	14,499	19,240	77.46%	77.47%	75.36%	Did not meet target	Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	8,258	20,193	44.13%	44.14%	40.90%	Did not meet target	Slippage

**Provide reasons for C1 slippage, if applicable**

Challenges for families and ECI service providers stemming from the COVID-19 pandemic may have impacted children's progress in ECI, resulting in lower child outcomes during this period.

ECI continues to focus its efforts on improving the data quality and data completeness that is used for this outcome. The state office relies on management reports that show whether data are collected and reported as required; contractors have access to two different reports that indicate whether data are complete as required at entry and exit; and detail and aggregate reports display actual results for entry ratings, progress data, and summary statements. ECI continuously monitors the child outcomes ratings on a quarterly basis by tracking the missing data entries for entry and exit ratings to ensure data completeness. The quality assurance team reviews the accuracy of the entry and exit outcome ratings over a period of time.

As part of the State Systemic Improvement Plan (SSIP), technical assistance has been provided in addition to the online training modules, particularly with regard to how to assign realistic, accurate ratings of children in the ECI program compared to their same-age peers, including a new webinar released in September 2020 to educate ECI providers in making connections between the information gathered during the referral, intake, evaluation, and IFSP processes and using that information to accurately document functioning and coding for each of the child's daily routines and assign Global Child Outcome ratings that align with the information and codes in the IFSP, as well as the rest of the child's record. These efforts could have resulted in improved data quality resulting in low counts in exit categories of a and d.

All the above-stated reasons could have resulted in more accurate but less positive outcome ratings. These changes may have additionally contributed to the fluctuation in percentages of summary statements 1 and 2.

**Provide reasons for C2 slippage, if applicable**

Challenges for families and ECI service providers stemming from the COVID-19 pandemic may have impacted children's progress in ECI, resulting in lower child outcomes during this period.

ECl continues to focus its efforts on improving the data quality and data completeness that is used for this outcome. The state office relies on management reports that show whether data are collected and reported as required; contractors have access to two different reports that indicate whether data are complete as required at entry and exit; and detail and aggregate reports display actual results for entry ratings, progress data, and summary statements. ECl continuously monitors the child outcomes ratings on a quarterly basis by tracking the missing data entries for entry and exit ratings to ensure data completeness. The quality assurance team reviews the accuracy of the entry and exit outcome ratings over a period of time.

As part of the State Systemic Improvement Plan (SSIP), technical assistance has been provided in addition to the online training modules, particularly with regard to how to assign realistic, accurate ratings of children in the ECl program compared to their same-age peers, including a new webinar released in September 2020 to educate ECl providers in making connections between the information gathered during the referral, intake, evaluation, and IFSP processes and using that information to accurately document functioning and coding for each of the child's daily routines and assign Global Child Outcome ratings that align with the information and codes in the IFSP, as well as the rest of the child's record. These efforts could have resulted in improved data quality resulting in low counts in exit categories of a, d, and e.

All the above-stated reasons could have resulted in more accurate but less positive outcome ratings. These changes may have additionally contributed to the fluctuation in percentages of summary statements 1 and 2.

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	20,193
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.	4,011

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The child's team assigns ratings based on information gathered throughout the evaluation and needs assessment process. The Battelle Developmental Inventory 2nd edition is used to determine eligibility for children who don't have a qualifying diagnosis. The child's extent of delay on the BDI-2 or the DAYC-2 are the only factors in assigning ratings. Another factor in determining ratings is the clinical assessment by team members. In some cases, the team may use an additional instrument to look more closely at specific developmental concerns, or the team may choose to assess these concerns without a specific protocol. Finally, the ECl team has a discussion with the parents about the child's functional strengths and needs within the context of daily routines and activities. The team uses all of these processes (BDI-2 when appropriate, clinical assessment, family discussion about functioning in routines) to arrive at the Global Child Outcomes ratings.

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

ECl continues to focus its efforts on improving the quality of the data that is used for this outcome. The state office relies on management reports that show whether data are collected and reported as required; contractors have access to two different reports that indicate whether data are complete as required at entry and exit; and detail and aggregate reports display actual results for entry ratings, progress data, and summary statements. The quality assurance team reviews the accuracy of the entry and exit outcome ratings over a period of time. Technical assistance has been provided in addition to the online training modules, particularly with regard to how to assign realistic, accurate ratings of children in the ECl program compared to their same-age peers, including a new webinar released in September 2020 to educate ECl providers in making connections between the information gathered during the referral, intake, evaluation, and IFSP processes and using that information to accurately document functioning and coding for each of the child's daily routines and assign Global Child Outcome ratings that align with the information and codes in the IFSP, as well as the rest of the child's record. This training and technical assistance may have resulted in more accurate but less positive outcome ratings. These changes may have additionally contributed to the fluctuation in percentages of summary statements 1 and 2.

**3 - Prior FFY Required Actions**

None

**3 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**3 - Required Actions**

## Indicator 4: Family Involvement

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

Provide the actual numbers used in the calculation.

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

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

Report the number of families to whom the surveys were distributed and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

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

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

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

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

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

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

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2013	Target>=	87.00%	87.00%	87.00%	87.00%	87.00%
A	86.57%	Data	86.40%	88.84%	87.91%	86.58%	85.08%
B	2013	Target>=	87.70%	87.70%	87.70%	88.00%	88.00%
B	87.71%	Data	87.41%	90.18%	88.75%	88.16%	88.05%
C	2013	Target>=	87.80%	87.80%	87.80%	88.00%	88.00%
C	87.79%	Data	87.41%	88.59%	89.98%	88.94%	88.16%



**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target A>=	87.01%	87.01%	87.01%	87.02%	87.02%	87.02%
Target B>=	88.01%	88.01%	88.01%	88.02%	88.02%	88.02%
Target C>=	88.01%	88.01%	88.01%	88.02%	88.02%	88.02%

**Targets: Description of Stakeholder Input**

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

**FFY 2020 SPP/APR Data**

The number of families to whom surveys were distributed	5,672
Number of respondent families participating in Part C	2,637
Survey Response Rate	46.49%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	2,210
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	2,560
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	2,273
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	2,559
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	2,260
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	2,559

Measure	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	85.08%	87.01%	86.33%	Did not meet target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	88.05%	88.01%	88.82%	Met target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	88.16%	88.01%	88.32%	Met target	No Slippage

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

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

A stratified random sampling plan with a 95% confidence level was used to select a sample for FFY20. All programs were stratified with respect to geographic region and size (large versus medium/small). Families were selected from each of the seven geographic regions to ensure statewide representation. A sample of families whose infant(s) and/or toddler(s) had been enrolled for at least six months as of May 1, 2021, was selected from each of the 41 programs. The number of families who received the survey was proportionate to the size of the program. The use of proportionate distribution of the surveys helped ensure a representative sample.

Texas Part C input the Family Outcomes Survey-Revised (FOS-R) into a website. The survey period was a six-week period from May 2021 through July 2021. During this period, families received their surveys via email or through a link provided during telehealth visits. After the survey period ended, the state office accessed the survey responses that families submitted electronically. Completed survey responses were only accessible to the state office to ensure confidentiality.

A total of 6,602 families were randomly selected to respond to the survey; 930 were undeliverable, due to changes in address, family discharging from ECI, or the service coordinator or staff member being unable to reach the family. A total of 5,672 families received it; 2,637 returned the survey. This resulted in 46% of respondent families participating in Part C's Family Outcomes Survey.

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

**Survey Response Rate**

FFY	2019	2020
Survey Response Rate	50.62%	46.49%

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

Texas ECI had a 46% response rate for FFY 2020 and a 51% response rate in FFY 2019. Though we saw a 5% decrease from 2019 to 2020, the response rates from the last two years were the highest return rates we have seen since FFY 2012, which could be due to the changes in the survey distribution from a hybrid model of paper survey and electronic survey to a completely electronic platform COVID-19 could also have impacted families' availability to complete the survey. Additionally, Texas ECI is focusing on multiple strategies that are being implemented for continuous improvement as discussed below.

Texas ECI is focusing on extensive data analysis considering equity factors needed to develop practices and strategies that will help improve our outcomes, enhance representative family engagement and drive future policy or procedure changes to better serve children with developmental delays or disabilities and their families. Texas ECI is participating in the Early Childhood Technical Assistance Center (ECTA)'s two-year technical assistance project to promote Equity in Family Outcomes and is working towards implementing multiple activities to strengthen family engagement, provide training and technical assistance to contractors on how to analyze and use their FOS results for continuous improvement, and create equity dashboards for each contractor showing their performance on key metrics/outcomes by income, language, race/ethnicity. We are also working towards making the survey available in languages other than English and Spanish. Texas ECI is also planning to work with the local contractors who had a high survey return rate to understand their processes at the program level and to share relevant insights with other local contractors who need substantial improvement in their response rate.

For this reporting period, Texas ECI conducted webinars for local ECI contractors and developed an infographic emphasizing the importance of the Family Outcomes Survey in English and Spanish, which was uploaded into Survey Monkey for families to read before starting the survey. Texas ECI also conducted a survey to gather input and share information with other stakeholders, like teachers for the deaf and hard of hearing or a visual impairment, that may help with interpreting data or developing action items to help us increase both representation and performance based on how this data is used in our collaborative work. Texas ECI will continue to disaggregate the responses by race/ethnicity; by local contractor; and by other selected categories and then engage with stakeholders including our parent group to interpret results and plan to address any non-response bias among the various groups.

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

While the statewide response rate was at 46%, Texas had 41% of the contractors (17 out of 41 contractors) who were below the statewide return rate and 59% of the contractors who were above the statewide return rate (24 of the 41 contractors).

Texas ECI uses the methodology of strategic random sampling based on the following demographic variables: eligibility type, race/ethnicity, language, geographic region, age at enrollment, and gender to avoid sampling bias. The demographic profile of the final sample matched the statewide enrolled profile for this reporting period. This was followed by comparing the responders and the non-responders on the following variables: age at enrollment (calculated using Date of Birth and Enrollment begin date), Race/Ethnicity, Eligibility type, and Gender. There was no bias observed for the above-mentioned variables among the non-responder population except for age at enrollment, where the children ages 0 to 12 months were 5% more when compared to the responder population.

Texas ECI continuously worked with local contractors to remind families to complete their survey with the expectation of reducing any potential non-

responder bias. Additionally, during the mid-point of the survey distribution period, the state updated local contractors with the midpoint survey return rate percentage to help contractors to encourage families to return their survey. Texas' participation in the Equity in Family Outcomes TA workgroup is focused on identifying any nonresponse bias, improving our overall survey response rate, and enhancing engagement with a broad cross-section of families receiving Part C services.

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

Texas ECI determined the representativeness of the respondent population when compared to the state profile (enrolled) by using the statistical analysis chi-square test and verified the results using the representativeness calculator from ECTA.

The following variables were used in the analysis to determine the representativeness of the demographics of infants, toddlers, and families who are enrolled in Texas ECI:

For Age at Enrollment- The respondents were grouped into three categories- age 0 (0-12 months), age 1 (13-24 months), and age 2 (25-36 months). Of the respondents, the highest group of responders were from age 0, followed by age 1. The lowest percentage of respondents were from the age 2 group, which was lower by 13% when compared to age 2 of the state demographic profile. The age 0 group were overrepresentative and age 2 group were underrepresentative of the enrolled population.

For Gender- Among the respondents, the male respondents were higher than the female respondents. The female respondents were 1% more than the state profile and the male respondents were 1% less than the state profile. Hence, gender was representative of the enrolled population.

For Race- Among the respondents, Hispanic respondents were the highest followed by the Whites. The Hispanic group was 2% higher than the state's enrolled Hispanic population and the Whites and American Indians were 1% higher than the state profile. The African American and the Asian respondent families were 1% lower than the state profile. All race/ethnicity were representative of the enrolled population except for African American population.

For language- Among the respondents, the families who returned the English survey were higher than the respondents who returned the Spanish survey. Respondents who returned an English language survey were 1% lower than the state profile of enrolled children and the respondents who took the survey in Spanish are 1% higher than the state profile of enrolled children. The respondent families who reported languages such as Arabic, Chinese, French, Portuguese, Sign Language, and Other languages were representative of the state profile of enrolled children. All languages of the respondent group were representative of the enrolled population.

For Eligibility Type- Among the respondent families, 72% were eligible based on Developmental Delay (DD), 25% were Medical Diagnosis (MD), and 3% were respondents who had a hearing/vision impairment. MD respondents were 10% higher than the state's enrolled profile while the respondents with DD were 9% lower than the state's profile. There was an overrepresentation of the respondents who are MD and an underrepresentation of the respondents who are DD.

In conclusion, while comparing the respondent group to the enrolled population, variables such as gender, race, and language were representative.

In conclusion, while comparing the respondent group to the enrolled population, variables such as gender, race, and language were representative with no significant discrepancy between the respondent population and the state demographic profile.

However, the eligibility type and age groups of the respondent group were not representative of the enrolled population. Texas Part C had representativeness in 3 out of the 5 variables discussed here and will continue to work towards improving representativeness for eligibility type and age group which had a significant discrepancy between the state demographic profile and the respondent population.

Some of the specific steps we are taking to improve our survey response rate and the representativeness of the responses include:

- Reaching out to families who did not return their survey last year to understand the barriers from their end.
- Creating an infographic that we have embedded into the beginning of our Family Outcomes survey to help let families know why the survey is important and that they are being heard.
- Coordinating with Texas Parent 2 Parent, a parent organization for parents of children with disabilities in Texas, to have their staff on standby to help families complete the survey should they need that assistance.
- Educating staff who deliver the surveys to families to make sure those local points of contact have a strong understanding of the survey process and why gathering this feedback is so important so that they can pass that message on effectively to all families.
- Pulling data and notifying the local programs of their response rate part way through the survey window.
- Incorporating information about best practices identified at the local level into our Family Outcomes Survey kick-off webinar from programs that are getting good representation and response rates.

Texas ECI will continue to focus on improving the return rate of the surveys through this multi-faceted approach of coaching the programs for continuous monitoring and distribution of the surveys, educating parents about the importance of completing the family outcomes survey, and data driven quality improvements.

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

The metric that Texas ECI used to examine representativeness was by comparing the target group (survey sample) and the respondent group which was chosen by the strategic random sampling on the following demographic variables: eligibility type, race/ethnicity, language, geographic region, age at enrollment, and gender on the basis of +/- 3% discrepancy.

The target group and the respondent group were compared to understand the representativeness. For most variables, the percentage of the respondent group was the same as the target group. However, for the variable eligibility type, the respondent group was 3% lower for developmental delay when compared to the target group. For the variable language, English, Spanish, Chinese, Arabic, French, Portuguese, and Spanish were representative of the respondent group as well except for Vietnamese where there was 1% discrepancy in the respondent group when compared to the target group. For geographic distribution, the target group was from 225 counties out of the 254 Texas counties. Children from the remaining 29 counties didn't qualify for the target group as they were either enrolled for less than 6 months or were missing a county name in the TKIDS database. The respondent group was from 191 counties, which is 13% less than the target group. Further, of the 34 counties that were not in the respondent group, 8 counties were not in the non-respondent group as well, that is, children from these 8 counties didn't receive the survey due to children exiting the program, moved within or out of state, illness, etc.

Through the in-depth data analyses, Texas ECI was able to determine the representativeness of variables in the respondent group compared to the

target group (survey sample) in 5 out of the 6 variables. The variable geographic distribution at the county level showed discrepancy in the respondent group and this could be due to the low response rates of some local contractors who had a low response rate compared to the statewide response rate. Texas ECI will aim towards increasing the response rate of those contractors who currently have a low response rate, which may help in improving the representativeness of the variable "geographic location".

Texas ECI continues to focus on improving the return rate of the surveys through a multi-faceted approach of coaching the programs for continuous monitoring and distribution of the surveys, educating parents about the importance of completing the family outcomes survey, and data driven quality improvements.

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

#### **4 - Prior FFY Required Actions**

None

#### **4 - OSEP Response**

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State reported that the data for this indicator were collected from a response group that was representative of the population. However, in its narrative, the State reported, "However, the eligibility type and age groups of the respondent group were not representative of the enrolled population. Texas Part C had representativeness in 3 out of the 5 variables discussed here and will continue to work towards improving representativeness for eligibility type and age group which had a significant discrepancy between the state demographic profile and the respondent population." Therefore, OSEP is unclear whether the response group was representative of the population. OSEP notes that the State did not include strategies or improvement activities to address this issue in the future.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

#### **4 - Required Actions**

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

## Indicator 5: Child Find (Birth to One)

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	0.82%

FFY	2015	2016	2017	2018	2019
Target >=	0.99%	0.99%	0.99%	0.99%	1.00%
Data	0.94%	1.05%	1.01%	1.09%	1.16%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	1.02%	1.02%	1.02%	1.03%	1.03%	1.03%

### Targets: Description of Stakeholder Input

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers birth to 1 with IFSPs	4,598
Annual State Resident Population Estimates for 6 Race Groups (5	07/08/2021	Population of infants and toddlers birth to 1	377,019

Source	Date	Description	Data
Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020			

**FFY 2020 SPP/APR Data**

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
4,598	377,019	1.16%	1.02%	1.22%	Met target	No Slippage

Provide additional information about this indicator (optional)

**5 - Prior FFY Required Actions**

None

**5 - OSEP Response**

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**5 - Required Actions**

## Indicator 6: Child Find (Birth to Three)

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs.

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

## 6 - Indicator Data

Baseline Year	Baseline Data
2005	1.93%

FFY	2015	2016	2017	2018	2019
Target >=	1.99%	2.00%	2.01%	2.01%	2.02%
Data	2.04%	2.11%	2.14%	2.34%	2.52%

#### Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	2.10%	2.10%	2.10%	2.11%	2.11%	2.11%

#### Targets: Description of Stakeholder Input

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

#### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/08/2021	Number of infants and toddlers birth to 3 with IFSPs	27,020
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020	07/08/2021	Population of infants and toddlers birth to 3	1,149,545

**FFY 2020 SPP/APR Data**

<b>Number of infants and toddlers birth to 3 with IFSPs</b>	<b>Population of infants and toddlers birth to 3</b>	<b>FFY 2019 Data</b>	<b>FFY 2020 Target</b>	<b>FFY 2020 Data</b>	<b>Status</b>	<b>Slippage</b>
27,020	1,149,545	2.52%	2.10%	2.35%	Met target	No Slippage

Provide additional information about this indicator (optional).

**6 - Prior FFY Required Actions**

None

**6 - OSEP Response**

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**6 - Required Actions**



## Indicator 7: 45-Day Timeline

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 7 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	98.93%	98.44%	98.72%	98.79%	99.09%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

### FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
7,319	7,920	99.09%	100%	99.97%	Did not meet target	No Slippage

### Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.

599

Provide reasons for delay, if applicable.

Exceptional family circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances; other exceptional circumstances such as natural disasters or extreme weather-related conditions; staff shortage; staff illness, scheduling difficulties; and unclear documentation are reasons for the delay.

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

State database

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

This data reflects all children with initial IFSPs who were evaluated and assessed during the three-month period of time from Sep 1, 2020 through Nov 30, 2020 (first quarter of SFY 2021).

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

All ECI local programs entered all required IFSP data for eligible infants and toddlers into the TKIDS database. Because the data from this period reflects stable enrollment trends, it is considered representative of the entire year's data and the full reporting period.

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

We reviewed a total of 7,920 records of children entered in the TKIDS database. All were referred to ECI from Sep 1, 2020 through Nov 30, 2020, and of those, 7,918 received an evaluation/assessment and initial IFSP meeting within 45 days of referral to ECI, including delays in the meeting due to family circumstances.

Actual Data FFY 2020:

A. Total records reviewed with a referral/evaluation/assessment and initial IFSP meeting in the first quarter of the state fiscal year: 7,920

B. Infants or toddlers with an evaluation/assessment and initial IFSP within 45 days of referral: 7,319

C. Infants or toddlers with an evaluation/assessment and initial IFSP after the 45 days of referral because of exceptional circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances and other exceptional circumstances such as natural disasters or extreme weather-related conditions as documented in the child's record: 599

D. Infants or toddlers with an evaluation/assessment and initial IFSP late due to other circumstances such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 2

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
15	15	0	0

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

In compliance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements for the 45-day timeline (i.e., an initial evaluation, initial assessment, and an initial IFSP meeting conducted for eligible children). ECI provides a list of the potentially noncompliant cases to each ECI contractor and gives them the opportunity to review the data for accuracy and provide additional evidence that demonstrates compliance. Once the data is confirmed, ECI identifies cases that are, in fact, non-compliant. ECI issues findings based on the non-compliant cases. ECI identified 15 programs that were noncompliant. After this, performance specialists reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI program to verify that the 15 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all non-compliance related to each case.

Through this process, Texas Part C confirmed 100% correction of the cases in the 15 programs. The corrections were verified based on either onsite record review or verification of all non-compliant cases in the TKIDS database for IFSPs that were developed within one year from the identification of the finding.

**Correction of System Findings**

ECI ensures correction of a system finding of all non-compliant cases by pulling data from subsequent time periods. System findings are cleared when the data indicates zero non-compliant cases for each program and the expectation is for each case to be cleared within one year of the issuance of the finding.

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

In compliance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements for the 45-day timeline (i.e., an initial evaluation, initial assessment and an initial IFSP meeting conducted for eligible children), for each individual case.

**Correction of Individual Child Findings**

ECI ensures the correction of individual child findings by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child is no longer in the jurisdiction of the ECI program.

**Process to Address Continued Noncompliance.**

If an ECI contractor is unable to clear a child and/or system finding within one year of the issuance of the finding and demonstrates continued noncompliance with a lack of significant improvement, ECI may take remedial additional action, up to and including contract termination. This also negatively impacts the ECI contractor's annual determination

For this reporting period, all programs had every case corrected for all non-compliance at individual and systems level and hence no program was identified for continued non-compliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

### 7 - Prior FFY Required Actions

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

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

#### Response to actions required in FFY 2019 SPP/APR

### 7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2020 - June 30, 2021). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

### 7 - Required Actions

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

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

## Indicator 8A: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	97.39%	95.24%	96.37%	98.54%	98.42%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

**FFY 2020 SPP/APR Data**

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3,745	3,993	98.42%	100%	96.89%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

There is a 3% increase in the exited children who could not be contacted and 2% increase in the exited children due to withdrawal by family. Additionally, the total number of eligible children for transition steps and services decreased by 9.8% from the previous year. COVID-19 could have impacted the transition steps, which could have led to the decrease in the timely transition steps and services for eligible enrolled children.

**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.

124

**Provide reasons for delay, if applicable.**

Exceptional family circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances; other exceptional circumstances such as natural disasters or extreme weather-related conditions; staff shortage; staff illness; scheduling difficulties; and unclear documentation are all reasons for delay.

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

State database

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

Data were collected in the first quarter of the state fiscal year (Sep 1, 2020 through Nov 30, 2020).

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

The data reflects all toddlers with IFSPs with transition steps and services between Sep 1, 2020, and Nov 30, 2020 (the first quarter of the state fiscal year 2021). Because the data from this period reflects stable enrollment trends, it is considered representative of the entire year's data and the full reporting period.

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

Total number of records reviewed for children exiting Part C: 3,993

Number of children exiting Part C who have an IFSP with transition steps and services: 3,745

Number of documented delays attributable to exceptional family circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances and other exceptional circumstances such as natural disasters or extreme weather-related conditions as documented in the child's record: 124

Infants or toddlers with late transition steps due to other circumstances such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 41

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
28	28	0	0

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

In compliance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements. ECI provides a list of the potentially noncompliant cases to each ECI contractor and gives them the opportunity to review the data for accuracy and provide additional evidence that demonstrates compliance. Once the data is confirmed, ECI identifies cases that are, in fact, noncompliant. ECI issues findings based on the noncompliant cases. ECI identified 28 programs that were noncompliant. After this, performance specialists reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI program to verify that the 28 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all non-compliance related to each case.

Through this process, Texas Part C confirmed 100% correction of the cases in the 28 programs. The corrections were verified based on either onsite record review or verification of all noncompliant cases in the TKIDS database for IFSPs that were developed within one year from the identification of the finding.

**Correction of System Findings**

ECI ensures correction of a system finding of all non-compliant cases by pulling data from subsequent time periods. System findings are cleared when the data indicates zero noncompliant cases for each program and the expectation is for each case to be cleared within one year of the issuance of the finding.

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

In accordance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements, for each individual case.

**Correction of Individual Child Findings**

ECI ensures correction of individual child findings by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child is no longer in the jurisdiction of the ECI program.

**Process to Address Continued Noncompliance.**

If an ECI contractor is unable to clear a child and/or system finding within one year of the issuance of the finding and demonstrates continued noncompliance with a lack of significant improvement, ECI may take remedial additional action, up to and including contract termination. This also negatively impacts the ECI contractor's annual determination

For this reporting period, all programs had every case corrected for all non-compliance at individual and systems level and hence no program was identified for continued non-compliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**8A - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2019 SPP/APR**

**8A - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2020 - June 30, 2021). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

**8A - Required Actions**

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

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

## Indicator 8B: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	92.94%	91.25%	94.32%	96.12%	96.20%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

**FFY 2020 SPP/APR Data**

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3,120	3,993	96.20%	100%	91.39%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

There is a 3% increase in the exited children who could not be contacted and 2% increase in the exited children due to withdrawal by family. The total number of eligible children for transition steps and services decreased by 9.8% from the previous year. Also, of the exited children, there was a 3% decrease in children whose Part B eligibility was not determined. And, of the children who were determined to be potentially eligible for Part B, COVID-19 could have impacted the transition process due to school closures, school staff working from home, and lower staff levels or staff turnover at the ECI contractor level, which could have contributed to the decrease in the percentage of children who were potentially eligible for Part B preschool services.

**Number of parents who opted out**

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

579

**Provide reasons for delay, if applicable.**

Exceptional family circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances; other exceptional circumstances such as natural disasters or extreme weather-related conditions; staff shortage; staff illness; scheduling difficulties, and unclear documentation are all reasons for delay.

**Describe the method used to collect these data.**

All ECI programs are required to notify the local educational agency (LEA) if a child enrolled in ECI services is potentially eligible for preschool services. The data reflects all toddlers with IFSPs who are potentially eligible for Part B special education services and whose notification was provided between September 1, 2020 and November 30, 2020 (the first quarter of the state fiscal year). Because the data from this period reflects stable enrollment trends, it is considered representative of the entire year's data and the full reporting period. The actual data excludes those families who exercised their right to opt-out of the notification to Part B.

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

YES

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

YES

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

State database

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

The actual target data included all children who exited ECI and turned three years of age between September 1, 2020 and November 30, 2020 (the first quarter of state fiscal year).

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

The data reflects all toddlers who were potentially eligible for Part B and the notification to Part B was provided between September 1, 2020 and November 30, 2020 (the first quarter of the state fiscal year 2021). Because the data from this period reflects stable enrollment trends, it is considered representative of the entire year's data and the full reporting period.

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

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: 3,120

Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B: 3,993

Number of parents who opted out: 579

Number of documented delays attributable to exceptional family circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances and other exceptional circumstances such as natural disasters or extreme weather-related conditions as documented in the child's record: 181

Infants or toddlers with late transition steps due to other circumstances such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 214

**Correction of Findings of Noncompliance Identified in FFY 2019**



Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
29	29	0	0

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

In compliance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements. ECI provides a list of the potentially noncompliant cases to each ECI contractor and gives them the opportunity to review the data for accuracy and provide additional evidence that demonstrates compliance. Once the data is confirmed, ECI identifies cases that are, in fact, noncompliant. ECI issues findings based on the noncompliant cases. ECI identified 29 programs that were noncompliant. After this, performance specialists reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI program to verify that the 29 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all non-compliance related to each individual case.

Through this process, Texas Part C confirmed 100% correction of the cases in the 29 programs. The corrections were verified based on either onsite record review or verification of all noncompliant cases in the TKIDS database for IFSPs that were developed within one year from the identification of the finding.

**Correction of System Findings**

ECI ensures correction of a system finding of all non-compliant cases by pulling data from subsequent time periods. System findings are cleared when the data indicates zero noncompliant cases for each program and the expectation is for each case to be cleared within one year of the issuance of the finding.

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

In accordance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements, for each individual case.

**Correction of Individual Child Findings**

ECI ensures correction of individual child findings by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child is no longer in the jurisdiction of the ECI program.

**Process to Address Continued Noncompliance.**

If an ECI contractor is unable to clear a child and/or system finding within one year of the issuance of the finding and demonstrates continued noncompliance with a lack of significant improvement, ECI may take remedial additional action, up to and including contract termination. This also negatively impacts the ECI contractor's annual determination. For this reporting period, all programs had every case corrected for all non-compliance at individual and systems levels and hence no program was identified for continued noncompliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**8B - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2019 SPP/APR**

**8B - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2020 - June 30, 2021). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

**8B - Required Actions**

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

or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Indicator 8C: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8C - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	90.69%	91.65%	92.30%	93.60%	92.33%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

**FFY 2020 SPP/APR Data**

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2,658	3,993	92.33%	100%	90.75%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

There is a 3% increase in the exited children who could not be contacted and 2% increase in the exited children due to withdrawal by family. The total number of eligible children for transition steps and services decreased by 9.8% from the previous year. Also, of the exited children, there was a 3% decrease in children whose Part B eligibility was not determined. And, of the children who were determined to be potentially eligible for Part B, COVID-19 could have impacted the transition process due to school closures, school staff working from home, unavailability of telehealth in order for Part B staff such as diagnosticians and therapists to determine Part B eligibility and lower staff levels or staff turnovers at the ECI contractor level could have led to the decrease in the percentage of children who were potentially eligible for Part B preschool services.

**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.

816

**Number of documented delays attributable to exceptional family circumstances**

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

225

**Provide reasons for delay, if applicable.**

Exceptional family circumstances such as a child or family illness, hospitalization of the child or another family member, or other family circumstances; other exceptional circumstances such as natural disasters or extreme weather-related conditions; staff shortage; staff illness; scheduling difficulties; and unclear documentation are all reasons for the delay.

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

State database

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

The data reflects all toddlers who were potentially eligible for Part B and the notification to Part B was provided between Sep 1, 2020 and Nov 30, 2020 (the first quarter of the state fiscal year). Because the data from this period reflects stable enrollment trends, it is considered representative of the entire year's data and the full reporting period.

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

The actual target data included all children who exited ECI and turned three years of age between Sep 1, 2020 and Nov 30, 2020 (the first quarter of the state fiscal year 2021).

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

Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B: 3,993  
 Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B: 2,658  
 Number of toddlers for whom the parent did not provide approval for the transition conference: 816  
 Number of documented delays attributable to exceptional family circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances and other exceptional circumstances such as natural disasters or extreme weather-related conditions as documented in the child's record: 225  
 Infants or toddlers with late transition conference due to other circumstances such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 294

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
28	28	0	0

## FFY 2019 Findings of Noncompliance Verified as Corrected

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

In compliance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements. ECI provides a list of the potentially noncompliant cases to each ECI contractor and gives them the opportunity to review the data for accuracy and provide additional evidence that demonstrates compliance. Once the data is confirmed, ECI identifies cases that are, in fact, noncompliant. ECI issues findings based on the noncompliant cases. ECI identified 28 programs that were noncompliant. After this, performance specialists reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI program to verify that the 28 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all non-compliance related to each individual case.

Through this process, Texas Part C confirmed 100% correction of the cases in the 28 programs. The corrections were verified based on either onsite record review or verification of all noncompliant cases in the TKIDS database for IFSPs that were developed within one year from the identification of the finding.

#### Correction of System Findings

ECI ensures correction of a system finding of all non-compliant cases by pulling data from subsequent time periods. System findings are cleared when the data indicates zero noncompliant cases for each program and the expectation is for each case to be cleared within one year of the issuance of the finding.

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

In accordance with OSEP Memo 09-02, ECI examines data from TKIDS at least one time per year to determine noncompliance with the requirements, for each individual case.

#### Correction of Individual Child Findings

ECI ensures correction of individual child findings by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child is no longer in the jurisdiction of the ECI program.

#### Process to Address Continued Noncompliance.

If an ECI contractor is unable to clear a child and/or system finding within one year of the issuance of the finding and demonstrates continued noncompliance with a lack of significant improvement, ECI may take remedial additional action, up to and including contract termination. This also negatively impacts the ECI contractor's annual determination

For this reporting period, all programs had every case corrected for all non-compliance at individual and systems level and hence no program was identified for continued non-compliance.

### Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

## 8C - Prior FFY Required Actions

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

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

### Response to actions required in FFY 2019 SPP/APR

## 8C - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2020 - June 30, 2021). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 8C - Required Actions

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

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

## Indicator 9: Resolution Sessions

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

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

## 9 - Indicator Data

### Not Applicable

**Select yes if this indicator is not applicable.**

NO

**Select yes to use target ranges.**

Target Range not used

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

NO

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1 Number of resolution sessions	0
SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1(a) Number resolution sessions resolved through settlement agreements	0

### Targets: Description of Stakeholder Input

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

### Historical Data

Baseline Year	Baseline Data

FFY	2015	2016	2017	2018	2019
Target>=					
Data					

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target>=						

**FFY 2020 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	0				N/A	N/A

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

Texas ECI is not required to establish baseline or targets since the number of resolution sessions is less than 10. There are no dispute resolutions that happened for this reporting period.

**9 - Prior FFY Required Actions**

None

**9 - OSEP Response**

The State reported fewer than ten resolution sessions held in FFY 2020. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

The State indicated "No" to this indicator being not applicable and reported, "Texas ECI is not required to establish baseline or targets since the number of resolution sessions is less than 10. There are no dispute resolutions that happened for this reporting period." However this indicator is only applicable if Part B due process procedures under section 615 of the IDEA are adopted. Additionally, on its IDEA dispute resolution survey, the State reports it has adopted Part C due process procedures under section 639 of the IDEA, and therefore this indicator would not be applicable.

**9 - Required Actions**

The State must clarify whether it has adopted Part C due process procedures under section 639 of the IDEA, or Part B due process procedures under section 615 of the IDEA, and ensure consistency between the IDEA dispute resolution survey response and reporting in this indicator in the FFY 2021 SPP/APR.



## Indicator 10: Mediation

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

## 10 - Indicator Data

### Select yes to use target ranges

Target Range not used

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

NO

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	0
SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	0
SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	0

### Targets: Description of Stakeholder Input

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

### Historical Data

Baseline Year	Baseline Data
2005	

FFY	2015	2016	2017	2018	2019
Target>=					
Data	100.00%		0.00%		

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target>=						

**FFY 2020 SPP/APR Data**

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	0	0				N/A	N/A

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

Texas ECI is not required to establish baseline or targets since the number of mediations is less than 10. There are no mediation requests that happened for this reporting period.

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

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

**10 - Required Actions**

# Indicator 11: State Systemic Improvement Plan

## Instructions and Measurement

**Monitoring Priority:** General Supervision

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

### Measurement

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

### Instructions

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

**Targets:** In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

**Updated Data:** In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

### Overview of the Three Phases of the SSIP

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

#### Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

### Specific Content of Each Phase of the SSIP

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

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

#### Phase III: Implementation and Evaluation

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

##### A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

##### B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., April 1, 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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

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

### C. Stakeholder Engagement

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

#### Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 11 - Indicator Data

### Section A: Data Analysis

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

Texas Part C, also referred to as Texas Early Childhood Intervention (Texas ECI), chose to focus its SSIP on supporting positive social-emotional development in infants and toddlers receiving Texas ECI services, particularly through the implementation of the coaching evidence-based practice. Social-emotional development focuses on relationships, including those between the caregiver and child, as well as with other caregivers and service providers. The goal of coaching is for the child's primary caregiver(s) to increase competence and confidence, with the support of a coach, in blending existing and new skills, knowledge and experiences to interact with the child in daily situations and natural environments and assess ways in which results may continue to be improved. Through coaching the caregiver to become skilled and confident in implementing beneficial interventions with their child during daily routines and in their natural environments, it is anticipated that the child will improve their social-emotional development and skills.

To measure progress for our SSIP, we look at Indicator 3a summary statement 1.

As part of its SPP/APR processes, Texas ECI established a new baseline and targets for APR Indicator 3a for FFYs 2020 through 2025. The new baseline and projections consider the recent decrease in Texas ECI's FFY 2018 and 2019 Indicator 3a summary statement 1 performance and reflect a more modest increase year over year moving forward. Texas ECI revised the baseline to be 69.50 percent based on the performance from previous years. Texas ECI aims to increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills by .02 percent at the end of FFY 2025. The new Indicator 3a summary statement 1 targets are as follows:

FFY 2020`	2021	2022	2023	2024	2025
Target	69.51	69.51	69.51	69.52	69.52

The previous baseline data for this Indicator was from FFY 2013, which was based on data from years FFY 2009-FFY 2012, including data from the pilot phase of implementing child outcomes reporting across the state for the years FFY 2009 and FFY 2010. While training was provided on assigning child outcomes ratings at the local level during implementation, Texas is still building on inter-rater and intra-rater reliability of the child outcomes ratings.

As the years have progressed, Texas has observed a consistent downward trend for summary statement 2 and fluctuations in recent years with summary statement 1. Texas attributes this decrease over time to the following reasons:

- Routine coaching through webinars, online training modules, and technical assistance
- Implementation of the State Systemic Improvement Plan
- Data quality monitoring

We believe the above steps and procedures have led to less positive but more accurate ratings and represent an improvement in the data quality of the child outcomes ratings. Due to the improved data quality, revisions to the baseline and targets are needed to assign realistic and achievable performance targets.

The recommended baseline and targets were discussed with stakeholders at a December 2021 meeting and with the ECI Advisory Committee (which serves as the State Interagency Coordinating Council) at their January 26, 2022 meeting, and both groups supported the proposed changes. More details are provided in the Stakeholder Engagement section below.

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

NO

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

NO

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

NO

#### Please provide a link to the current theory of action.

N/A - a public-facing link to the theory of action is not available

#### Progress toward the SiMR

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

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

NO

#### Historical Data

Baseline Year	Baseline Data
2019	69.50%

#### Targets

FFY	2020	2021	2022	2023	2024	2025
Target>=	69.51%	69.51%	69.51%	69.52%	69.52%	69.52%

#### FFY 2020 SPP/APR Data

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)	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 (a+b+c+d)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
11,542	17,365	69.50%	69.51%	66.47%	Did not meet target	Slippage

#### Provide reasons for slippage, if applicable

Texas ECI continues to focus its efforts on improving the quality of the data that is used for its SiMR outcome. The program relies on management reports that show whether data are collected and reported as required. Contractors have access to six reports that contain data on global child outcomes and are completed as required at entry and exit. These reports also provide detailed aggregate reports that display actual results for missing global child outcomes entry and exit data, which are run on a quarterly basis. Contractors are given a discrete amount of time to input missing data and ensure its completeness.

The Texas ECI Quality Assurance (QA) team reviews the accuracy of the entry and exit outcome ratings on a routine basis. Technical assistance and online training modules, which focus on how to assign realistic, accurate ratings for children in the Texas ECI program compared to their same-age peers, are accessible to contractors. A new comprehensive webinar and training session was released by the QA team in September 2020 to provide further guidance on how to assimilate and make connections between the information gathered during referral, intake, evaluation and the IFSP processes. The webinar delivers support to service providers on how to use that information to accurately document functioning and coding for each of the child's daily routines and assign global child outcomes ratings that align with the information and codes in the IFSP, as well as information in the rest of the child's record.

In the past, when Texas ECI provided other targeted trainings on how to more accurately determine global child outcomes, Texas ECI noticed similar dips in its SiMR. While the recent training and technical assistance cannot be isolated as the sole influence on the slippage seen in the SiMR, it is possible that it may have resulted in more accurate but less positive social-emotional outcome ratings.

In addition to improvements in the accuracy of Texas ECI providers' global child outcomes ratings, decreases in the rate of positive social-emotional development during this reporting year were also likely impacted by the COVID-19 pandemic, which left many families isolated and unable to fully participate in family activities, programs, school, outings, etc.

#### Provide the data source for the FFY 2020 data.

All 41 Texas ECI contractors enter the required child outcomes data for eligible infants and toddlers into the TKIDS database for the full reporting period of FFY 2020 (Sep 1, 2020 through Aug 31, 2021).

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

The child's team assigns ratings based on information gathered throughout the evaluation and needs assessment process. The Battelle Developmental Inventory or Developmental Assessment for Young Children is used to determine eligibility for children who don't have a qualifying diagnosis. The child's extent of delay on the BDI or DAYC is only one factor in assigning ratings. Another factor in determining ratings is the clinical assessment by team members. In some cases, the team may use an additional instrument to look more closely at specific developmental concerns, or the team may choose to assess these concerns without a specific protocol. Finally, the ECI team has a discussion with the parents about the child's functional strengths and needs within the context of daily routines and activities. The team uses all of these processes (BDI or DAYC when appropriate, clinical assessment, family discussion about functioning in routines) to arrive at the Global Child Outcomes ratings.

The child outcomes ratings are entered into the database called Texas Kids Intervention System (TKIDS). Children who were enrolled and stayed in the program for a minimum of 180 days and who received an entry and exit rating had categories "a" through "e" assigned. The summary statement 1 was calculated using the categories "c" and "d" as the numerator and "a" through "d" as the denominator. This resulted in a total of 11,542 children who received a "c" or "d" category and 17,365 children who received categories "a,b,c," or "d," which resulted in 69.50 percent.

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

YES

#### Describe any additional data collected by the State to assess progress toward the SiMR.

Texas has examined Indicator 4 data over the past few years for additional support in assessing SiMR progress. This data helps Texas ECI understand if actions implemented related to Coherent Improvement Strategies (CIS) 1 (enhance professional development to ensure providers are able to identify social-emotional concerns and use the identified evidence-based practice, the coaching framework, consistently and with fidelity when providing ECI services) and 2 (increase families' knowledge about their role in supporting their children's development, including their social-emotional development) are positively influencing the social-emotional development of infants and toddlers receiving Texas ECI services through increased parent and caregiver engagement in applying beneficial skill-building strategies in daily routines.

Since FFY 2016, when Texas ECI began to examine Family Outcomes Survey (FOS) results in support of its SiMR, Texas ECI observed positive improvement over the years. Thus, Texas ECI has surmised that CIS 1 and 2 activities have generally had a positive impact on family outcomes. Of the 13 FOS questions that Texas ECI examines in support of the SiMR, it found only one question where the FFY 2020 outcome was 0.1 percent lower than the FFY 2016 baseline. (In FFY 2020, 95.5% percent of surveyed parents indicated that they were able to tell that their child was making progress, whereas 95.6% of surveyed parents indicated this was so in FFY 2016.) However, for all other relevant questions, FFY 2020 family outcomes meet or exceed FFY 2016 baselines.

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

YES

**Describe any data quality issues, unrelated to COVID-19, specific to the SiMR data and include actions taken to address data quality concerns.**

Texas ECI has identified historical concerns with its contractors' global child outcomes ratings and has continued to provide ongoing support, training and technical assistance to its contractors to promote accuracy for entry and exit ratings since FFY 2019. While efforts have resulted in improved data completeness, the percentage of the global child outcomes ratings continue to show a downward trend.

If previous social-emotional development outcomes were artificially high because of contractors' levels of understanding and training on the global child outcomes ratings process, it is possible that Texas ECI set its SiMR targets too high and thus saw a decrease in its targeted outcome as contractors increased their knowledge and improved their rating skills.

The Texas ECI QA team continues to reinforce the message with contractors that global child outcomes ratings are intended to look at a child's skill in relation to same-age peers, versus a child's skill change or improvement over time. As accuracy in global child outcomes ratings continues to improve, it is possible to see a further decrease in the number of children who are substantially improving their ratings in social-emotional development between entry and exit. This does not mean that Texas ECI services are not having a positive impact on children's social-emotional skills, but rather that the increases seen may be moderated since a child's outcomes ratings have become more accurate and relative to same-age peers.

Therefore, Texas ECI did revise its SiMR baseline and targets for FFY 2020 through 2025. Texas ECI set its revised baseline at 69.50 with a targeted increase of 0.02 percent at the end of five years. These targets were set considering the purported impact of the global child outcomes ratings trainings.

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

YES

**If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.**

Texas ECI's SiMR data for this reporting period was impacted by COVID-19. COVID-19 impacted the number of children who exited from the Texas ECI program during the reporting period. There was an eight percent decrease in exits when compared to the percentage of children who exited in FFY 2019. The decline in exits may have been due to challenges faced in delivering services during this reporting period. Of the children who exited, there was a two percent decrease in the number of children who had completed Individualized Family Service Plans (IFSPs), when compared to FFY 2018 (prior to COVID-19). There was also a five percent increase in the number of families who could not be contacted when compared to FFY 2018 (prior to COVID-19).

The hybrid service delivery model (in-person and telehealth) was adopted in FFY 2019 and continued through this reporting period. The number of contractors who adopted this model increased in FFY 2020 by seven percent when compared to FFY 2019. Texas ECI provided contractors with guidance on how to complete global child outcomes ratings virtually. While this transition was nimble for most of Texas ECI's contractors, this may have impacted this SiMR indicator.

## **Section B: Implementation, Analysis and Evaluation**

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

NO

**Describe how the data support the decision not to make revisions to the evaluation plan. Please provide a link to the State's current evaluation plan.**

Texas ECI was not able to conduct a thorough analysis of the SSIP evaluation plan and the need for potential changes to it this year. Some Texas ECI contractors were not able to prioritize conducting coaching fidelity observations of their service providers due to the pandemic, as they instead prioritized making necessary adjustments to ensure the children and families in their program received the services they needed. Therefore, Texas ECI will need to evaluate the coaching data and the full evaluation plan more closely in the coming year to determine if revisions are needed.

A public-facing link to the State's current evaluation plan is not available.

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

During this reporting period, Texas ECI continued several infrastructure improvement strategies to support CIS #1. This included maintaining its technical assistance relationship with the National Center on Children in Poverty (NCCP) and Georgetown University consultants to help Texas ECI further identify goals and resources to support infant and early childhood mental health (IECMH) needs.

In support of CIS #2, Texas ECI continues to promote the use of the Learn the Signs, Act Early! (LTSAE) materials available from the Centers for Disease Control and Prevention (CDC), including the CDC Milestone Tracker app. Texas ECI also continued to participate in the SNAP-Ed program,

which included 10 Texas ECI contractors who provided family-focused nutrition and active lifestyle education to Texas ECI children and families. These activities added relationship and skill-building opportunities for the child through nutrition and family activity routines in the child's natural environment.

In support of CIS #3 (increase primary referral sources, families and early childhood partners' knowledge that ECI's approach to services is based within the context of parent-child relationship and results in strengthening parents' capacity to support their children's social-emotional growth and impact all development), Texas ECI continues significant ongoing outreach to partners and stakeholders through conferences, presentations and meetings; orientation and engagement of the newly appointed 24-member Texas ECI Advisory Committee; use of the OSEP's optional Child Find Self-Assessment; and the development and updating of the following web pages: Information for Families (<https://www.hhs.texas.gov/services/disability/early-childhood-intervention-services/information-families>), Information for Health and Medical Professionals (<https://www.hhs.texas.gov/services/disability/early-childhood-intervention-services/eci-information-health-medical-professionals>), Stakeholders and Partners (<https://www.hhs.texas.gov/services/disability/early-childhood-intervention-services/eci-stakeholders-partners>) and the newly launched Texas ECI's Coaching Approach (<https://www.hhs.texas.gov/services/disability/early-childhood-intervention-services/ecis-coaching-approach>).

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

The partnership between Texas ECI, NCCP, and Georgetown University addresses multiple areas of systems framework for Texas ECI, which include professional development and technical assistance for ECI personnel, governance, and finance. Through this collaborative, plans are being developed for the coordination of an IECMH training system for Texas ECI contractors with tiered steps including foundational training through the development of consultation expertise; strengthening the Texas ECI and the Department of Family and Protective Services (DFPS) memorandum of understanding to ensure Child Abuse Prevention and Treatment Act (CAPTA) referrals include appropriate social-emotional development information and assessment; and exploring cross-system and braided funding opportunities to develop the cadre of IECMH consultants available to Texas ECI programs. In collaboration with NCCP and other members of the group, a survey was developed and distributed to Texas ECI contractors to gauge contractors' knowledge of IECMH consultants, IECMH supports, and training needs. The survey was distributed to programs on December 8, 2021, and once the survey results are fully analyzed, the IECMH group will reconvene to identify needs moving forward. These efforts are expected to enhance efforts to achieve and sustain our progress in supporting Texas children's social-emotional development.

A second area where Texas ECI continued to develop infrastructure for CIS #1 was through the delivery of targeted desk reviews for all contracted Texas ECI programs related to coaching documentation. This infrastructure improvement strategy relates to data and the accountability and monitoring areas of a systems framework as it allows Texas ECI to monitor child outcomes, documentation, and service delivery for contractors across the state. Additionally, the data collected from these desk reviews is assessed and trends are determined to identify areas of improvement, which lead to the development of trainings and resources, all which support Texas ECI in achieving its SiMR. The process for targeted desk reviews involves the Texas ECI QA team choosing a sample of files and reviewing how contractors have been capturing the components of coaching implementation in their progress notes. Through these reviews, the QA team was able to identify trends, areas for improvement, and areas for additional training and support relative to specific coaching components and documentation of those components. This information is then added to a report that is provided to each program. The QA team also offers ongoing support to programs in delivering quality services while incorporating coaching in service delivery. Several Texas ECI contractors have requested and participated in meetings with QA to further enhance their understanding of best practices in coaching documentation.

Texas ECI successfully coordinated three of the Zero to Three, The Growing Brain Training-of-Trainers in FFY 2020 to further support professional development across all 41 Texas ECI contractors and service providers. These trainings directly support the SiMR as increased understanding of brain development in children 0-3 years of age will allow ECI service providers the ability to develop more meaningful goals, outcomes, and strategies to the children and families they serve. Each Texas ECI contractor assigned two people to complete the training, which was funded by the Episcopal Health Foundation and Navigate Life Texas, and a total of 94 early intervention personnel completed the training. The design of this training curriculum and certification requires that a person who completes the training deliver at least one Zero to Three, The Growing Brain training, if seeking certification. Texas ECI anticipates that many early intervention personnel and community partners will receive this training and will benefit from the information shared by their program's trainers in the coming year. The Zero to Three training focuses on: understanding of brain structure and function; the impact of trauma, stress and early adverse experiences on the brain; how to protect the brain; connections between the brain, language, development and sensory functioning; the brain's roles in emotional regulation; and the function of positive caregiving relationships in supporting early brain development. The training taught service providers how to integrate and apply early brain development concepts in their daily work with children and families to help parents and caregivers understand their child's social-emotional development and implement interventions beneficial to developing social-emotional skills.

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

YES

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

Texas ECI successfully coordinated three foundational coaching trainings and two master coach trainings during this reporting period to 31 out of 41 contractors so far. These trainings are offered to all Texas ECI contractors at no cost and aim to improve the quality of ECI services as well as support professional development of ECI service providers. The investment in these trainings as well as the development of master coaches will allow Texas ECI to develop more sustainable system improvement efforts as it works to achieve its SiMR. M'Lisa Shelden and Dathan Rush, developers of the evidence-based practice of coaching in early intervention, hosted these trainings and conducted monthly meetings across six months to support master coach candidates in attaining fidelity in this coaching model. These trainings aim to strengthen and fortify service providers' current skills in using the coaching practice and develop the necessary structure to sustain and grow the use of this practice at each program location.

Texas ECI released the webinar series titled Success in Telehealth: Coaching from a Distance in November 2021, which was developed in response to training requests from a survey conducted by the Texas ECI training team. This training was developed to further enhance the skills of ECI service providers as they strive to deliver quality telehealth services. Some of the information found in the training includes how to incorporate all components of coaching during a telehealth session, how to use strategies suitable for telehealth service delivery, and how to address potential challenges encountered in a telehealth session. The webinar, which is a two-part series, includes videos of actual telehealth sessions submitted by Texas ECI contractors that demonstrate the strategies and techniques presented. The training is available to all contractors and their staff and on the Texas ECI Training and Technical Assistance webpage.

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

Regarding CIS #1, to enhance professional development to identify social-emotional concerns and implement coaching with fidelity, Texas ECI will continue to offer foundational coaching and master coach trainings to all 41 contracted Texas ECI programs across Texas. A total of six foundational coaching trainings and four master coach trainings will be offered through September 2022. An additional three foundational coaching trainings and one two-part master coach training will be added to the training series and are expected to be completed by August 2023. Texas ECI will use funding received through the American Rescue Plan Act to cover the cost of the additional trainings in order to continue to support all 41 contracted Texas ECI programs. Texas ECI anticipates over 1,600 early intervention service providers will be trained in foundational coaching and over 150 service providers will be trained as master coaches at the end of this training series. Training delivered directly by Shelden and Rush will significantly strengthen the understanding of the coaching model and will provide Texas ECI contractors and their service providers with the tools and resources needed to achieve true fidelity in this model.

In support of CIS #2, Texas ECI will leverage resources from a recently awarded discretionary grant from OSEP related to personnel retention. One component of this grant is the development of the Professionalism, Engagement, Empowerment, and Resource (PEER) Network, a community of practice for Early Intervention Specialists (EISs) and Service Coordinators (SCs). The PEER Network will focus on ensuring EISs and SCs have the adequate expectations, knowledge, tools, understanding of boundaries, and team supports to deliver case management and specialized skills training to provide the foundation for every child and their family's success in the Texas ECI program.

In support of CIS #3, Texas ECI will continue to engage in a variety of outreach and public awareness activities regarding Texas ECI and its approach to services, including the promotion of newly developed webpages that can help families and referral sources understand what to expect during the coaching process and the benefits of coaching parents and caregivers. To further support consistent statewide outreach, Texas ECI has established Child Find Forums, bringing representatives from Texas ECI contractors to share best practices and collaborate on ways to improve Child Find efforts in their area.

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

Coaching in early intervention

**Provide a summary of each evidence-based practice.**

The evidence-based practice of coaching in early intervention as designed, developed and researched by M'Lisa Shelden and Dathan Rush, supports early intervention service providers with the coaching skills necessary to help caregivers develop their abilities to interact with their child in ways that support the child's development and learning. The goal of coaching is for the child's primary caregiver(s) to increase competence and confidence, with the support of a coach, in blending existing and new skills, knowledge and experiences to interact with the child in daily situations and natural environments and assess ways in which results may be improved. Rather than implementing an intervention for the caregiver with the child, early interventionists use coaching and education to support the caregiver in implementing the intervention directly.

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

During the month of May in FFY 2018, Texas ECI began the statewide rollout of the coaching practice with all ECI contractors. One-on-one support and technical assistance from the Texas ECI data team, Quality Assurance team, and Project Manager was provided to programs to ensure the tool was completed correctly. Feedback from contractors was also gathered during quarterly meetings between Texas ECI and program directors which led to Texas ECI developing new guidance for this tool to further clarify program expectations and data entry. Texas ECI was also recently awarded American Rescue Plan Act funds in FFY20, which it will use a portion of to support coaching implementation through the addition of three Shelden and Rush foundational coaching trainings and one two-part master coach training in 2023. The expansion of these trainings will allow even more ECI personnel access to this high-quality instruction on what coaching families really looks like and how to do that with fidelity, and the training of more master coaches throughout the state will support the sustainability of these practice changes at the local programs.

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

While Texas ECI has analyzed the data provided for this reporting period of statewide coaching implementation, it does not feel that it can draw practice change comparisons between previous reporting years. This is due to the significant difference in sample sizes between the number of coaching fidelity observations completed in year 1 and year 2. Moreover, some observations were completed via telehealth while others were completed in person, making it difficult to compare both within and across contractors.

Despite COVID-19, Texas ECI had 98 percent of contractors complete the coaching fidelity tool. Texas ECI utilized previous years' coaching data to implement Shelden and Rush's coaching in early intervention evidence-based practice that started in May 2021. Texas ECI modified its coaching data collection tool to include the tracking of service providers who complete the Shelden and Rush coaching in early intervention training.

Texas ECI was able to identify the following in the analysis of this year's reporting period by using the coaching implementation data:

- 459 out of the 612 service providers who received an observation, or 75 percent, met fidelity during the first observation in this reporting period. Of the 459 service providers, 426 service providers only needed one observation and either met or exceeded the fidelity threshold. Thirty three out of 459 service providers had a second observation where they met or exceeded the fidelity threshold.
- Eighteen out of 41 contractors had all their service providers achieve 100 percent fidelity during this reporting period.
- Nine out of 41 contractors had 70 percent to 100 percent of their service providers achieve fidelity during this reporting period. Thirteen contractors were found to be below 70 percent.
- 40 out of 41, or 98 percent, of contractors conducted observations for service providers during this reporting period.
- Of the 162 service providers that did not reach coaching fidelity at their first coaching observation during this reporting period, 37 service providers, or 23 percent, received their required second observation within six months.

Based on the data analysis, Texas ECI noticed that staff shortages, primarily due to COVID-19, greatly impacted some Texas ECI contractors from administering observations to their service providers as their priority was to ensure all children and families in their program received the services they needed. Additionally, some contractors also reported delaying observations until in-person services resumed due to the COVID-19 pandemic. Texas ECI will continue to focus on the delivery of the coaching fidelity model and will assist local contractors on an ongoing basis to increase the number of coaching fidelity observations for the next reporting period.



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

The ECI QA team conducted several targeted desk reviews that focused on service delivery documentation with an emphasis on coaching, which identified several areas where service providers could use additional support. ECI will work to address these areas through the development of targeted technical assistance, trainings, and resources that specifically target areas identified during the desk reviews.

Additionally, ECI received qualitative feedback from stakeholders during the December stakeholder meeting that supported the continued focus on and need for additional training supports around coaching. This included the need for more training and support for ECI service providers working with children diagnosed with autism as well as those exhibiting behaviors that are commonly associated with autism. Concurrent documentation while coaching was another area ECI stakeholders expressed the need for further training on for service providers. Finally, ECI stakeholders raised the need for additional education and training on how to implement the coaching model while delivering ECI services to children in childcare centers. One of the issues discussed during the stakeholder meeting for this particular concern was that there is often multiple staff caring for the ECI child at the childcare center and it is not always clear which staff the ECI service provider should be working with to ensure the strategies provided are being carried out daily to meet the identified goals of the child.

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

Texas ECI plans to continue to offer foundational and master coach training to all 41 contractors through 2023. Based on feedback collected from stakeholders related to needs for more instruction related to concurrent documentation while coaching and challenges with coaching in the child care setting, Texas ECI will be looking to pull together resources and expand on the coaching training being offered to ECI personnel to address these specific needs.

Also based on stakeholder feedback that more training is needed related to autism behaviors and coaching those families so they can best work with their children to meet their unique needs, Texas ECI will also be looking into additional resources, training and information to support ECI personnel as they work with parents and caregivers of children who have been diagnosed with autism. These resources will be used, as appropriate, to help support the coaching of families with children who have autism.

Additionally, Texas ECI will continue to focus efforts on telehealth service delivery as many contractors are still offering this option to families and Texas ECI anticipates that telehealth services will continue even after the COVID-19 pandemic. Expected outcomes from these efforts include an increase in knowledge, understanding, and implementation of the coaching model by service providers across Texas for Texas ECI service delivery in-person or via telehealth.

**Describe any changes to the activities, strategies, or timelines described in the previous submission and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.**

As previously mentioned, about 75 percent of ECI service providers met the fidelity threshold for coaching for this reporting period. ECI would like to see an increase in this data in the coming years as additional coaching trainings are offered and the ECI team continues to support its 41 contractors across the state.

Based on the information collected from the ECI QA desk reviews as well as the feedback received from ECI stakeholders, ECI believes there is a need to continue to support and train ECI service providers with coaching implementation. ECI will continue the coaching trainings for all 41 contractors' service providers through 2023 and will continue to develop or expand trainings and resources to target areas that service providers struggle with to further improve the implementation of coaching across the state.

ECI also continues to receive feedback from contractors requesting additional support with the delivery of telehealth services. Given that the delivery of telehealth services to ECI families was a new form of service delivery for many contractors at the start of the COVID-19 pandemic and will likely continue throughout the pandemic and beyond, ECI will continue to research telehealth best practices and develop trainings to provide ongoing support to ECI service providers.

The continued focus on coaching and investment in research, trainings, and best practices by ECI is likely to produce more positive results in the social-emotional development of children enrolled in the ECI program and could also improve retention rates among ECI service providers as they will feel more equipped and informed in not only the coaching model but the delivery of services via telehealth or in person.

## **Section C: Stakeholder Engagement**

### **Description of Stakeholder Input**

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group is comprised of a wide range of stakeholders, including a physician, the Health and Human Services chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, Texas Education Agency, a Texas Education for Homeless Children and Youth representative, program directors from local ECI contractors and multiple parents (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECI Advisory Committee, we reached out to additional stakeholders, including parents, teachers, public health caseworkers, Child Protective Services case managers, physicians, audiologists, and many others to share ECI data, targets, and other information that feeds into the APR. From this, a workgroup of stakeholders who expressed an interest in the data and targets within the APR were gathered in December 2021 for a meeting where an overview of the APR, including historical data (over 10 years), was presented. During this meeting, targets were discussed for the next five years and input was sought to ensure targets set were appropriate for the state to ensure ECI services are being offered to all families of children with disabilities; are provided to families in an efficient, effective, and timely manner; and meet both state and federal expectations. As part of the discussion related to improvement strategies already ongoing in the state, it was decided that the originally suggested targets for both Indicators 5 and 6 could be further adjusted. Based on this stakeholder input, we increased the target for these two indicators by .01 percent for 2023-2025 and presented this proposal to the Advisory Committee during their January 26, 2022 meeting. Public testimony provided at the committee meeting, as well as a letter submitted by stakeholders in advance of the meeting, requested consideration for further increasing these targets. In response to this

stakeholder input, Texas decided to further increase its targets for Indicators 5 and 6. Texas is now proposing to increase its Indicator 5 target from its original proposal by .02 percent for 2020-2022 and by .03 percent for 2023-2025 and to increase its Indicator 6 target from its original proposal by .09 percent for 2020-2022 and by .10 percent for 2023-2025.

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

In Phases I and II, a broad stakeholder group was engaged in data analysis and planning, including selection of Texas' SSIP SiMR, areas to target for infrastructure improvements, development of coherent improvement strategies, and choice of evidence-based practice.

During the previous two years of SSIP Phase III implementation, Texas ECI's approach to stakeholder engagement had been to engage program directors and supervisors responsible for oversight of coaching implementation. While some of this engagement occurred through training on coaching and other SSIP-related presentations, updates at program director's consortium meetings and monthly CEO calls, a great deal of stakeholder involvement has occurred through individual programs' requests for technical assistance over the past year. In general, programs have reached out to Texas ECI's Project Manager or Texas ECI Quality Assurance staff with specific questions about how to move forward with coaching practice implementation and strengthen specific coaching components.

Then, in Fall 2021, Texas ECI conducted a survey of diverse stakeholders inquiring both about their familiarity with the SSIP and coaching, as well as their interest in engaging with the SSIP work going forward. In this survey, 65% of the responders indicated they were familiar with the SSIP; however, less than 25% were familiar with coaching. Many of the stakeholders are new in their agency or organization, which stands to reason that their familiarity would be less than those who have been working with ECI over time; however, this does confirm the need to increase the education of coaching and how it is used in the ECI service delivery model among stakeholders and families.

Based on the responses of this survey, those interested stakeholders were invited to a meeting held in a virtual setting to facilitate the greatest participation. Information about all indicators that make up the APR, including those that feed into the SSIP, was provided as well as other helpful information to ensure all stakeholders had a clear understanding of the data and information shared. Stakeholders were engaged, providing feedback and answering questions, during this meeting. A good portion of the discussion focused on the impact of the current pandemic on families and their children, particularly within the social-emotional arena. While ECI programs in Texas have been able to continue services, the change in method from in-person to telehealth for some services, along with other factors keeping families from having an active lifestyle outside of the home, has certainly heightened social-emotional delays for some children. This discussion, along with feedback shared from stakeholders in the school districts that indicate they sometimes see more directing than coaching, contributed to the agreement that Texas ECI should continue to focus on social-emotional development and coaching as part of the SSIP.

These same stakeholders were asked to complete a survey to identify any increase in knowledge, unasked questions, additional feedback and desire to continue collaborating as a stakeholder with the Texas ECI team in the coming year. From the results of that survey we found that several stakeholders learned something new about the data and SSIP, while others were already familiar but still found the information and the way it was presented both organized and helpful in the work they do and how they interact with families receiving ECI services in Texas. More than 50% of these stakeholders have shared a desire to have regular meetings, at least quarterly, to learn more about the data, process and how coaching is being used in the delivery of ECI services.

In the next few months, Texas ECI would like to have program directors and supervisors participate in a multilevel analysis of the implementation of coaching, including where service providers need more support and guidance, what clarifications are needed on the coaching rollout protocol and so on. Texas ECI would then like to reconvene its larger workgroup, including external stakeholders, to discuss the implementation of the coaching practice to date, how to best incorporate information on concurrent documentation and working with autism behaviors in the training for EI personnel, and steps needed to continue to build the infrastructure for the sustainability of the coaching practice.

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

NO

**Additional Implementation Activities**

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

All new planned implementation activities have been described above.

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

N/A

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

NA

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

N/A

**11 - Prior FFY Required Actions**

None

**11 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

OSEP notes that the State provided the Theory of Action and Evaluation Plan as attachments, however did not provide links to the Theory of Action or Evaluation Plan within the reporting platform.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

The State did not provide verification that the attachment(s) it included in its FFY 2020 SPP/APR submission is/are in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508.

## **11 - Required Actions**

The State must provide working links to the Theory of Action and Evaluation Plan within the reporting platform in the FFY 2021 SPP/APR.

OSEP notes that one or more of the Indicator 11 attachment(s) included in the State's FFY 2020 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

## **Certification**

### **Instructions**

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

### **Certify**

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

### **Select the certifier's role**

Lead Agency Director

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

### **Name:**

Dana McGrath

### **Title:**

Director of Early Childhood Intervention

### **Email:**

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### **Phone:**

512-438-2898

### **Submitted on:**

04/26/22 3:43:57 PM

## ED Attachments



TX-C-Dispute-Resolution-2020-21.pdf



tx-c-resultsmatrix-2022.pdf



TX-2022DataRubricPartC.xlsx