STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2021

Texas

PART C DUE
February 1, 2023

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 (ECI) Part C system within the Family Health 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) 2021 Annual Performance Report (APR) for the Texas ECI Part C system. Target setting for the APR occurred on December 4, 2021, in collaboration with stakeholders. To ensure those stakeholders were kept informed throughout the year, an email including data, details, and a new infographic related to the Family Outcomes Survey (Indicator 4), and other key information, was shared with stakeholders on July 18, 2022. This email also included a reminder regarding the ECI Advisory Committee/State Interagency Coordinating Council (SICC), which includes updates on quarterly data as a standing agenda item. The ECI Advisory Committee/SICC meetings are held quarterly and in an open meeting format for both in-person and virtual attendance.

Additionally, an email was sent on January 18, 2023, reminding and encouraging stakeholders to participate in the ECI Advisory Committee meeting held on January 25, 2023, where information and APR data were reviewed and presented for public input. During this meeting, stakeholders and the advisory committee received an overview of the APR data and updates on projects, such as the State Systemic Improvement Plan (SSIP), the Family Outcomes Survey and the Child Find Self-Assessment project completed in Texas to evaluate the child find efforts. There were no questions or comments from the stakeholders or members of the Advisory Committee.

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 one internal report listing average delivered hours per program for use by the ECI state office.

A team of ECI performance specialists monitors contracted agency performance on contract terms and conditions, including 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. The team verifies the accuracy of data reports and provides evaluation of functions that are not covered by data analysis. Depending on the annual risk assessment conducted each fall, performance management activities may include desk reviews of provider data, policies, and consumer records, on-site visits, or other activities determined necessary. A separate team of highly qualified experts also conducts systematic, ongoing, on-site monitoring of contractor compliance with financial rules and regulations and generally accepted accounting practices. Both teams identify areas of non-compliance and ensure necessary corrective actions are implemented.

ECI also conducts quality assurance reviews based on a separate, qualitative risk assessment. ECI quality assurance therapists and quality assurance specialists with clinical and analytical expertise focus primarily on providing technical assistance and recommendations for best practices on activities such as eligibility determination, Individual Family Services Plan (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 a written report.

Complaints are received through the ECI family liaison or through the HHSC 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, evidence-based technical assistance and support to early intervention service (EIS) programs.

The technical assistance system includes support 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, as well as at the request of the contractor.

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.

ECI 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. ECI 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 ECI 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. ECI 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 ECI library materials, and training packages that include materials and activities for contractor staff to complete individually or as a group. ECI 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 ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

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 ECI Advisory Committee and others, are invited to participate in the Advisory Committee meeting and were invited to stakeholder meetings previously held to establish targets. They are also included in regular updates on the data and offered opportunities to ask questions and provide input through email and during the public comment period for advisory committee meetings.
Parents are also engaged in other activities that focused on developing strategies for improving ECI services and evaluating progress. Some of these opportunities included: participating in panel presentations to increase knowledge of ECI 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 ECI personnel are qualified and retained to address the impact of staff turnover on families, reviewing publications and other materials to increase knowledge of both ECI and other early childhood programs, and participating on the team evaluating the family outcomes survey and developing ways to increase responsiveness.

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 HHSC ECI 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 and other stakeholders to identify strengths and gaps in child find, coordinating support and inclusion of a representative from Texas Parent 2 Parent in the technical assistance project that focused on increasing responsiveness 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.

Soliciting Public Input:

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

Public input is 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. All meeting notices with the date, time and location are posted both in the Texas Register and on the HHSC website, 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.

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 website within three days of the meeting.

Reporting to the Public:

How and where the State reported to the public on the FFY 2020 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 2020 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 2020 APR in 2022, 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

None

Intro - OSEP Response

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

Intro - Required Actions

Intro - State Attachments

Revised FFY21 SSIP
Evaluation Plan-acce

Revised Texas SSIP
Theory of Action-Ac

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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	82.70%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	95.61%	95.88%	95.76%	96.01%	96.04%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
9,250	11,093	96.04%	100%	95.42%	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.

1,335

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).

Texas defines "timely" as the percentage of children with IFSPs who received planned services 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 March 1, 2022 through May 31, 2022   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 March 1, 2022 through May 31, 2022 (the third quarter of the state fiscal year 2022). 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's 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 2021 include
 1. Total children reviewed from all ECI programs: 11,093
 2. Children with IFSPs receiving early intervention services in a timely manner (begin on or before 28 days with the parent's consent): 9,250
 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: 1,335
4. Children with IFSPs not receiving timely services delivery for other reasons such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 508

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 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 non-compliant cases. ECI identified 32 programs that were non-compliant. 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 the 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.

Correction of System Findings
ECI ensures the 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 28-day timeline (i.e., an initial evaluation, initial assessment, and an initial IFSP meeting conducted for eligible children), for each individual case. Once the data is confirmed, ECI identifies cases that are, in fact, non-compliant. ECI issues findings based on non-compliant cases. ECI identified 32 programs that were non-compliant. 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 Individual Child Findings
ECI ensures the correction of individual child findings using the above-mentioned processes by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child was 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 2020

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

1 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each 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.

Response to actions required in FFY 2020 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, 2021- June 30, 2022). 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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 (E*MAPS*)).

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	2016	2017	2018	2019	2020
Target>=	99.00%	99.00%	99.00%	99.20%	99.20%
Data	99.29%	99.26%	99.28%	99.06%	99.77%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	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 comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	29,497
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	29,625

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
29,497	29,625	99.77%	99.20%	99.57%	Met target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication); and

C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/communication); and

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of infants and toddlers who did not improve functioning = [(# 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 comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2019	Target>=	71.40%	71.60%	71.80%	71.72%	69.51%
A1	69.50%	Data	72.30%	72.28%	71.74%	69.50%	66.47%
A2	2019	Target>=	54.10%	54.30%	54.40%	53.69%	46.30%
A2	46.29%	Data	52.40%	48.71%	49.33%	46.29%	44.87%
B1	2019	Target>=	77.30%	77.40%	77.50%	78.22%	77.11%
B1	77.10%	Data	78.55%	78.42%	78.19%	77.10%	72.98%
B2	2019	Target>=	45.20%	45.30%	45.40%	45.02%	35.31%
B2	35.30%	Data	42.23%	39.27%	38.01%	35.30%	33.26%
C1	2019	Target>=	77.60%	77.70%	77.80%	79.52%	77.47%
C1	77.46%	Data	80.43%	80.35%	79.53%	77.46%	75.36%
C2	2019	Target>=	51.65%	51.70%	51.80%	51.41%	44.14%
C2	44.13%	Data	49.88%	47.79%	47.42%	44.13%	40.90%

Targets

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

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

22,184

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	59	0.27%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	6,645	29.95%

Outcome A Progress Category	Number of children	Percentage of Total
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	5,913	26.65%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	6,625	29.86%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2,942	13.26%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	12,538	19,242	66.47%	69.51%	65.16%	Did not meet target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	9,567	22,184	44.87%	46.30%	43.13%	Did not meet target	Slippage

Provide reasons for A1 slippage, if applicable

Texas Part C did not meet the target for A1. . Looking at the data trends at a statewide level for the past five years, category "c" showed a 3% increase, and category "d" showed a 14% decrease from FFY2018 to FFY2021.

For outcome A1, we noticed that "category b" showed a 26% increase from FFY2018 to FFY2021, and a 33% increase for "category a," while all other categories showed a decline for the same time.

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 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 "a," "d," and "e" when compared to FFY 2020.

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 A1 and A2.

Provide reasons for A2 slippage, if applicable

Texas Part C did not meet the target for this indicator. Looking at data trends at a statewide level for the past five years, we noticed that "category b" showed a 26% increase from FFY2018 to FFY2021 and a 33% increase for "category a," while all other categories showed a decline for the same time.

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 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 "a," "d," and "e" when compared to FFY 2020.

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 A1 and A2 .

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	43	0.19%

Outcome B Progress Category	Number of Children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	5,752	25.93%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	9,097	41.01%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	6,484	29.23%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	808	3.64%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	15,581	21,376	72.98%	77.11%	72.89%	Did not meet target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	7,292	22,184	33.26%	35.31%	32.87%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	52	0.23%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	5,533	24.94%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	7,663	34.54%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	7,948	35.83%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	988	4.45%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	15,611	21,196	75.36%	77.47%	73.65%	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	8,936	22,184	40.90%	44.14%	40.28%	Did not meet target	No Slippage

Provide reasons for C1 slippage, if applicable

Texas Part C did not meet the target for this indicator. Looking at data trends at a statewide level for the past five federal fiscal years, there was a 3% increase in "category c" and a 15% decrease in category d.

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 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 "a," "c," and "d," when compared to FFY 2020.

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 statement C1.

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	22,184
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.	9,350

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 Global Child Outcome (GCO) ratings based on multiple sources, which include information gathered throughout the evaluation and needs assessment process. When determining a child's eligibility based on developmental delay, teams may choose to use one of the following standardized tools: the Battelle Developmental Inventory-2nd edition (BDI-2), the Developmental Assessment of Young Children-2nd edition (DAYC-2), and most recently the Battelle Developmental Inventory-3rd edition (BDI-3). In addition, teams may choose to move to Qualitative Determination of Delay (QDD) and use a supplemental tool, the Hawaii Early Learning Profile (HELP), when a child's evaluation results as measured using a standardized tool do not accurately reflect the child's development or ability to functional in the natural environment. The team must use multiple sources of information when assigning ratings which may include: observations, clinical assessments, parent report, and discussions about the child's functional abilities during daily routines, including strengths and needs, as gathered during development of the Individualized Family Service Plan.

Provide additional information about this indicator (optional).

Though there are fluctuations within each outcome of this Indicator, Texas Part C's performance on this Indicator for outcomes A1, B1, and C1 of this indicator either is on par with or surpassed the national average. For outcomes A2, B2, and C2 Texas' performance is lower than the national average. COVID-19 impacted delivered service hours, thereby child outcomes, which could have led to these fluctuations.

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

    A. Know their rights;

    B. Effectively communicate their children's needs; and

    C. Help their children develop and learn.

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

Data Source

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

Measurement

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

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

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

Instructions

*Sampling of **families participating in Part C** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See Genera<u>l Instructions</u> 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	2016	2017	2018	2019	2020
A	2013	Target>=	87.00%	87.00%	87.00%	87.00%	87.01%
A	86.57%	Data	88.84%	87.91%	86.58%	85.08%	86.33%
B	2013	Target>=	87.70%	87.70%	88.00%	88.00%	88.01%
B	###C04BBA SEDATA###	Data	90.18%	88.75%	88.16%	88.05%	88.82%
C	2013	Target>=	87.80%	87.80%	88.00%	88.00%	88.01%

C	87.79%	Data	88.59%	89.98%	88.94%	88.16%	88.32%

Targets

FFY	2021	2022	2023	2024	2025
Target A>=	87.01%	87.01%	87.02%	87.02%	87.02%
Target B>=	88.01%	88.01%	88.02%	88.02%	88.02%
Target C>=	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 comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	6,221
Number of respondent families participating in Part C	2,690
Survey Response Rate	43.24%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	2,307
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	2,676
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	2,378
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	2,675
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	2,366
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	2,676

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 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)	86.33%	87.01%	86.21%	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)	88.82%	88.01%	88.90%	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)	88.32%	88.01%	88.42%	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 FFY21. 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 June 1, 2022, 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 inputs the Family Outcomes Survey-Revised (FOS-R) into a website. The survey period was a six-week period in June and July 2022. 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. To ensure confidentiality completed survey responses were only accessible to the state office to ensure confidentiality.

A total of 7,737 families were randomly selected to respond to the survey; 1,516 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 6,221 families received it; 2,690 returned the survey. This resulted in a response rate 43% 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	2020	2021
Survey Response Rate	46.49%	43.24%

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 43% response rate for FFY 2021 and a 46% response rate for FFY 2020. Though we saw a 3% decrease in the return rate percentage, Texas maintained the performance in measures 4A, B, and C with no identified slippage in all these three measures. Additionally, Texas ECI is focusing on multiple strategies for continuous improvement, as discussed below.

Texas ECI will continue working with local contractors with a high survey return rate to understand their processes at the program level and share relevant insights with other local contractors who need substantial improvement in their response rate.

Texas ECI focuses on extensive data analysis 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 participated in a technical assistance project with Early Childhood Technical Assistance Center (ECTA) and is working toward 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 dashboards for each contractor showing their performance on key metrics/outcomes by income, language, and race/ethnicity. Additionally, we are planning to provide the survey in eight additional languages to promote representativeness and to increase the return 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 in FFY2020   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 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, local contractor, and 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 43%, Texas had 46% of the contractors (19 out of 41 contractors) below the statewide return rate and 54% of the contractors above the statewide return rate (22 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 the date of birth and enrollment begin date), race/ethnicity, eligibility type, and gender.

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 representativeness calculator from ECTA.

For race/ethnicity, there was a 3% differential (White=+2%, Hispanic= +3%, Black= -3%) than the Texas ECI's enrollment profile. Asian, American Pacific Islanders did not show any fluctuation.

For enrollment- age 2-3 years were overrepresented by 7%, age 1-2 years was overrepresented by 5%, and age <1 year was underrepresented by 2%.

For gender- there is no differential for both the males and the females respectively when the respondent population was compared to the state profile.

For language- Among the respondents, the number of families who returned the English survey was higher than the respondents who returned the Spanish survey. However, the respondents who answered the English survey (87%) and those who answered the Spanish survey (13%) were representative of the state demographic profile. All languages of the respondent group were representative of the enrolled population.

For Eligibility Type- Among the respondent families, 79% were eligible based on Developmental Delay (DD), 19% were Medical Diagnosis (MD), and 2% were respondents who had a hearing/vision impairment. All eligibility types of the respondent group were representative of the enrolled population.

In conclusion, while comparing the respondent group to the enrolled population, variables such as gender, language, and eligibility type were representative. However, race/ethnicity and age at enrollment were not representative of the enrolled 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 possible 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.

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).

Texas ECI chose to use a +/-3% discrepancy in proportion to responders and those that were surveyed on the following variables: gender, language, and eligibility type. Respondents were representative in all areas. In the future, 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.

Provide additional information about this indicator (optional).

4 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

4 - OSEP Response

OSEP's response to the State's initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover regarding the submission.

The State reported that the response data for this indicator were collected from a response group that was representative of the population. However, in its narrative, the State reported "For enrollment- age 2-3 years were overrepresented by 7%, age 1-2 years was overrepresented by 5%, and age <1 year was underrepresented by 2%...In conclusion, while comparing the respondent group to the enrolled population, variables such as gender, language, and eligibility type were representative. However, race/ethnicity and age at enrollment were not representative of the enrolled population." Therefore, OSEP is unclear whether the response group was representative of the population.

4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 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 E*DFacts* Metadata and Process System (E*MAPS*)) 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	2016	2017	2018	2019	2020
Target >=	0.99%	0.99%	0.99%	1.00%	1.02%
Data	1.05%	1.01%	1.09%	1.16%	1.22%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	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 comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	4,479
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, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	360,323

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
4,479	360,323	1.22%	1.02%	1.24%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

(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 (E*MAPS*)) 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	2016	2017	2018	2019	2020
Target >=	2.00%	2.01%	2.01%	2.02%	2.10%
Data	2.11%	2.14%	2.34%	2.52%	2.35%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	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 comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	29,625
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, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 3	1,113,391

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
29,625	1,113,391	2.35%	2.10%	2.66%	Met target	No Slippage

Provide additional information about this indicator (optional).

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	98.44%	98.72%	98.79%	99.09%	99.97%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
8,200	9,979	99.97%	100%	97.33%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

Texas Part C performance in this indicator is within the 10% fluctuation from the target. There were 2.6% of children reported in exceptional circumstances due to staff reasons (such as shortages or turnover) or scheduling difficulties in FFY 2021 when compared to 0.02% in FFY 2020, which contributed to the overall decrease in the percentage of children receiving timely services. Texas Part C is closely monitoring the performance of local contractors on a routine basis to provide assistance as needed.

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.

1,513

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.

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 from March 1, 2022, through May 31, 2022 (third quarter of SFY 2022).

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 9,979 records of children entered into the TKIDS database. All were referred to ECI from March 1, 2022, through May 31, 2022, and of those, 8,200 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 March 1, 2022, through May 31, 2022:

 A. Total records reviewed with a referral/evaluation/assessment and initial IFSP meeting in the first quarter of the state fiscal year: 9,979

 B. Infants or toddlers with an evaluation/assessment and initial IFSP within 45 days of referral: 8,200

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: 1,513

D. Infants or toddlers with an evaluation/assessment and initial IFSP late due to other circumstances such as staff shortage, staff illness, or scheduling difficulties: 266

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	2	0	0

FFY 2020 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 non-compliant cases. ECI identified 2 programs that were non-compliant. 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 2 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 2 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 the 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. 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 non-compliant cases. ECI identified 2 programs that were non-compliant. 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 2 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all non-compliance related to each case.

Correction of Individual Child Findings
ECI ensures the correction of individual child findings using the above-mentioned process by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child was 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 2020

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

7 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each 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.

Response to actions required in FFY 2020 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, 2021- June 30, 2022). 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	95.24%	96.37%	98.54%	98.42%	96.89%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
4,022	4,226	96.89%	100%	97.18%	Did not meet target	No Slippage

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

85

Provide reasons for delay, if applicable.

Reasons for the delay include exceptional family circumstances such as child or family illness, hospitalization of the child or another family member, or other family circumstances.

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 third quarter of the state fiscal year (March 1, 2022, through May 31, 2022).

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 March 1, 2022, and May 31, 2022 (the third 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: 4,226
Number of children exiting Part C who have an IFSP with transition steps and services: 4037
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: 85
Infants or toddlers with late transition steps due to other circumstances such as staff shortage, staff illness, scheduling difficulties, or unclear documentation: 104

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
24	24	0	0

FFY 2020 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 identify any noncompliance with 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, non-compliant. ECI issues findings based on non-compliant cases. ECI identified 24 programs that were non-compliant. After this, performance specialists reviewed data for each noncompliant case from subsequent time periods through data monitoring for each ECI program to verify that the 24 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all noncompliance related to each case.

Through this process, Texas Part C confirmed 100% correction of the cases in the 24 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 the 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 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. Once the data is confirmed, ECI identifies cases that are, in fact, non-compliant. ECI issues findings based on non-compliant cases. ECI identified 24 programs that were non-compliant. After this, performance specialists reviewed data for each noncompliant case from

subsequent time periods through data monitoring for each ECI program to verify that the 24 ECI programs correctly implemented the specified regulatory requirements, and each program corrected all noncompliance related to each case.

Correction of Individual Child Findings
ECI ensures correction of individual child findings using the above mentioned process by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child was 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 additional remedial action, up to and including contract termination. This also negatively impacts the ECI contractor's annual determination. For this reporting period, all programs had all findings of noncompliance corrected at the individual and systems levels, thus no program was identified for continued noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

8A - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each 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.

Response to actions required in FFY 2020 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, 2021- June 30, 2022). 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	91.25%	94.32%	96.12%	96.20%	91.39%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
3,344	4,226	91.39%	100%	91.74%	Did not meet target	No Slippage

Number of parents who opted out

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

581

Provide reasons for delay, if applicable.

Reasons for the delay include 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.

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 due between March 1, 2022, and May 31, 2022 (the third 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 data reflects all toddlers who were potentially eligible for Part B and the notification to Part B was provided between March 1, 2022, and May 31, 2022 (the third quarter of the state fiscal year 2022).

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

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 who were potentially eligible for Part B: 4,226
Of the 4,226, Not potentially eligible for part B = 111
Of the 4,226, Parent opt out= 581
Of the 4226, potentially eligible for Part B= 3,534
Of the 3,534 potentially eligible children for Part B
1)Timely Part B= 3,344
2)Number of documented delays attributable to exceptional family circumstances = 107
3)Program/Miss= 83

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 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 identify any 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 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 the 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 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. 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.

Correction of Individual Child Findings
ECI ensures correction of individual child findings using the above mentioned process by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child was 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 2020

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

8B - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each 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.

Response to actions required in FFY 2020 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, 2021- June 30, 2022).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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	97.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	91.65%	92.30%	93.60%	92.33%	90.75%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,931	4,226	90.75%	100%	92.40%	Did not meet target	No Slippage

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

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

792

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.

242

Provide reasons for delay, if applicable.

Reasons for the delay include 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.

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 March 1, 2022 and May 30, 2022 (the third quarter of the state fiscal year 2022).

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

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 who were potentially eligible for Part B: 4,226
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: 2,931
Number of toddlers for whom the parent did not provide approval for the transition conference: 792
Number of documented delays attributable to exceptional family circumstances such as a 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: 242
Infants or toddlers with late transition conference due to other circumstances such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 261

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 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 identify any 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 32 programs that were noncompliant. After this, performance managers reviewed subsequent data through data monitoring for each ECI program to verify that the 32 ECI programs correctly implemented the specified regulatory requirements. Through this process, Texas Part C confirmed 100% correction of the cases in the 32 programs. After this, performance specialists reviewed data for each noncompliant 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 noncompliance related to each individual 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 noncompliant 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. Once the data is confirmed, ECI identifies cases that are, in fact, noncompliant. ECI issues findings based on the noncompliant cases. ECI identified 32 programs that were noncompliant. After this, performance managers reviewed subsequent data through data monitoring for each ECI program to verify that the 32 ECI programs correctly implemented the specified regulatory requirements. Through this process, Texas Part C confirmed 100% correction of the cases in the 32 programs. After this, performance specialists reviewed data for each noncompliant 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 noncompliance related to each individual case.

Correction of Individual Child Findings
ECI ensures correction of individual child findings using the above mentioned process by verifying the correction within one year of the issuance of the finding. Corrective action was required unless the child was 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 non-compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

8C - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each 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.

Response to actions required in FFY 2020 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, 2021- June 30, 2022). 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

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 (E*MAPS*)).

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below.

Texas Part C SY 2021-22 IDEA Part C Dispute Resolution Survey; Section C has no data to report on for this time period.

9 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

9 - OSEP Response

9 - Required Actions

OSEP notes that this indicator is not applicable.

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 (E*MAPS*)).

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	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 comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data		0.00%			

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 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 2021. 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 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 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 2021 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 2021 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., February 1, 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) 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: 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.

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	69.52

The previous baseline data for this Indicator was from FFY 2013, which was based on data from FFYs 2009–2012, including data from the pilot phase of implementing child outcomes reporting across the state for FFYs 2009 and 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 (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) 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.

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)

YES

Please provide a description of the changes and updates to the theory of action.

Texas ECI updated the layout and graphics to make the Theory of Action easier to read. There are also minor edits to the language.

Please provide a link to the current theory of action.

https://www.hhs.texas.gov/providers/assistive-services-providers/early-childhood-intervention-programs/eci-data-reports

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
12,538	19,242	66.47%	69.51%	65.16%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Texas Part C did not meet the target for A1. Looking at the data trends at a statewide level for the past five years, category "c" showed a 3% increase and category "d" showed a 14% decrease from FFY2018 to FFY2021.

Texas Part C noticed that "category b" showed a 26% increase from FFY2018 to FFY2021, and a 33% increase for "category a," while all other categories showed a decline for the same time.

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 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 "a," "d," and "e" when compared to FFY 2020.

 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 A1 and A2.

Provide the data source for the FFY 2021 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 2021/SFY22 (September 1, 2021 – August 31, 2022).

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

The child's team assigns Global Child Outcome (GCO) ratings based on multiple sources, which include information gathered throughout the evaluation and needs assessment process. When determining a child's eligibility based on developmental delay, teams may choose to use one of the following standardized tools: the Battelle Developmental Inventory-2nd edition (BDI-2), the Developmental Assessment of Young Children-2nd edition (DAYC-2), and most recently the Battelle Developmental Inventory-3rd edition (BDI-3). In addition, teams may choose to move to Qualitative Determination of Delay (QDD) and use a supplemental tool, the Hawaii Early Learning Profile (HELP), when a child's evaluation results as measured using a standardized tool do not accurately reflect the child's development or ability to functional in the natural environment. The team must use multiple sources of information when assigning ratings which may include: observations, clinical assessment, parent reports, and discussions about the child's functional abilities during daily routines, including strengths and needs, as gathered during development of the Individualized Family Service Plan.

The child outcomes ratings are entered into the Texas Kids Intervention System (TKIDS) database. 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 12,538 children who received a "c" or "d" category and 19,242 children who received categories "a," "b," "c," or "d," which resulted in 65.20 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 whether 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. From SFY21 to SFY22, percentages increased for four of the 13 FOS questions that Texas ECI examines in support of the SiMR. Percentages increased for respondents who completely or almost completely:
• (1) Know the next steps for their child's growth and learning: 89.70% to 90.20%
• (4) Are able to tell when their child is making progress: 95.50% to 95.78%
• (11) Are able to help their child get along with others: 91.20% to 91.62%
The percentage also increased for respondents who reported that ECI has been very helpful or extremely helpful in (22) working with their children now (93.00% to 93.09%).

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 improvement 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 revised its SiMR baseline and targets for FFYs 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)

NO

Section B: Implementation, Analysis and Evaluation

Please provide a link to the State's current evaluation plan.

https://www.hhs.texas.gov/providers/assistive-services-providers/early-childhood-intervention-programs/eci-data-reports

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

YES

If yes, provide a description of the changes and updates to the evaluation plan.

The evaluation plan was updated to reflect current activities. The previous version included outcomes for activities that have been completed and reported on in previous years.

If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.

The SSIP Evaluation plan was not updated in last year's submission. The plan was updated to accurately reflect current outcomes and methods of data collection.

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

During this reporting period, Texas ECI continued 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. Texas ECI continued facilitating Foundational Coaching and Master Coach Training with M'Lisa Shelden and Dathan Rush. Shelden & Rush developed the evidence-based practice of coaching in early intervention. In FFY 2021, Texas ECI facilitated four Foundational Coaching Trainings and two Master Coach Trainings. Contractors participating in Master Coach Training also attended monthly Mentor Coaching Groups as part of the training program to help attendees support other coaches in their programs. These trainings are offered to all 41 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 and the development of Master Coaches will allow Texas ECI to develop more sustainable system improvement efforts as it works to achieve its SiMR. 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.

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 eight 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 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)
• 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 gage contractors' knowledge of IECMH consultants, IECMH supports, and training needs. The survey was distributed to programs on December 8, 2021. Based on the results of the survey, an IECMH consultant pilot program is being developed with plans to implement in SFY 2023. 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 is through SFY 2022 QA complete reviews, which include record reviews and onsite observations of service delivery visits. The focus of these reviews is the program's use and documentation of all elements of the evidenced-based coaching approach. Each reviewed program is provided with a complete report outlining strengths and needs. Through the reviews, the QA team can identify areas for improvement and areas for training and support based on the results of the review, leading to improved outcomes for children. In addition, the QA team is available to provide technical assistance and resources relative to specific coaching components and documentation of those components for programs statewide. 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.

Texas ECI facilitated four Foundational Coaching Trainings and two Master Coach Trainings with Shelden & Rush from October 2021 through November 2022. During this time, 655 local ECI personnel from 39 contractors attended Foundational Coaching Training. Eight providers completed the first Master Coach Training program, and 17 providers are participating in the second Master Coach Training program as of January 2023. The second program will be complete in April 2023. Upon completion of the second program, 13 contractors will have a mentor coach. The Master Coach Training participation was lower than anticipated. Many providers dropped out of the program because of the demands of the yearlong program. Texas ECI also experienced some difficulty in enrolling 200 providers for each Foundational Coaching Training. As a result, Texas ECI decided not to continue coaching trainings with Shelden & Rush into SFY2023.

Texas ECI launched a SFY 2023 social media awareness campaign designed to raise awareness of ECI services and when to make a referral, strengthen staff recruitment outreach, and highlight partners and the resources they provide families.

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

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

In June 2022, Texas ECI received one-time American Rescue Plan Act (ARPA) funds from the Texas Workforce Commission (TWC) to support professional development needs of the early childhood workforce. The funding ends on April 30, 2024. This project, referred to as the TWC Project, includes multiples activities that address different comprehensive improvement strategies (CIS), as described below.
•   Onsite/regional childcare center trainings: Participating local ECI providers facilitate trainings with childcare center staff. Trainings focus on the importance of early intervention and evidence-based practices (such as coaching) used in early intervention, the importance of early childhood brain development and information on red flags, and strategies for discussing developmental concerns with parents. This activity addresses CIS #3, because it will help childcare center staff, who are a primary referral source, better understand ECI and ECI's service approach.
•   Infant Mental Health Endorsements (IMHEs) through First3Years: Texas ECI is providing funds to participating ECI contractors to earn infant mental health endorsements to strengthen infant mental health support for the families they serve. Endorsements require approximately 30-50 hours of training and 24-50 hours of reflective supervision, based on the type of endorsement. IMHEs address CIS #1 and CIS #2 because they help providers enhance their ability to identify mental health concerns in infants and learn how to talk to families about their child's development.
•   Development of a new inclusion training – Texas ECI has developed a new training focused on supporting early childhood professionals who create inclusion plans, monitor implementation of those plans, and coach or assist programs who serve children with disabilities for whom these plans are written. ECI contractors will present this training to childcare center staff and TWC workforce board members who create inclusion plans. This training will address CIS #3 by focusing on the benefits on inclusion within ECI's service approach.
Texas ECI is in the early stages of the TWC Project. The childcare center trainings, infant mental health endorsements, and development of the new inclusion training are underway, but the regional conferences and the ASQ trainings won't begin until 2023. The 13 participating ECI contractors providing childcare center trainings through this funding trained 183 early childhood education personnel from 27 licensed childcare centers in the first quarter of the project (mid-June through September). Additional short-term and intermediate outcomes for all activities will be included in the next report.

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

To support CIS #1, Texas ECI will finish the last Master Coach Training program with Shelden & Rush in April 2023. There are 18 providers currently in the program. Upon completion of this program, these providers will have the skills to mentor staff in their program and provide guidance and support as new and existing providers enhance their coaching skills. Texas ECI will not be facilitating any more Foundational Coaching Training or Master Coach

Trainings in 2023 due to low interest and providers dropping out of the Master Coach Training due to the demands. Instead, Texas ECI will use Episcopal Health Foundation Grant funds to purchase The Early Childhood Coaching Handbook, Second Edition written by Shelden & Rush. Texas ECI will provide multiple handbooks to all 41 ECI contractors to help guide current and future ECI providers when learning the evidence-based coaching framework.

To support 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.

To support 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.

For the TWC Project, participating ECI contractors will continue facilitating trainings for childcare centers, including the new inclusion training. Texas ECI expects to average 50 trained centers for each participating ECI contractor by April 2024.

In partnership with the University of Texas at Austin, Texas ECI will host four, one-day conferences in Houston, Dallas, El Paso, and the Austin/San Antonio area. The purpose of the conferences is to develop strong working relationships between ECI personnel and early learning program staff. The conferences will include discussions on the roles and challenges of ECI personnel and early learning program staff when delivering ECI services and a Foundations of Inclusion Training developed by the Division for Early Childhood of the Council for Exceptional Children. Regional conferences will address CIS #3 because they will help childcare center staff and other stakeholders in the early childhood workforce learn more about ECI and ECI's service approach. Texas ECI expects to facilitate all four regional trainings by August 2023, with approximately 400 attendees at each conference.

Ages and Stages Questionnaire (ASQ) Training of Trainers Seminars: Texas ECI is coordinating eight, three-day virtual ASQ Training of Trainers Seminars for 100 ECI personnel and 100 Texas Rising Star mentors. Texas ECI is also purchasing ASQ-3 and ASQ:SE-2 kits for participating ECI contractors to distribute to childcare centers during ASQ trainings and for their own use. This activity will address CIS #1 by helping ECI professionals to better identify social-emotional concerns in infants and toddlers by administering the ASQ:SE-2. The trainings will also address CIS #2 by providing guidance on how to talk to families about their child's results from the ASQ-3 and ASQ:SE-2 and how to discuss their child's needs.
By August 2023, Texas ECI will also help facilitate ASQ Training of Trainers Seminars for 170-200 ECI providers and Texas Rising Star Mentors. Participating ECI providers will continue pursing IMHEs in the next reporting period.

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.
Coaching in early intervention promotes positive social-emotional development in infants and toddlers receiving Texas ECI services by giving ECI providers the skills they need to coach the child's primary caregiver(s) to increase competence and confidence 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. Coaching is intended to have a positive impact on social-emotional development in infants and toddlers receiving Texas ECI services because their caregivers will have the skills and confidence to implement beneficial interventions during daily routine in their natural environments.

Describe the data collected to monitor fidelity of implementation and to assess practice change.
Texas ECI was able to identify the following in the analysis of this year's reporting period by using the coaching implementation data:
•Of the 1,440 service providers who received an observation, 1,407, or 97.7 percent, met coaching fidelity in the first or second observation. Of the 1,407 service providers who met fidelity, 1,393, or 99.0 percent, met the fidelity threshold in the first observation.
• Out of 41 contractors, 27 had 100 percent of their service providers achieve fidelity during this reporting period. This is an increase from the 18 contractors that achieved fidelity among 100 percent of their service providers in FFY 2020.
•Out of 41 contractors, 12 had 70 percent to 99 percent of their service providers achieve fidelity during this reporting period.
• All 41 contractors conducted observations for service providers during this 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.
During SFY 2021, the ECI QA team conducted 31 targeted desk reviews of ECI contractors that focused on documentation and synthesis of information about child functioning to support assigned initial Global Child Outcome (GCO) ratings. As a result, QA provided targeted technical assistance, trainings, and resources that specifically addressed areas identified during the desk reviews.

Additionally, the QA team receives qualitative feedback that supports the continued focus on and need for additional training supports around coaching, including collaborative documentation, joint planning, and how to implement the coaching model while delivering ECI services to children in childcare centers.

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 complete the final Master Coach Training with Shelden & Rush and provide copies of the Shelden & Rush coaching handbook to ECI contractors to guide existing and new ECI providers.

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 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.

In FFY 2021, the QA team developed two training webinars for all ECI providers that focused on coaching during telehealth visits. The webinars provided information to enhance the providers' effectiveness in delivering quality services via telehealth in Texas ECI. The webinars addressed how to incorporate all components of coaching in the telehealth session, use strategies suitable for telehealth service delivery, and address potential obstacles that may be encountered in telehealth. They also included real-life videos of telehealth sessions from some of our Texas ECI programs.

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.

Does the State intend to continue implementing the SSIP without modifications? (yes/no)

NO

If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.

Texas ECI will no longer be using ARPA funds to continue Shelden & Rush trainings. Texas ECI has completed six Foundational Training cohorts and one Master Coach Training cadre. The second Master Coach training cadre will be complete in April 2023. Texas ECI chose not to continue these trainings due to difficulty in filling all the Foundational Training spots and the high dropout rate for Master Coach training. Texas ECI intended for all 41 ECI contractors to have at least one master coach. Of the 32 providers who enrolled in Cadre #1 of Master Coach Training, only eight completed the year-long program. These eight providers represent four contractors. In Cadre #2, there are 18 providers representing nine programs. Texas ECI will purchase Shelden & Rush coaching handbooks in lieu of a Master Coach to provide guidance to new and existing providers.

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 comprises a wide range of stakeholders, including a physician, the Texas Medicaid and CHIP chief medical director, representatives from both the Partners Resource Network and Texas Parent 2 Parent, staff from the Texas Department of Insurance, staff from the Texas Education Agency, staff from the Texas Department of Family and Protective Services, 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, ECI State Office staff 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.

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.

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.

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

Provide additional information about this indicator (optional).

11 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

11 - OSEP Response

11 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

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:

Meghan Young

Title:

Director

Email:

Meghan.Young@hhs.texas.gov

Phone:

5124246754

Submitted on:

04/25/23 2:28:17 PM

RDA Matrix
Texas

2023 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination[1]

Percentage (%)	Determination
81.25%	Meets Requirements

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	8	5	62.50%
Compliance	14	14	100.00%

2023 Part C Results Matrix

I. Data Quality

(a) Data Completeness: The percent of children included in your State's 2021 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e., outcome data)	22,184
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	30,378
Percentage of Children Exiting who are Included in Outcome Data (%)	73.03
Data Completeness Score[2]	2

(b) Data Anomalies: Anomalies in your State's FFY 2021 Outcomes Data

Data Anomalies Score[3]	2

II. Child Performance

(a) Data Comparison: Comparing your State's 2021 Outcomes Data to other States' 2021 Outcomes Data

Data Comparison Score[4]	1

(b) Performance Change Over Time: Comparing your State's FFY 2021 data to your State's FFY 2020 data

Performance Change Score[5]	0

Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2021	65.16%	43.13%	72.89%	32.87%	73.65%	40.28%
FFY 2020	66.47%	44.87%	72.98%	33.26%	75.36%	40.90%

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[1] For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part C."

[2] Please see Appendix A for a detailed description of this calculation.

[3] Please see Appendix B for a detailed description of this calculation.

[4] Please see Appendix C for a detailed description of this calculation.

[5] Please see Appendix D for a detailed description of this calculation.

2023 Part C Compliance Matrix

Part C Compliance Indicator[6]	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 1: Timely service provision	95.42%	YES	2
Indicator 7: 45-day timeline	97.33%	YES	2
Indicator 8A: Timely transition plan	97.18%	YES	2
Indicator 8B: Transition notification	91.74%	YES	2
Indicator 8C: Timely transition conference	92.40%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

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[6] The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf

Appendix A

I. (a) Data Completeness:

The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State's Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State's FFY 2021 IDEA Section 618 Exit Data.

Data Completeness Score	Percent of Part C Children included in Outcomes Data (C3) and 618 Data
0	Lower than 34%
1	34% through 64%
2	65% and above

Appendix B

I. (b) Data Quality:

Anomalies in Your State's FFY 2021 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e[78]. In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State's data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

Outcome A	Positive Social Relationships
Outcome B	Knowledge and Skills
Outcome C	Actions to Meet Needs

Category a	Percent of infants and toddlers who did not improve functioning
Category b	Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers
Category c	Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it
Category d	Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers
Category e	Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers

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[7] Numbers shown as rounded for display purposes.

[8] Values based on data for States with summary statement denominator greater than 199 exiters.

Expected Range of Responses for Each Outcome and Category, FFY 2021

Outcome\Category	Mean	StDev	-1SD	+1SD
Outcome A\Category a	1.43	1.62	-0.19	3.05
Outcome B\Category a	1.26	2.27	-1.01	3.53
Outcome C\Category a	1.14	1.59	-0.45	2.73

Outcome\Category	Mean	StDev	-2SD	+2SD
Outcome A\ Category b	23.62	8.94	5.75	41.49
Outcome A\ Category c	20.32	12.69	-5.05	45.69
Outcome A\ Category d	27.33	9.46	8.42	46.24
Outcome A\ Category e	27.3	15.11	-2.92	57.52
Outcome B\ Category b	25.16	9.76	5.65	44.68
Outcome B\ Category c	28.73	12.11	4.5	52.95
Outcome B\ Category d	31.76	8.06	15.64	47.87
Outcome B\ Category e	13.09	8.56	-4.02	30.21
Outcome C\ Category b	20.27	8.49	3.29	37.26
Outcome C\ Category c	23.01	13.08	-3.16	49.17
Outcome C\ Category d	34.09	8.09	17.9	50.28
Outcome C\ Category e	21.49	15.06	-8.62	51.6

Data Anomalies Score	Total Points Received in All Progress Areas
0	0 through 9 points
1	10 through 12 points
2	13 through 15 points

Anomalies in Your State's Outcomes Data FFY 2021

Number of Infants and Toddlers with IFSP's Assessed in your State	22,184

Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	59	6,645	5,913	6,625	2,942
Performance (%)	0.27%	29.95%	26.65%	29.86%	13.26%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	43	5,752	9,097	6,484	808
Performance (%)	0.19%	25.93%	41.01%	29.23%	3.64%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	52	5,533	7,663	7,948	988
Performance (%)	0.23%	24.94%	34.54%	35.83%	4.45%
Scores	1	1	1	1	1

	Total Score
Outcome A	5
Outcome B	5
Outcome C	5
Outcomes A-C	15

Data Anomalies Score	2

Appendix C

II. (a) Data Comparison:

Comparing Your State's 2021 Outcomes Data to Other States' 2021 Outcome Data

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement[9]. Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

Summary Statement 1: Of those infants and toddlers who entered or exited 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.

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.

Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	43.42%	36.60%	54.62%	29.02%	55.14%	36.15%
90	82.74%	69.30%	79.34%	55.52%	85.72%	76.15%

Data Comparison Score	Total Points Received Across SS1 and SS2
0	0 through 4 points
1	5 through 8 points
2	9 through 12 points

Your State's Summary Statement Performance FFY 2021

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	65.16%	43.13%	72.89%	32.87%	73.65%	40.28%
Points	1	1	1	1	1	1

Total Points Across SS1 and SS2(*)	6

Your State's Data Comparison Score	1

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[9] Values based on data for States with summary statement denominator greater than 199 exiters.

Appendix D

II. (b) Performance Change Over Time:

Comparing your State's FFY 2021 data to your State's FFY 2020 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of p<=.05. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of '0', '1', or '2' for each State is based on the total points awarded. Where OSEP has approved a State's reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of 'N/A' for this element.

Test of Proportional Difference Calculation Overview

The summary statement percentages from the previous year's reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of p<=.05. The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

     e.g., C3A FFY2021% - C3A FFY2020% = Difference in proportions

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on[10]

     Sqrt[([FFY2021% * (1-FFY2021%)] / FFY2021N) + ([FFY2022% * (1-FFY2022%)] / FFY2022N)] = Standard Error of Difference in Proportions

Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.

     Difference in proportions /standard error of the difference in proportions = z score

Step 4: The statistical significance of the z score is located within a table and the *p* value is determined.

Step 5: The difference in proportions is coded as statistically significant if the *p* value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

     0 = statistically significant decrease from FFY 2020 to FFY 2021

     1 = No statistically significant change

     2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

Indicator 3 Overall Performance Change Score	Cut Points for Change Over Time in Summary Statements Total Score
0	Lowest score through 3
1	4 through 7
2	8 through highest

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[10]Numbers shown as rounded for display purposes.

Summary Statement/ Child Outcome	FFY 2020 N	FFY 2020 Summary Statement (%)	FFY 2021 N	FFY 2021 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	17,365	66.47%	19,242	65.16%	-1.31	0.0050	-2.6344	0.0084	YES	0
SS1/Outcome B: Knowledge and Skills	19,496	72.98%	21,376	72.89%	-0.09	0.0044	-0.2138	0.8307	NO	1
SS1/Outcome C: Actions to meet needs	19,240	75.36%	21,196	73.65%	-1.71	0.0043	-3.9383	0.0001	YES	0
SS2/Outcome A: Positive Social Relationships	20,193	44.87%	22,184	43.13%	-1.74	0.0048	-3.6070	0.0003	YES	0
SS2/Outcome B: Knowledge and Skills	20,193	33.26%	22,184	32.87%	-0.39	0.0046	-0.8490	0.3959	NO	1
SS2/Outcome C: Actions to meet needs	20,193	40.90%	22,184	40.28%	-0.61	0.0048	-1.2857	0.1986	NO	1

Total Points Across SS1 and SS2	3

Your State's Performance Change Score	0

Data Rubric
Texas

FFY 2021 APR[11]

	Part C Timely and Accurate Data -- SPP/APR Data	
APR Indicator	**Valid and Reliable**	**Total**
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	N/A	0
10	1	1
11	1	1
	Subtotal	12
APR Score Calculation	**Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	17

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[11] In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

		618 Data[12]		
Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/Settings Due Date: 4/6/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
			Subtotal	9
618 Score Calculation			Grand Total (Subtotal X 2) =	18.00

Indicator Calculation	
A. APR Grand Total	17
B. 618 Grand Total	18.00
C. APR Grand Total (A) + 618 Grand Total (B) =	35.00
Total N/A Points in APR Data Table Subtracted from Denominator	1
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	35.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.

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[12] In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 2 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part C 618 Data

1) Timely –   A State will receive one point if it submits counts/ responses for an entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	1st Wednesday in April
Part C Exiting	Part C Exiting Collection in EMAPS	1st Wednesday in November
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	1st Wednesday in November

2) Complete Data – A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: https://www2.ed.gov/about/inits/ed/edfacts/index.html).

Dispute Resolution

TX-C-DR-2021-22.pdf

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

https://sites.ed.gov/idea/how-the-department-made-determinations/