

# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on  
FFY 2022

Texas



**PART C DUE**  
**February 1, 2024**

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 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) 2022 Annual Performance Report (APR) for the Texas ECI Part C system.

This information was shared in the ECI Advisory Committee (Texas' State Interagency Coordinating Council) meeting held on January 18, 2024, where information and APR data were reviewed and presented for public input. The ECI Advisory Committee meets quarterly. Each meeting is open to the public and can be attended either in person or virtually. During this meeting, the advisory committee and other attendees received an overview of the APR data and updates on projects, such as the State Systemic Improvement Plan (SSIP) and the Family Outcomes Survey. 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 the IDEA Part C requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions).

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 subrecipients is reviewed through analysis of a large number of functions, criteria, and factors, using both state criteria and national standards. Analyses are conducted on monthly, quarterly, and annual bases 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 reports to all users, including subrecipients, that aggregate data related to functions of the ECI system for individual subrecipients and one internal report listing average delivered hours per program for use by the ECI state office.

A team of ECI performance specialists monitors subrecipient performance on contract terms and conditions, including program rules, policies, and procedures; other requested subrecipient 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 subrecipient 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 subrecipient. These data are considered in final program determinations and are used to communicate overall subrecipient 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 subrecipients in Texas. Technical assistance may be provided directly to subrecipients 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 staff across the state at times that are convenient for them. General information about ECI, data, reports, webinars, and training modules are available to subrecipient staff and the general public through the ECI website. ECI offers technical assistance and professional development through interactive web-based modules, webinars from the ECI state office and various partners, videos, written documents, and publications. In addition, individualized technical assistance is provided to subrecipient leadership based on compliance or quality issues identified during compliance monitoring, quality assurance visits, and analysis of information entered by subrecipients into the statewide data system, as well as at the request of the subrecipient.

**Professional Development System:****The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.**

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

**Stakeholder Engagement:****The mechanisms for broad stakeholder engagement, including activities carried out to obtain input from, and build the capacity of, a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting and any subsequent revisions to targets, analyzing data, developing improvement strategies, and evaluating progress.**

Current and historical data from the Annual Performance Report (APR), including targets, identified trends, and concerns, is shared with the ECl Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas. This group comprises a wide range of stakeholders, including a pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECl subrecipients, and multiple parent representatives (some serving dual roles). These meetings are open to the public, held both in-person and virtually, and are promoted widely to encourage interested stakeholders to attend and provide any feedback on the APR and the State's targets.

In addition to those on the ECl Advisory Committee, ECl state office staff reached out to additional stakeholders, including parents, teachers, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECl state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

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

YES

**Number of Parent Members:**

7

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

Parents and parent center staff, including those on the ECl Advisory Committee and others, 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 ECl services and evaluating progress. Some of these opportunities included: participating in panel presentations to increase knowledge of ECl and ways to better collaborate with programs and partners who also serve children birth to 3 with disabilities and/or developmental delays, serving on the personnel retention workgroup to help identify ways to improve hiring and ongoing training to ensure ECl personnel are qualified and retained to address the impact of staff turnover on families, and reviewing publications and other materials to increase knowledge of both ECl and other early childhood programs.

**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 ECl office conducted several projects and activities to increase the capacity of parents and to improve outcomes. These include 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, connecting with Partners Resource Network to increase education and build advocacy of parents of children who have a disability or developmental delay, and serving on workgroups to identify ways to improve recruitment and retention of early intervention providers.

**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 ECl 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 setting targets, data analysis, development of the improvement strategies, and evaluation available to the public.**

All information discussed in the ECl 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 2021 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 2021 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 revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, 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://www.hhs.texas.gov/providers/assistive-services-providers/early-childhood-intervention-programs/data-reports/eci-local-program-performance-reports>

The APR is published no later than 120 days following receipt of the final OSEP response on the APR.

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**

OSEP notes that the SSIP Theory of Action and the SSIP Outcomes Measure Tracker attachments included in the State's FFY 2021 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 attachments available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

Targets must be 100%.

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

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

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

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in the Office of Special Education Programs' (OSEP's) response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	95.88%	95.76%	96.01%	96.04%	95.42%

**Targets**

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

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
8,488	10,087	95.42%	100%	95.55%	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.*

1,150

**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, 2023 through May 31, 2023 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, 2023 through May 31, 2023 (the third quarter of the state fiscal year 2023). This data reflects stable enrollment trends; it is considered representative of the entire year's data and the full reporting period. All ECI subrecipients 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 include:**

1. Total children reviewed from all ECI subrecipients: 10,087
2. Children with IFSPs receiving early intervention services in a timely manner (begin on or before 28 days with the parent's consent): 8,488
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: 1,150
4. Children with IFSPs not receiving timely services delivery for other reasons such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 449

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
36	36	0	0

**FFY 2021 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 QA 23-01, 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 subrecipient 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 36 subrecipients that were non-compliant. After this, ECI reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI subrecipient to verify that the 36 ECI subrecipients correctly implemented the specified regulatory requirements and each subrecipient corrected all non-compliance related to each case. Through this process, Texas Part C confirmed 100% correction of the cases in the 36 subrecipients. The corrections were verified based on a record review 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 ensured the correction of a system finding of all non-compliant cases by pulling data from subsequent time periods. System findings were cleared when the data indicated zero non-compliant cases for each subrecipient, 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 QA 23-01, 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 36 subrecipients that were non-compliant. After this, ECI reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI subrecipient to verify that the 36 ECI subrecipients correctly implemented the specified regulatory requirements and each subrecipient corrected all noncompliance related to each case.

**Correction of Individual Child Findings:**

ECI ensured the correction of individual FFY2021 child findings through a review of each noncompliant case record in the TKIDS data system to verify that services were provided, even if late, to all affected children 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 subrecipient. Through this process, Texas ECI confirmed that 100% of cases were corrected.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 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.

**Response to actions required in FFY 2021 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, 2022- June 30, 2023). 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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	98.50%

FFY	2017	2018	2019	2020	2021
Target>=	99.00%	99.00%	99.20%	99.20%	99.20%
Data	99.26%	99.28%	99.06%	99.77%	99.57%

### Targets

FFY	2022	2023	2024	2025
Target >=	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 pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECI subrecipients, and multiple parent representatives (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, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECI state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

### Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	31,904
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Total number of infants and toddlers with IFSPs	32,064



**FFY 2022 SPP/APR Data**

<b>Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</b>	<b>Total number of Infants and toddlers with IFSPs</b>	<b>FFY 2021 Data</b>	<b>FFY 2022 Target</b>	<b>FFY 2022 Data</b>	<b>Status</b>	<b>Slippage</b>
31,904	32,064	99.57%	99.20%	99.50%	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 pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECI subrecipients, and multiple parent representatives (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, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECI state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

#### Historical Data

Outcome	Baseline	FFY	2017	2018	2019	2020	2021
A1	2019	Target>=	71.60%	71.80%	71.72%	69.51%	69.51%
A1	69.50%	Data	72.28%	71.74%	69.50%	66.47%	65.16%
A2	2019	Target>=	54.30%	54.40%	53.69%	46.30%	46.30%
A2	46.29%	Data	48.71%	49.33%	46.29%	44.87%	43.13%
B1	2019	Target>=	77.40%	77.50%	78.22%	77.11%	77.11%
B1	77.10%	Data	78.42%	78.19%	77.10%	72.98%	72.89%
B2	2019	Target>=	45.30%	45.40%	45.02%	35.31%	35.31%
B2	35.30%	Data	39.27%	38.01%	35.30%	33.26%	32.87%
C1	2019	Target>=	77.70%	77.80%	79.52%	77.47%	77.47%
C1	77.46%	Data	80.35%	79.53%	77.46%	75.36%	73.65%
C2	2019	Target>=	51.70%	51.80%	51.41%	44.14%	44.14%
C2	44.13%	Data	47.79%	47.42%	44.13%	40.90%	40.28%

#### Targets

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

#### 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	77	0.32%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	7,196	29.95%

<b>Outcome A Progress Category</b>	<b>Number of children</b>	<b>Percentage of Total</b>
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	6,528	27.17%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	7,229	30.09%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2,996	12.47%

<b>Outcome A</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2021 Data</b>	<b>FFY 2022 Target</b>	<b>FFY 2022 Data</b>	<b>Status</b>	<b>Slippage</b>
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	13,757	21,030	65.16%	69.51%	65.42%	Did not meet target	No 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	10,225	24,026	43.13%	46.30%	42.56%	Did not meet target	No Slippage

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

<b>Outcome B Progress Category</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	60	0.25%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	6,369	26.51%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	9,593	39.93%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	7,045	29.32%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	959	3.99%

<b>Outcome B</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2021 Data</b>	<b>FFY 2022 Target</b>	<b>FFY 2022 Data</b>	<b>Status</b>	<b>Slippage</b>
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	16,638	23,067	72.89%	77.11%	72.13%	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	8,004	24,026	32.87%	35.31%	33.31%	Did not meet target	No Slippage

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

<b>Outcome C Progress Category</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	71	0.30%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	6,038	25.13%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	8,145	33.90%

d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	8,755	36.44%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,017	4.23%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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	16,900	23,009	73.65%	77.47%	73.45%	Did not meet target	No 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	9,772	24,026	40.28%	44.14%	40.67%	Did not meet target	No Slippage

**FFY 2022 SPP/APR Data**

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	24,026
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.	9,303
Number of infants and toddlers with IFSPs assessed	24,026

Sampling Question	Yes / No
Was sampling used?	NO

**Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (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 Developmental Assessment of Young Children-2nd edition (DAYC-2) and 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 function in the natural environment. The team must use multiple sources of information when assigning ratings which may include: observations, clinical assessment, 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.

**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 [General Instructions](#) page 2 for additional instructions on sampling.)*

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

**Beginning with the FFY 2022 SPP/APR, due February 1, 2024**, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race/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	2017	2018	2019	2020	2021
A	2013	Target>= =	87.00%	87.00%	87.00%	87.01%	87.01%
A	86.57%	Data	87.91%	86.58%	85.08%	86.33%	86.21%
B	2013	Target>= =	87.70%	88.00%	88.00%	88.01%	88.01%
B	87.71%	Data	88.75%	88.16%	88.05%	88.82%	88.90%
C	2013	Target>= =	87.80%	88.00%	88.00%	88.01%	88.01%

C	87.79 %	Data	89.98%	88.94%	88.16%	88.32%	88.42%
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**Targets**

FFY	2022	2023	2024	2025
Target A>=	87.01%	87.02%	87.02%	87.02%
Target B>=	88.01%	88.02%	88.02%	88.02%
Target C>=	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 pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECI subrecipients, and multiple parent representatives (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, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECI state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

**FFY 2022 SPP/APR Data**

The number of families to whom surveys were distributed	5,385
Number of respondent families participating in Part C	2,551
Survey Response Rate	47.37%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	2,101
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	2,487
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	2,179
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	2,484
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	2,181
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	2,485

Measure	FFY 2021 Data	FFY 2022 Target	FFY 2022 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)	86.21%	87.01%	84.48%	Did not meet target	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)	88.90%	88.01%	87.72%	Did not meet target	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)	88.42%	88.01%	87.77%	Did not meet target	No Slippage

**Provide reasons for part A slippage, if applicable**

There was a 1.73 percentage point decrease in FFY 2022 data when compared to FFY 2021. While the response rate to the Family Outcomes Survey overall has increased since FFY 2021, there was slippage in the data for this indicator, which may be due to a natural variation in the data. ECI requires subrecipients to provide all families with the ECI Parent Handbook that informs parents of their rights under the Individuals with Disabilities Education Act (IDEA) and the Family Educational Rights and Privacy Act (FERPA). The handbook is reviewed on a routine basis and updated as needed. The ECI Parent Handbook must be explained to parents at the beginning of the intake process, reviewed at the initial IFSP meeting before requesting that the parent sign the IFSP, and reviewed annually at the time of the annual meeting held to evaluate the IFSP. During onsite monitoring visits, Texas ECI reviews client records to verify that subrecipients provided the Parent Handbook to families in the appropriate language and that the handbook, as well as other processes, are explained to families both orally and in writing. Additionally, through webinars, the State office informs subrecipients to encourage parents to read the handbook to understand the program, which in turn may help families to help understand and record responses for the survey questions. To further analyze the slippage in part A, Texas ECI will disaggregate the data for each survey question in this indicator by subrecipient to better understand what may be driving the slippage. Texas ECI may provide targeted technical assistance to subrecipients with significant decreases for this indicator.

**Provide reasons for part B slippage, if applicable**

There was a 1.18 percentage point decrease in FFY 2022 data when compared to FFY 2021. While the response rate to the Family Outcomes Survey overall has increased since FFY 2021, there was slippage in the data for this indicator, which may be due to a natural variation in the data. ECI strives to help families learn to better communicate their children’s needs through a coaching approach used by ECI subrecipients. The coaching approach aims to build parents’ capacity to support their child’s learning and development within the context of everyday activities. ECI carefully monitors and reviews the implementation of the coaching approach on an ongoing basis to ensure providers are following the coaching approach with fidelity. Texas ECI also continued offering the Coaching Families training module, with the goal of strengthening and fortifying service providers’ current skills in using the coaching practice, as well as developing the necessary structure to sustain and grow the use of this practice at each program location. Through the coaching approach, parents strengthen observation skills to better understand their child’s development and are thus better able understand and communicate their child’s needs. Texas ECI continued 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 seven Texas ECI subrecipients 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 addition, to increase family understanding of the coaching approach, Texas ECI continued significant ongoing outreach to partners and stakeholders through conferences, presentations and meetings, and a statewide social media campaign. To further analyze the slippage in part B, Texas ECI will disaggregate the data for each survey question in this indicator by subrecipient to better understand what may be driving the slippage. Texas ECI may provide targeted technical assistance to subrecipients with significant decreases for this indicator.

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 FFY22. All subrecipients 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, 2023, was selected from each of the 41 subrecipients. The number of families who received the survey was proportionate to the size of the subrecipients. The use of proportionate distribution of the surveys helped ensure a representative sample.

The survey is administered through an electronic platform called Survey Monkey. All survey responses are directly reported to the state office to ensure confidentiality. The results from the survey are shared with the ECI contractors in an aggregated form to ensure that any personally identifiable information is not disclosed. The survey period was a six-week period in June and July 2023. During this period, families received their surveys via email, text message, or QR code. After the survey period ended, the state office accessed the survey responses that families submitted electronically..

A total of 7,151 families were randomly selected to respond to the survey. Of those, 1,865 surveys were undeliverable, due to changes in address, family discharging from ECI, or the service coordinator or staff member being unable to reach the family. A total of 5,385 families received the survey, and 2,551 returned the survey. This resulted in a response rate 47.37% 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

**Response Rate**

FFY	2021	2022
Survey Response Rate	43.24%	47.37%

**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 these areas. However, the response group was not representative in the areas of race/ethnicity and age at enrollment as noted below.



**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. States must include race/ethnicity in their analysis. In addition, the State's analysis must 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 category approved through the stakeholder input process.**

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 and ethnicity, Hispanic was overrepresented by 4%, and Black was underrepresented by 2%. There was no differential for White, Asian, and American Pacific Islander.

For age at enrollment, age 2 was underrepresented by 24%, age 1 was overrepresented by 6%, and age <1 was overrepresented by 19%.

For gender, there is no differential for either males or females when the respondent population is compared to the state profile.

For language, among the respondents, the number of families who returned the English and Spanish surveys didn't show any differential compared to the state profile. All languages of the respondent group were representative of the enrolled population.

For eligibility type, among the respondent families, 74% were eligible based on developmental delay, 23% were eligible based on medical diagnosis, and 3% were eligible due to 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.

**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/no)**

**YES**

**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 47% response rate for FFY 2022 and a 43% response rate for FFY 2021. We saw a 4 percentage point increase in the response rate. The FFY 2022 response rate is also higher than our FFY 2020 response rate of 46%. Texas ECI is focusing on multiple strategies for continuous improvement, as discussed below.

Texas ECI will continue working with local subrecipients with a high survey response rate to understand their processes at the program level and share relevant insights with other local subrecipients 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 and to provide training and technical assistance to subrecipients on how to analyze and use their survey results for continuous improvement.

One project is to create dashboards for all subrecipients showing descriptive statistics for responders and non-responders in the survey sample (e.g. race/ethnicity, age, location, and primary language). The purpose is to provide subrecipients with key data to identify subpopulations that may be less likely to respond to the surveys, so they can target educational efforts to improve overall response rates. This year, the dashboard was piloted with six ECI subrecipients in anticipation of a wider release to all subrecipients in the coming year.

For this reporting period, Texas ECI continued to utilize 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 continued 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. Texas ECI also pulled data and notified the subrecipients of their response rate part-way through the survey window.

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.

Texas ECI will continue to disaggregate the responses by race/ethnicity, local subrecipient, 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.**

The statewide response rate was at 47%, with 41% of subrecipients (17 out of 41) below the statewide rate and 56% of subrecipients (23 out of 41) above the statewide response rate. This is an improvement from previous reporting period, as we saw an increase in the statewide response rate and a 2 percentage point increase in the number of subrecipients who were above the statewide response rate.

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 worked with local subrecipients leading up to and throughout the survey period to remind families to complete their survey with the expectation of increasing the response rate and minimizing the risk for potential non-responder bias. Additionally, during the mid-point of the survey distribution period, the state updated local subrecipients with the survey return rate percentage to help contractors to encourage families to return their

survey. Texas' participation in the ECTA 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.

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

#### **4 - Prior FFY 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.

#### **Response to actions required in FFY 2021 SPP/APR**

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

The State reported that the data for this indicator were collected from a response group that was representative of the population. However, in its narrative, the State reported that 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. OSEP notes that the State did include strategies or improvement activities to address this issue in the future.

The State submitted its sampling plan for this indicator with its FFY 2022 SPP/APR. OSEP will respond to the State under separate cover regarding the submission.

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

In the FFY 2023 SPP/APR, the State must report whether its FFY 2023 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 ED Facts Metadata and Process System (EMAPS)) and Census (for the denominator).

#### Measurement

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

#### Instructions

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

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

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	0.82%

FFY	2017	2018	2019	2020	2021
Target >=	0.99%	0.99%	1.00%	1.02%	1.02%
Data	1.01%	1.09%	1.16%	1.22%	1.24%

### Targets

FFY	2022	2023	2024	2025
Target >=	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 pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECI subrecipients, and multiple parent representatives (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, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECI state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

### Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 1 with IFSPs	4,350
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	06/20/2023	Population of infants and toddlers birth to 1	378,682

### FFY 2022 SPPI/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
4,350	378,682	1.24%	1.02%	1.15%	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 (EMAPS)) and Census (for the denominator).

#### Measurement

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

#### Instructions

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

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

### 6 - Indicator Data

Baseline Year	Baseline Data
2005	1.93%

FFY	2017	2018	2019	2020	2021
Target >=	2.01%	2.01%	2.02%	2.10%	2.10%
Data	2.14%	2.34%	2.52%	2.35%	2.66%

#### Targets

FFY	2022	2023	2024	2025
Target >=	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 pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECI subrecipients, and multiple parent representatives (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, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECI state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

#### Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 3 with IFSPs	32,064
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	06/20/2023	Population of infants and toddlers birth to 3	1,126,283

#### FFY 2022 SPPI/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
32,064	1,126,283	2.66%	2.10%	2.85%	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 child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	98.72%	98.79%	99.09%	99.97%	97.33%

### Targets

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

### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
7,993	9,546	97.33%	100%	98.17%	Did not meet target	No Slippage

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

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

1,378

**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, 2023, through May 31, 2023 (third quarter of SFY 2023).

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

All ECI subrecipients 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 9,546 records entered into the TKIDS database of children with initial IFSPs who were evaluated and assessed during the three-month period from March 1, 2023, through May 31, 2023. Of those, 9,371 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, 2023, through May 31, 2023:

A. Total records reviewed with a referral/evaluation/assessment and initial IFSP meeting in the third quarter of the state fiscal year: 9,546

B. Infants or toddlers with an evaluation/assessment and initial IFSP within 45 days of referral: 7,993

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: 1,378

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: 173

E. Infants or toddlers with an evaluation/assessment and initial IFSP after being in follow-along: 2

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
14	14	0	0

**FFY 2021 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 QA 23-01, 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 subrecipient 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 14 subrecipients that were non-compliant. After this, ECI reviewed data for each non-compliant case from subsequent time periods through data monitoring for each ECI subrecipient to verify that the 14 ECI subrecipients correctly implemented the specified regulatory requirements, and each subrecipient corrected all non-compliance related to each case. Through this process, Texas Part C confirmed 100% correction of the cases in the 14 subrecipients. The corrections were verified based on a review 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 ensured the correction of a system finding of all non-compliant cases by pulling data from subsequent time periods. System findings were cleared when the data indicated zero non-compliant cases for each subrecipient, 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 QA 23-01, 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 subrecipient 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 14 subrecipients that were non-compliant.

**Correction of Individual Child Findings:**

ECI ensured the correction of individual FFY 2021 child findings through a review of each noncompliant case record in the TKIDS data system to verify that services were provided, even if late, to all affected children 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 subrecipient. Through this process, Texas ECI confirmed that 100% of cases were corrected.

**Process to Address Continued Noncompliance.**

If an ECI subrecipient 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 subrecipient'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 2021**



Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 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.

#### Response to actions required in FFY 2021 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, 2022- June 30, 2023). 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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

## 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 child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%

FFY	2017	2018	2019	2020	2021
Data	96.37%	98.54%	98.42%	96.89%	97.18%

**Targets**

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

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
4,085	4,243	97.18%	100%	98.02%	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.

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**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, 2023, through May 31, 2023).

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

The data reflects all toddlers with disabilities who exited Part C between March 1, 2023, and May 31, 2023 (the third quarter of the state fiscal year 2023). 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: 4,243

Number of children exiting Part C who have an IFSP with transition steps and services: 4,085

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: 74

Infants or toddlers with late transition steps due to other circumstances such as staff shortage, staff illness, scheduling difficulties, or unclear documentation: 84

**Correction of Findings of Noncompliance Identified in FFY 2021**

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	23	0	1

**FFY 2021 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 QA 23-01, 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 subrecipient 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 subrecipients that were non-compliant. After this, ECI staff reviewed data for each noncompliant case from subsequent time periods through data monitoring for each ECI subrecipient to verify that 23 ECI subrecipients correctly implemented the specified regulatory requirements, and each subrecipient corrected all noncompliance related to each case.

**Correction of System Findings:**

ECI ensured the correction of a system finding of all non-compliant subrecipients by pulling data from subsequent time periods in the TKIDS database. System findings were cleared when the data indicated zero non-compliant cases for each subrecipient, and the expectation is for each system finding to be cleared within one year of the issuance of the finding. Through this process, Texas Part C confirmed 100% correction in 23 of 24 subrecipients.

**Process to Address Continued Noncompliance:**

If an ECI subrecipient is unable to clear a 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

subrecipient's annual determination. For this reporting period, 23 of 24 subrecipients had findings of noncompliance corrected at the system level. One subrecipient was identified for continued systemic non-compliance.

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

In accordance with OSEP QA 23-01, ECI examines data from TKIDS at least one time per year to identify any noncompliance with the requirements, 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 24 subrecipients that were non-compliant.

**Correction of Individual Child Findings:**

ECI ensured correction of individual FFY 2021 child findings through a review of each noncompliant case record in the TKIDS data system to verify that services were provided, even if late, to all affected children 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 subrecipient. Through this process, Texas ECI confirmed that 100% of cases were corrected.

**Process to Address Continued Noncompliance:**

If an ECI subrecipient is unable to clear a child 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 subrecipient's annual determination. For this reporting period, all subrecipients had all findings of noncompliance corrected at the individual level.

**FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

One subrecipient was identified as noncompliant with systemic findings not cleared. This subrecipient exited the Texas Part C system on October 20, 2023. Prior to the subrecipient exiting, they failed to document correction of systemic non-compliance. Individual child findings were either corrected, or the children have exited the Texas Part C program.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 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.

**Response to actions required in FFY 2021 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, 2022- June 30, 2023). 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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

## 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 child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%

FFY	2017	2018	2019	2020	2021
Data	94.32%	96.12%	96.20%	91.39%	91.74%

**Targets**

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

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
3,205	4,243	91.74%	100%	90.13%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

There was a 1.61 percentage point decrease in FFY 2022 data when compared to FFY 2021. This in part may be explained by a significant increase in exited children who could not be contacted and children who exited due to withdrawal by family this year compared to the previous year. ECI strives to help subrecipients track transition data closely by providing quarterly data on noncompliant cases to help them better ensure all data entered into the TKIDS data system is accurate. ECI also encourages subrecipients to cultivate close relationships with their Local Education Agencies to ensure all transition steps are completed smoothly and on time. In addition, ECI has established a workgroup and monthly meetings with the state education agency to coordinate on topics including transition services. ECI will continue to monitor this indicator closely and seek additional ways to assist subrecipients in meeting timelines as necessary.

**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.

687

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

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

All ECI subrecipients 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, 2023, and May 31, 2023 (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 with disabilities who exited Part C between March 1, 2023, and May 31, 2023 (the third quarter of the state fiscal year 2023) Because the data from this period reflects stable enrollment trends, it is considered representative of the entire year's data and the full reporting period.

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

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: 4,243  
 Of the 4,243, Not potentially eligible for part B = 109  
 Of the 4,243, Parent opt out = 687  
 Of the 4,243, potentially eligible for Part B = 3,447  
 Of the 3,447 potentially eligible children for Part B, Timely Part B = 3,205

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
27	26	0	1

**FFY 2021 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 QA 23-01, 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 subrecipient 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 27 subrecipients that were non-compliant. After this, ECI staff reviewed data for each noncompliant case from subsequent time periods through data monitoring for each ECI subrecipient to verify that 26 ECI subrecipients correctly implemented the specified regulatory requirements, and each subrecipient corrected all noncompliance related to each case.

**Correction of System Findings:**

ECI ensured the correction of a system finding of all non-compliant cases by pulling data from subsequent time periods in the TKIDS database. System findings were cleared when the data indicated zero non-compliant cases for each subrecipient, and the expectation is for each system finding to be cleared within one year of the issuance of the finding. Through this process, Texas Part C confirmed 100% correction in 26 of 27 subrecipients.

**Process to Address Continued Noncompliance:**

If an ECI subrecipient is unable to clear a 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 subrecipient's annual determination. For this reporting period, 26 of 27 subrecipients had findings of noncompliance corrected at the system level. One subrecipient was identified for continued systemic non-compliance.

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

In accordance with OSEP QA 23-01, ECI examines data from TKIDS at least one time per year to identify any noncompliance with the requirements, 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 27 subrecipients that were non-compliant.

**Correction of Individual Child Findings:**

ECI ensured correction of FFY 2021 individual child findings through a review of each noncompliant case record in the TKIDS data system to verify that services were provided, even if late, to all affected children 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 subrecipient. Through this process, Texas ECI confirmed that 100% of cases were corrected.

**Process to Address Continued Noncompliance:**

If an ECI subrecipient is unable to clear a child 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 subrecipient's annual determination. For this reporting period, all subrecipients had all findings of noncompliance corrected at the individual level.

**FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

One subrecipient was identified as non-compliant with systemic findings not cleared. This subrecipient exited the Texas Part C system on October 20, 2023. Prior to the subrecipient exiting they failed to document correction of systemic non-compliance. Individual child findings were either corrected, or the children have exited the Texas Part C program.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 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.

**Response to actions required in FFY 2021 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, 2022- June 30, 2023). 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.

The State did not provide the reasons for delay, as required by the Measurement Table. Therefore, OSEP was unable to determine whether the State reviewed the reasons for delay.

## **8B - Required Actions**

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

The State did not provide the reasons for delay as required by the Measurement Table. The State must report reasons for delay for FFY 2023 in its FFY 2023 SPP/APR.



## 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 child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%

FFY	2017	2018	2019	2020	2021
Data	92.30%	93.60%	92.33%	90.75%	92.40%

**Targets**

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

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2,885	4,243	92.40%	100%	95.32%	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.

950

**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.

254

**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 with disabilities who exited Part C between March 1, 2023, and May 31, 2023 (the third quarter of the state fiscal year 2023). Because the data from this period reflects stable enrollment trends, it is considered representative of the entire year's data and the full reporting period.

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

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: 4,243  
 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: 2,885  
 Number of toddlers for whom the parent did not provide approval for the transition conference: 950  
 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: 254  
 Infants or toddlers with late transition conference due to other circumstances such as staff shortage, staff illness, scheduling difficulties, unclear documentation: 154

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
30	29	0	1

**FFY 2021 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 QA 23-01, 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 subrecipient 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 30 subrecipients that were non-compliant. After this, ECI staff reviewed data for each noncompliant case

from subsequent time periods through data monitoring for each ECI subrecipient to verify that 29 ECI subrecipients correctly implemented the specified regulatory requirements, and each subrecipient corrected all noncompliance related to each case.

**Correction of System Findings:**

ECI ensured the correction of a system finding of all non-compliant subrecipients by pulling data from subsequent time periods in the TKIDS database. System findings were cleared when the data indicated zero non-compliant cases for each subrecipient, and the expectation is for each system finding to be cleared within one year of the issuance of the finding. Through this process, Texas Part C confirmed 100% correction in 29 of 30 subrecipients.

**Process to Address Continued Noncompliance:**

If an ECI subrecipient is unable to clear a 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 subrecipient's annual determination. For this reporting period, 29 of 30 subrecipients had findings of noncompliance corrected at the system level. One subrecipient was identified for continued systemic non-compliance.

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

In accordance with OSEP QA 23-01, ECI examines data from TKIDS at least one time per year to identify any noncompliance with the requirements, 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 30 subrecipients that were non-compliant.

**Correction of Individual Child Findings:**

ECI ensured correction of FFY 2021 individual child findings through a review of each noncompliant case record in the TKIDS data system to verify that services were provided, even if late, to all affected children within one year of the issuance of the finding. Corrective action was required unless the child was no longer in the jurisdiction of the local ECI subrecipient. Through this process, Texas ECI confirmed that 100% of cases were corrected.

**Process to Address Continued Noncompliance:**

If an ECI subrecipient is unable to clear a child 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 subrecipient's annual determination. For this reporting period, all subrecipients had all findings of noncompliance corrected at the individual level.

**FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

One subrecipient was identified as non-compliant with systemic findings not cleared. This subrecipient exited the Texas Part C system on October 20, 2023. Prior to the subrecipient exiting they failed to document correction of systemic non-compliance. Individual child findings were either corrected, or the children have exited the Texas Part C program.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 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.

**Response to actions required in FFY 2021 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, 2022- June 30, 2023). 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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

## Indicator 9: Resolution Sessions

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

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

### 9 - Indicator Data

#### Not Applicable

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

YES

**Provide an explanation of why it is not applicable below.**

Texas Part C has adopted Part C due process procedures.

### 9 - Prior FFY Required Actions

OSEP notes that this indicator is not applicable.

**Response to actions required in FFY 2021 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 EDFacts Metadata and Process System (EMAPS)).

**Measurement**

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

**Instructions**

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

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

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, the State must develop baseline and 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 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	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 pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECI subrecipients, and multiple parent representatives (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, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECI state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

**Historical Data**

Baseline Year	Baseline Data
2005	

FFY	2017	2018	2019	2020	2021
Target>=					

<b>FFY</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>
Data	0.00%				

**Targets**

<b>FFY</b>	<b>2022</b>	<b>2023</b>	<b>2024</b>	<b>2025</b>
Target>=				

**FFY 2022 SPP/APR Data**

<b>2.1.a.i Mediation agreements related to due process complaints</b>	<b>2.1.b.i Mediation agreements not related to due process complaints</b>	<b>2.1 Number of mediations held</b>	<b>FFY 2021 Data</b>	<b>FFY 2022 Target</b>	<b>FFY 2022 Data</b>	<b>Status</b>	<b>Slippage</b>
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

The State reported fewer than ten mediations held in FFY 2022. 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 expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

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

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

### Overview of the Three Phases of the SSIP

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

#### Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

### Specific Content of Each Phase of the SSIP

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

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

#### Phase III: Implementation and Evaluation

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

##### A. Data Analysis

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

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

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2023). 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 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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 (e.g., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (e.g., 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 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) 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 positive social-emotional skills, the percent who substantially increased their rate of growth by the time they turned 3 or exited the program.

As part of its SPP/APR processes, Texas ECI established a baseline and targets for APR Indicator 3a for FFYs 2020 through 2025. The baseline and projections consider the 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 proportion of infants and toddlers improving their rate of growth in positive social-emotional skills by .02 percentage points at the end of FFY 2025. The 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

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

NO

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

NO

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

NO

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

<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	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	69.51%	69.52%	69.52%	69.52%

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
13,757	21,030	65.16%	69.51%	65.42%	Did not meet target	No Slippage

**Provide the data source for the FFY 2022 data.**

All 41 Texas ECI subrecipients entered the required child outcomes data for eligible infants and toddlers into the TKIDS database for the full reporting period of FFY 2022/SFY23 (September 1, 2022 – August 31, 2023).

**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 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 13,757 children who received a "c" or "d" category and 21,030 children who received categories "a," "b," "c," or "d," which resulted in 65.42 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 ECI has examined Indicator 4 data over the past few years for additional support in assessing SiMR progress. These data help 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 CIS #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 SFY22 to SFY23, percentages increased for seven of the 13 FOS questions that Texas ECI examines in support of the SiMR. Percentages increased for respondents who completely or almost completely:

- (3) Understand their child's delays and/or needs: 93.40% to 93.60%
- (4) Are able to tell when their child is making progress: 95.78% to 96.20%
- (9) Are comfortable asking for services and supports that their child and family need: 93.01% to 93.40%
- (11) Are able to help their child get along with others: 91.62% to 91.80%
- (12) Are able to help their child learn new skills: 94.50% to 95.00%
- (16) Are comfortable talking to family and friends about their child's needs: 91.90% to 94.60%

The percentage also increased for respondents who reported that ECI has been very helpful or extremely helpful in (14) giving useful information about how to help their child get along with others (91.15% to 92.00%).

**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 subrecipients' global child outcomes ratings and has continued to provide ongoing support, training, and technical assistance to its subrecipients 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 showed a downward trend from FFY2019 through FFY2021. This is believed to be because outcomes were artificially high prior to FFY 2019, and it is possible that Texas ECI set its SiMR targets too high and thus saw a decrease in its targeted outcome as subrecipients increased their knowledge and improved their rating skills. While there was a slight increase in FFY 2022, the target was not met.

The Texas ECI Quality Assurance (QA) team continues to reinforce the message with subrecipients 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 continuing fluctuation in the percentage 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 percent with a targeted increase of 0.02 percentage points 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 evaluation plan was updated to accurately reflect current outcomes, methods of data collection, and baseline data.

## **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 (enhance professional development to ensure providers use the coaching framework with fidelity). 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 also continued offering the Coaching Families training module, designed to support service providers in delivering the evidence-based practice of coaching, as researched and developed by Dathan Rush and M'Lisa Shelden. The two-hour online module provides foundational information on the coaching approach to service delivery, offering the opportunity to observe each of the five fundamental coaching components through video demonstrations. Through guided practice activities, providers are able to utilize a coaching fidelity checklist to assess scenarios where the coaching practice is being implemented. The Coaching Families training aims 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 (increase families' knowledge about their role in supporting their children's development, including their social-emotional development), Texas ECI continued 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 seven Texas ECI subrecipients 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. Additionally, Texas ECI compared FFY 2022 FOS data to FFY 2021 data to determine an increase in ECI families' understanding of their children's strengths, needs, and abilities, as well as how to help their children develop and learn.

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 continued significant ongoing outreach to partners and stakeholders through conferences, presentations and meetings, and orientation and engagement of the Texas ECI Advisory Committee. To further support increased knowledge of ECI services, Texas ECI continued hosting Child Find Forums, bringing representatives from Texas ECI subrecipients to share best practices and collaborate on ways to improve Child Find efforts in their areas. Additionally, Texas ECI launched a statewide social media campaign designed to raise awareness of ECI services, including when and how to make a referral, strengthen staff recruitment outreach, and highlight partners and the resources provided to families.

**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.**

Texas ECI achieved outcomes and continued to develop infrastructure for CIS #1 through the partnership between Texas ECI, NCCP, and Georgetown University, which addressed multiple areas of systems framework for Texas ECI, and included professional development and technical assistance for ECI personnel, governance, and finance. Through this collaborative, plans were explored for the coordination of an IECMH training system for Texas ECI subrecipients with tiered steps including foundational training through the development of consultation expertise; strengthening the continued partnership between Texas ECI and the Department of Family and Protective Services (DFPS) by clarifying ECI referral requirements, including the development of a joint training for ECI and DFPS staff; and exploring cross-system and braided funding opportunities to make IECMH consultants

available to Texas ECI programs. The IECMH consultation pilot launched in May 2023 with eight ECI subrecipients opting to participate. Throughout the pilot, all eight of the participating subrecipients used consultant services during ECI service delivery visits to assist in providing strategies to support parent-child relationships and parent needs. The IECMH consultation pilot officially ended on August 31, 2023, as planned. HHSC ECI analyzed pilot data including ECI provider, family, and consultant survey results. A full report is expected to be completed in March 2024. These efforts will enhance efforts to achieve and sustain system improvements in supporting Texas children's social-emotional development. Texas ECI also continued to develop infrastructure for CIS #1 through SFY 2023 quality assurance reviews, which include record reviews and onsite observations of ECI 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 ECI 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 subrecipients have requested and participated in meetings with QA staff to further enhance their understanding of best practices in coaching. Additionally, 113 ECI employees completed the Coaching Families pre- and post-training surveys in SFY 2023. Of these, 54 percent demonstrated improvement and 19.5 percent of all participants improved their scores by 40 percent or more. The Coaching Families training and coaching fidelity observation results help inform Texas ECI's in developing sustainable system improvement efforts as it works to achieve its SiMR.

Short-term outcomes were achieved for CIS #2 in effort to support system change necessary for achieving our SiMR and the sustainability of improvement efforts related to increased knowledge among ECI families. From SFY 2022 to SFY 2023, there was an increase in the percentage of FOS respondents who reported completely or almost completely:

- understanding their child's delays and/or needs (93.4% to 93.6%)
- able to tell when their child is making progress (95.8% to 96.2%)
- able to help their child get along with others (91.6% to 91.8%)
- able to help their child learn new skills (94.5% to 95.0%)
- comfortable asking for services that their child and family need (93.0% to 93.4%)
- comfortable talking to family and friends about their child's needs (91.9% to 94.6%)

Short-term outcomes were met for CIS #3 in effort to support system change necessary for achieving our SiMR and the sustainability of improvement efforts related to increased knowledge of ECI services. Texas ECI launched a statewide social media campaign designed to raise awareness of ECI services, including when and how to make a referral, strengthen staff recruitment outreach, and highlight partners and the resources provided to families. The social media campaign kicked off in September 2022 and ended in August 2023. The outcome objective to increase website views for this strategy was met, as traffic to ECI webpages increased from 31,425 views in August 2022 to 33,842 views in August 2023. Based on data collected from Child Find Forum post-surveys, 83.3 percent of ECI staff reported that the Child Find Forums increased their knowledge and awareness of Child Find practices.

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

YES

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

In FFY 2022, Texas ECI utilized one-time American Rescue Plan Act (ARPA) funds from the Texas Workforce Commission (TWC) to support professional development needs of the early childhood workforce, through January 31, 2024. This new infrastructure improvement strategy included multiple activities that addressed each of the comprehensive improvement strategies (CIS), as described below.

- Participating local ECI programs facilitated trainings with child care programs on the importance of early intervention and evidence-based practices (including coaching) used in early intervention, the importance of early childhood brain development, strategies for discussing developmental concerns with parents, and early learning classroom inclusion. Texas ECI developed a new training this reporting period, titled, Planning and Creating Inclusive Early Childhood Classrooms. This training focuses 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 subrecipients presented this training to child care programs and TWC Workforce Board members. This activity addressed CIS #3, as it was designed to assist child care program staff, who are a primary referral source, in better understanding ECI services. In FFY 2022, with TWC-ARPA funding ECI subrecipients reached over 2,000 early childhood professionals by providing more than 200 training sessions to nearly 500 early learning programs, on topics including developmental learning strategies, early brain development, and classroom inclusion.
- Participating ECI subrecipients received funds to earn infant mental health endorsements to strengthen infant mental health support for the families they serve. Endorsements required approximately 30-50 hours of training and 24-50 hours of reflective supervision, based on the type of endorsement. In FFY 2022, 86 percent (124) of participating ECI staff (145) began completing in-service training hours, and nine providers achieved the endorsement. This activity addressed CIS #1 and CIS #2 as it helped providers enhance their ability to identify mental health concerns in infants and learn how to effectively communicate with and engage families about their children's development.

**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 continue offering the Coaching Families training module, designed to enhance professional development and support service providers in delivering the evidence-based practice of coaching. Texas ECI will continue implementing infrastructure improvement strategies to support ECI providers in meeting and maintaining coaching fidelity, including conducting quality assurance reviews, providing one-day training workshops for select ECI programs, and providing guidance to ECI programs on conducting coaching fidelity observations and reporting the results. Texas ECI anticipates 90 percent of ECI providers will achieve coaching fidelity next reporting period. Texas ECI will also leverage resources to support this strategy from a discretionary grant from OSEP related to personnel retention efforts including enhanced professional development opportunities. One component of this grant is the continued implementation 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. Additionally, to build on ECI's IECMH consultation pilot, the Texas Institute for Excellence in Mental Health (TIEMH) at the University of Texas at Austin will conduct a pilot through Preschool Development Grant Birth through Five (PDG B-5) funding. The pilot may allow ECI providers access to IECMH consultants who assist in identifying possible social-emotional/mental health concerns and needs; provide guidance and consultation to help providers support positive, nurturing parent-child relationships; and offer strategies and guidance for prevention and mitigation of social emotional and mental health delays.

To support CIS #2, Texas ECI will continue administering the FOS annually and analyzing data specific to determining if there is an increase in families' understanding of their children's strengths, needs, abilities, ways to help their children develop and learn, as well as a reported increased level of comfort in communicating their children's needs.

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 an increase in individuals reached through state agency outreach events and print publications distributed. This strategy 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 will continue hosting Child Find Forums, with an anticipated outcome of at least 70 percent of ECI staff who attend Child Find Forums reporting the event increased their knowledge and awareness of Child Find practices. Texas will host four, one-day conferences titled, Creating Connections Conferences for Building Inclusive Classrooms, in the regions of Houston, Austin, Dallas, and El Paso. The conferences will support CIS #3, as they aim to strengthen working relationships between ECI and early childhood care and education professionals to successfully build classrooms inclusive of children of all abilities.

Additionally, to build upon the success of the TWC-ARPA funded activities, participating ECI subrecipients will continue facilitating trainings for child care programs through year two of the Preschool Development Grant Birth through Five (PDG B-5). Texas ECI anticipates local ECI subrecipients will train at least 300 unduplicated child care programs by December 30, 2024. This initiative will also include Texas ECI coordinating eight, three-day virtual ASQ Training of Trainers Seminars for 100 ECI personnel and 100 TWC Texas Rising Star mentors and TWC Infant-Toddler Specialists. Texas ECI will also purchase ASQ-3 and ASQ:SE-2 kits for participating ECI subrecipients to distribute to child care programs 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 effectively talking with families about their children's screening results and effective ways to discuss their children's needs.

**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 children 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 collects coaching fidelity scores reported by ECI subrecipients. ECI supervisors use the Texas Coaching Fidelity Checklist during coaching observations to assess coaching fidelity. Texas ECI identified the following in the analysis of this year's reporting period by using the coaching fidelity of implementation data collected:

- Of the 1,226 service providers who received an observation, 1,194, or 97.4 percent, met coaching fidelity in the first or second observation. Of the 1,194 service providers who met fidelity, 1,193, or 99.9 percent, met the fidelity threshold in the first observation.
- Of all 41 ECI subrecipients, 38 reported observations for service providers during this reporting period.
- Out of 38 subrecipients, 26 had 100 percent of their service providers achieve fidelity during this reporting period.
- Out of 38 subrecipients, 10 had 70 percent to 99.9 percent of their service providers achieve fidelity 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 FFY 2022, the ECI QA team conducted 20 targeted desk reviews of ECI focusing on implementation and documentation of components of the coaching approach during ECI service delivery visits. As a result, QA provided targeted technical assistance, recommendations, and resources to each subrecipient that specifically addressed areas of need identified during the reviews. The ECI QA team will conduct complete reviews for the remainder of subrecipients in FFY 2023.

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

The ECI QA team will use the results of the complete reviews to develop and conduct a one-day training workshop addressing identified needs in the area of implementation and documentation of the coaching approach to be delivered across the state in FFY 2024. Expected outcomes from these efforts include an increase in knowledge, understanding, and implementation of the coaching model by service providers across Texas for 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 modified CIS #3 in the evaluation plan to reflect the completion of the social media campaign in August 2023, and the frequency of the Child Find Forums.

Modifications to the evaluation plan were shared with the ECI Advisory Committee, which serves as the Interagency Coordinating Council (ICC) for Texas.

## **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 pediatric physician, the Texas Medicaid and CHIP chief medical director, staff from the Department of State Health Services, staff representing Head Start, 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, the Texas Department of Family and Protective Services, and the Texas Workforce Commission, a Texas Education for Homeless Children and Youth representative, a state legislative representative, program directors from local ECI subrecipients, and multiple parent representatives (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, Child Protective Services staff, physicians, audiologists, and many others to provide information and identify opportunities for collaboration related to improving outcomes for children and families. ECI state office staff also participate in Texas's Early Childhood Interagency Workgroup and the Texas Early Learning Council, which are groups comprised of state agencies that serve young children and their families, with the goal of providing comprehensive services that meet the unique needs of Texas families and improve educational, social, health, and developmental outcomes for children in Texas.

### **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 three 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 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**

None

## **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 of Early Childhood Intervention Services

#### Submitted on:

04/23/24 5:09:36 PM

## Determination Enclosures

### RDA Matrix

# Texas

## 2024 Part C Results-Driven Accountability Matrix

### Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
87.50%	Meets Requirements

### Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	8	6	75.00%
Compliance	14	14	100.00%

### 2024 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)	24,026
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	32,451
Percentage of Children Exiting who are Included in Outcome Data (%)	74.04
<b>Data Completeness Score</b> (please see Appendix A for a detailed description of this calculation)	2

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

<b>Data Anomalies Score</b> (please see Appendix B for a detailed description of this calculation)	2
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#### II. Child Performance

##### (a) Data Comparison: Comparing your State's 2022 Outcomes Data to other States' 2022 Outcomes Data

<b>Data Comparison Score</b> (please see Appendix C for a detailed description of this calculation)	1
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##### (b) Performance Change Over Time: Comparing your State's FFY 2022 data to your State's FFY 2021 data

<b>Performance Change Score</b> (please see Appendix D for a detailed description of this calculation)	1
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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 (%)
<b>FFY 2022</b>	65.42%	42.56%	72.13%	33.31%	73.45%	40.67%
<b>FFY 2021</b>	65.16%	43.13%	72.89%	32.87%	73.65%	40.28%

(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 2024: Part C."



**2024 Part C Compliance Matrix**

<b>Part C Compliance Indicator (2)</b>	<b>Performance (%)</b>	<b>Full Correction of Findings of Noncompliance Identified in FFY 2021 (3)</b>	<b>Score</b>
<b>Indicator 1: Timely service provision</b>	95.55%	YES	2
<b>Indicator 7: 45-day timeline</b>	98.17%	YES	2
<b>Indicator 8A: Timely transition plan</b>	98.02%	N/A	2
<b>Indicator 8B: Transition notification</b>	90.13%	N/A	2
<b>Indicator 8C: Timely transition conference</b>	95.32%	N/A	2
<b>Timely and Accurate State-Reported Data</b>	100.00%		2
<b>Timely State Complaint Decisions</b>	N/A		N/A
<b>Timely Due Process Hearing Decisions</b>	N/A		N/A
<b>Longstanding Noncompliance</b>			2
<b>Programmatic Specific Conditions</b>	None		
<b>Uncorrected identified noncompliance</b>	None		

(2) The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: [https://sites.ed.gov/idea/files/2024\\_Part-C\\_SPP-APR\\_Measurement\\_Table.pdf](https://sites.ed.gov/idea/files/2024_Part-C_SPP-APR_Measurement_Table.pdf)

(3) This column reflects full correction, which is factored into the scoring only when the compliance data are  $\geq 90\%$  and  $< 95\%$  for an indicator.

## Appendix A

### I. (a) Data Completeness:

#### The Percent of Children Included in your State's 2022 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2022 Outcomes Data (C3) and the total number of children your State reported in its FFY 2022 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 2022 in the State's FFY 2022 IDEA Section 618 Exit Data.

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

## Appendix B

### I. (b) Data Quality:

#### Anomalies in Your State's FFY 2022 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2022 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 2018 – FFY 2021 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 (numbers are shown as rounded for display purposes, and values are based on data for States with summary statement denominator greater than 199 exiters). 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 2022 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.

<b>Outcome A</b>	<b>Positive Social Relationships</b>
<b>Outcome B</b>	<b>Knowledge and Skills</b>
<b>Outcome C</b>	<b>Actions to Meet Needs</b>

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

**Expected Range of Responses for Each Outcome and Category, FFY 2022**

<b>Outcome\Category</b>	<b>Mean</b>	<b>StDev</b>	<b>-1SD</b>	<b>+1SD</b>
Outcome A\Category a	1.57	3.26	-1.69	4.83
Outcome B\Category a	1.39	3	-1.6	4.39
Outcome C\Category a	1.26	2.6	-1.33	3.86

<b>Outcome\Category</b>	<b>Mean</b>	<b>StDev</b>	<b>-2SD</b>	<b>+2SD</b>
Outcome A\ Category b	24.07	9.01	6.05	42.08
Outcome A\ Category c	20.96	13.11	-5.27	47.19
Outcome A\ Category d	26.97	9.61	7.74	46.2
Outcome A\ Category e	26.43	15.4	-4.37	57.23
Outcome B\ Category b	25.63	9.71	6.21	45.04
Outcome B\ Category c	29.44	12.56	4.32	54.57
Outcome B\ Category d	31.02	8.11	14.8	47.25
Outcome B\ Category e	12.51	8.23	-3.96	28.98
Outcome C\ Category b	20.98	8.89	3.19	38.76
Outcome C\ Category c	23.49	13.59	-3.68	50.66
Outcome C\ Category d	33.36	8.28	16.8	49.93
Outcome C\ Category e	20.91	15.22	-9.53	51.35

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

**Anomalies in Your State's Outcomes Data FFY 2022**

<b>Number of Infants and Toddlers with IFSP's Assessed in your State</b>	<b>24,026</b>
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<b>Outcome A — Positive Social Relationships</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	77	7,196	6,528	7,229	2,996
<b>Performance (%)</b>	0.32%	29.95%	27.17%	30.09%	12.47%
<b>Scores</b>	1	1	1	1	1

<b>Outcome B — Knowledge and Skills</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	60	6,369	9,593	7,045	959
<b>Performance (%)</b>	0.25%	26.51%	39.93%	29.32%	3.99%
<b>Scores</b>	1	1	1	1	1

<b>Outcome C — Actions to Meet Needs</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	71	6,038	8,145	8,755	1,017
<b>Performance (%)</b>	0.30%	25.13%	33.90%	36.44%	4.23%
<b>Scores</b>	1	1	1	1	1

	<b>Total Score</b>
<b>Outcome A</b>	5
<b>Outcome B</b>	5
<b>Outcome C</b>	5
<b>Outcomes A-C</b>	15

<b>Data Anomalies Score</b>	2
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## Appendix C

### II. (a) Data Comparison:

#### Comparing Your State's 2022 Outcomes Data to Other States' 2022 Outcome Data

This score represents how your State's FFY 2022 Outcomes data compares to other States' FFY 2022 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 (values are based on data for States with a summary statement denominator greater than 199 exiters). 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 2022

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	45.63%	35.29%	54.05%	27.07%	51.93%	33.56%
90	82.58%	69.37%	81.10%	56.55%	85.30%	71.29%

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 2022

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 (%)	65.42%	42.56%	72.13%	33.31%	73.45%	40.67%
Points	1	1	1	1	1	1

Total Points Across SS1 and SS2(*)	6
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Your State's Data Comparison Score	1
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## Appendix D

### II. (b) Performance Change Over Time:

#### Comparing your State's FFY 2022 data to your State's FFY 2021 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2021) is compared to the current year (FFY 2022) 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  $p \leq .05$ . 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  $p \leq .05$ . The statistical test has several steps. All values are shown as rounded for display purposes.

Step 1: Compute the difference between the FFY 2022 and FFY 2021 summary statements.

e.g.,  $C3A \text{ FFY}2022\% - C3A \text{ FFY}2021\% = \text{Difference in proportions}$

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

$\text{Sqrt}[(\text{FFY}2021\% * (1-\text{FFY}2021\%)) / \text{FFY}2021N] + ((\text{FFY}2022\% * (1-\text{FFY}2022\%)) / \text{FFY}2022N)] = \text{Standard Error of Difference in Proportions}$

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

$\text{Difference in proportions} / \text{standard error of the difference in proportions} = z \text{ score}$

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 2021 to FFY 2022

1 = No statistically significant change

2= statistically significant increase from FFY 2021 to FFY 2022

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

Summary Statement/ Child Outcome	FFY 2021 N	FFY 2021 Summary Statement (%)	FFY 2022 N	FFY 2022 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	19,242	65.16%	21,030	65.42%	0.26	0.0047	0.5401	0.5891	NO	1
SS1/Outcome B: Knowledge and Skills	21,376	72.89%	23,067	72.13%	-0.76	0.0042	-1.7961	0.0725	NO	1
SS1/Outcome C: Actions to meet needs	21,196	73.65%	23,009	73.45%	-0.20	0.0042	-0.4791	0.6319	NO	1
SS2/Outcome A: Positive Social Relationships	22,184	43.13%	24,026	42.56%	-0.57	0.0046	-1.2319	0.218	NO	1
SS2/Outcome B: Knowledge and Skills	22,184	32.87%	24,026	33.31%	0.44	0.0044	1.0120	0.3115	NO	1
SS2/Outcome C: Actions to meet needs	22,184	40.28%	24,026	40.67%	0.39	0.0046	0.8562	0.3919	NO	1

<b>Total Points Across SS1 and SS2</b>	<b>6</b>
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<b>Your State's Performance Change Score</b>	<b>1</b>
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**Data Rubric**

**Texas**

FFY 2022 APR (1)

**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

**APR Score Calculation**

<b>Subtotal</b>	12
<b>Timely Submission Points</b> - If the FFY 2022 APR was submitted on-time, place the number 5 in the cell on the right.	5
<b>Grand Total</b> - (Sum of Subtotal and Timely Submission Points) =	17

(1) 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 (2)**

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/Settings Due Date: 8/30/23	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Dispute Resolution Due Date: 11/15/23	1	1	1	3

**618 Score Calculation**

Subtotal	9
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
<b>Denominator</b>	35.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

(2) 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.

(3) 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.

## APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 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	8/30/2023
Part C Exiting	Part C Exiting Collection in EMAPS	2/21/2024
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	11/15/2023

**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

### IDEA Part C

Texas

Year 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing" if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

#### Section A: Written, Signed Complaints

<b>(1) Total number of written signed complaints filed.</b>	0
(1.1) Complaints with reports issued.	0
(1.1) (a) Reports with findings of noncompliance.	0
(1.1) (b) Reports within timelines.	0
(1.1) (c) Reports within extended timelines.	0
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	0

#### Section B: Mediation Requests

<b>(2) Total number of mediation requests received through all dispute resolution processes.</b>	0
(2.1) Mediations held.	0
(2.1) (a) Mediations held related to due process complaints.	0
(2.1) (a) (i) Mediation agreements related to due process complaints.	0
(2.1) (b) Mediations held no related to due process complaints.	0
(2.1) (b) (i) Mediation agreements not related to due process complaints.	0
(2.2) Mediations pending.	0
(2.3) Mediations not held.	0

#### Section C: Due Process Complaints

<b>(3) Total number of due process complaints filed.</b>	0
Has your state adopted Part C due process hearing procedures under 34 CFR 303.430(d)(1) or Part B due process hearing procedures under 34 CFR 303.430(d)(2)?	PARTC
(3.1) Resolution meetings (applicable ONLY for states using Part B due process hearing procedures).	N/A
(3.1) (a) Written settlement agreements reached through resolution meetings.	N/A
(3.2) Hearings fully adjudicated.	0
(3.2) (a) Decisions within timeline.	0
(3.2) (b) Decisions within extended timeline.	0
(3.3) Hearings pending.	0
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	0

State Comments:

This report shows the most recent data that was entered by:

Texas

These data were extracted on the close date:

11/15/2023

## 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 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

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



# UNITED STATES DEPARTMENT OF EDUCATION

## OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

### Final Determination Letter

June 18, 2024

Honorable Cecile Young  
Executive Commissioner  
Texas Health and Human Services Commission  
4601 W. Guadalupe Street  
Austin, TX 78751

Dear Executive Commissioner Young:

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Sections 616 and 642 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Texas meets the requirements and purposes of Part C of the IDEA. This determination is based on the totality of Texas' data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Texas' 2024 determination is based on the data reflected in Texas' "2024 Part C Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for Texas and consists of:

- (1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;
- (2) a Results Matrix (including Components and Appendices) that include scoring on Results Elements;
- (3) a Compliance Score and a Results Score;
- (4) an RDA Percentage based on both the Compliance Score and the Results Score; and
- (5) Texas' Determination.

The RDA Matrix is further explained in a document, entitled "[How the Department Made Determinations under Sections 616\(d\) and 642 of the Individuals with Disabilities Education Act in 2024: Part C](#)" (HTDMD-C).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making the Department's determinations in 2024, as it did for Part C determinations in 2015-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD-C document and reflected in the RDA Matrix for Texas.) For 2024, the Department's IDEA Part C determinations continue to include consideration of each State's Child Outcomes data, which measure how children who receive Part C services are improving functioning in three outcome areas that are critical to school readiness:

- positive social-emotional skills;
- acquisition and use of knowledge and skills (including early language/communication); and
- use of appropriate behaviors to meet their needs.

Specifically, the Department considered the data quality and the child performance levels in each State's Child Outcomes FFY 2022 data.

You may access the results of OSEP's review of Texas' SPP/APR and other relevant data by accessing the EMAPS SPP/APR reporting tool using your State-specific log-on information at <https://emaps.ed.gov/suite/>. When you access Texas' SPP/APR on the site, you will find, in Indicators 1 through 11, the OSEP Response to the indicator and any actions that Texas is required to take. The actions that Texas is required to take are in the "Required Actions" section of the indicator.

It is important for your State to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

Your State will also find the following important documents in the Determinations Enclosures section:

- (1) Texas' RDA Matrix;
- (2) the HTDMD [link](#);
- (3) "2024 Data Rubric Part C," which shows how OSEP calculated the State's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and
- (4) "Dispute Resolution 2022-2023," which includes the IDEA Section 618 data that OSEP used to calculate the State's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Texas' 2024 determination is Meets Requirements. A State's 2024 RDA Determination is Meets Requirements if the RDA Percentage is at least 80%, unless the Department has imposed Specific Conditions on the State's last three IDEA Part C grant awards (for FFYs 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the

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# UNITED STATES DEPARTMENT OF EDUCATION

## OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering two additional criteria related to IDEA Part C determinations. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three years ago). This factor would be reflected in the determination for each State through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State that would otherwise receive a score of meets requirements would not be able to receive a determination of meets requirements if the State had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is reviewing whether and how to consider IDEA Part C results data reported under three indicators in order to improve results for all infants, toddlers, and children with disabilities. This review would include considering alternative scoring options for child outcome Indicator C-3 and considering as potential additional factors the information and data that States report under child find Indicators C-5 and C-6.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part C data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part C Results Matrix and States will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part C data that States submit will automatically be prepopulated in the SPP/APR reporting platform for Part C SPP/APR Indicators 2, 5, 6, 9, and 10 (as they have in the past). Under EDFacts Modernization, States are expected to submit high-quality IDEA Section 618 Part C data that can be published and used by the Department as of the due date. States are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States to take one of the following actions for all business rules that are triggered in the appropriate EDFacts system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. There will not be a resubmission period for the IDEA Section 618 Part C data.

As a reminder, Texas must report annually to the public, by posting on the State lead agency's website, on the performance of each early intervention service (EIS) program located in Texas on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Texas' submission of its FFY 2022 SPP/APR. In addition, Texas must:

- (1) review EIS program performance against targets in Texas' SPP/APR;
- (2) determine if each EIS program "meets the requirements" of Part C, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part C of the IDEA;
- (3) take appropriate enforcement action; and
- (4) inform each EIS program of its determination.

Further, Texas must make its SPP/APR available to the public by posting it on the State lead agency's website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

- (1) includes Texas' determination letter and SPP/APR, OSEP attachments, and all State attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and
- (2) will be accessible to the public via the ed.gov website.

OSEP appreciates Texas' efforts to improve results for infants and toddlers with disabilities and their families and looks forward to working with Texas over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,

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Valerie C. Williams  
Director  
Office of Special Education Programs

cc: State Part C Coordinator