

# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on  
FFY 2019

Montana



**PART C DUE**  
**February 1, 2021**

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 Montana Department of Public Health and Human Services (DPHHS) is the State lead agency responsible for the administration and oversight of the statewide system of early intervention services, Montana Milestones Part C Early Intervention Program. The State contracts with five agencies to provide the Program in their geographic catchment areas (regions) for infants and toddlers who are experiencing developmental delays or at risk for developmental delays due to an established condition diagnosed by a physician or psychologist. In FFY 2019, Montana served 1076 children. The Montana annual budget for early intervention is \$5,173,563 which includes the Part C of the IDEA federal grant (\$2,301,492) and legislatively allocated State General Funds including State Tobacco Settlement funds (\$2,872,071). The five regional contracts total \$4,497,611 for the provision of the following:

1. Referral System to ensure infants and toddlers suspected of having a developmental delay or disability can be easily referred to the early intervention program and all eligible children are enrolled.
2. Multidisciplinary evaluations to determine a child's initial and subsequent eligibility; multidisciplinary assessment initially and at least annually to determine the child's unique needs and the early intervention services appropriate to address those needs; and assessment of the family members to identify the resources, concerns, and priorities of the family related to the development of the child.
3. Individual Family Service Plan developed by the multidisciplinary team; IFSP monitoring, review and evaluation.
4. Individualized services under public supervision to meet the developmental needs of the child and the needs of the family related to enhancing the child's development.
5. Service Coordination provided to a child and family via, at a minimum, one monthly face to face or virtual meeting.
6. Procedural safeguards accorded to children and families receiving services.
7. Transition from the Part C of the IDEA Program.

The mission of Montana Milestones Part C Early Intervention Program is to build upon and provide supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities. In order to ensure the quality of services provided to children and families enrolled in the Program and to comply with federal and State requirements through monitoring and professional development activities, Montana Milestones developed its General Supervision System to promote the Program's mission, key principles, and core values. Montana Milestones State Systemic Improvement Plan supports this effort by focusing on areas of lower performance with a systemic improvement approach. The Program utilizes information from the most recent Annual Performance Plan (APR) data to make determinations annually on the performance of each regional contractor. Information from the State's database, the Early Intervention Module, the contractors' annual reporting, and the State's Dispute Resolution Process is used as criteria in making determinations. Each contractor receives a determination of "meets requirements," "needs assistance," or "needs intervention."

Impact of COVID-19 upon Montana's Part C Program during this reporting year:

Montana Milestones quickly moved to tele-intervention in March 2020 to provide service coordination, family training and coaching, and specialized instruction for children and families enrolled in the Program. By April 2020, early intervention service providers such as speech therapists, occupational therapists, and physical therapists transitioned to virtual visits aided by the State providing those specialists the ability to provide those services in a virtual manner and obtain public or private insurance reimbursement. Unfortunately, Montana's child count has continued to decline with far fewer referrals received from medical professionals, CAPTA, and early care and education personnel. The greatest impact on Indicator data is found in Indicator 8C, transition conferences to the LEA, wherein 14 families were unable to participate in transition conferences with the LEA. Also, Montana's exit data includes 171 toddlers exiting Part C who did not have Part B eligibility determined prior to exit from Part C as local school districts and special education cooperatives initially struggled to provide and use alternative methods for determining Part B eligibility.

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

#### General Supervision System

**The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.**

General Supervision focuses upon individualized support to identify practices that lead to compliant and high-quality services; and identifying and enforcing corrective action plans in areas of non-compliance.

Required Part C of the IDEA processes and high-quality performance measures are identified within each agency's contract:

1. Performance Plan/Annual Performance Report to evaluate efforts to implement the requirements and purposes of Part C.
2. State-wide Systemic Improvement Plan, a comprehensive multi-year plan focusing upon improving results for infants and toddlers with disabilities and their families.
3. Public awareness and Child Find System to identify, locate, and evaluate infants and toddlers with disabilities who are eligible for early intervention services including Indian infants and toddlers residing on a reservation geographically located in the region(s) as well as infants and toddlers who are homeless, in foster care, and wards of the State.
4. Use of funds and resources efficiently and effectively to implement a high-quality program for meeting the needs of children and families enrolled in Part C of the IDEA.
5. Collection and analysis of performance data to make decisions.
6. Implementation of quality standards which are consistent with professional practice guidance and identified in the most current version of Montana's Stepping Stones for Early Intervention Success.
7. Build and sustain a high-quality intervention program following timelines and implementing supervisory oversight and accurate data entry.
8. Develop, write, and implement high-quality child and family outcomes following regulatory requirements.
9. Follow dispute resolution procedures for Part C of the IDEA.

The Part C Coordinator provides administrative oversight and monitoring of all regional Programs. The purpose of monitoring is to a) monitor and evaluate compliance with the federal Part C of the IDEA regulations; b) monitor the contractor's compliance to ensure eligible children and families receive timely, comprehensive, community-based services that enhance the developmental progress of children from birth to age three; c) monitor and evaluate the contractor's contract activities; d) contribute to ongoing quality improvement of contractors to ensure a baseline of quality services for all families participating in Montana Milestones. There are 5 components of the monitoring system: 1) contractors' annual report; 2) data verification process; 3) dispute resolution system; 4) contractors' determinations; and 5) technical assistance and/or professional development.

1. Contractors' annual reports: the contractors submit annual reporting on each Indicator every year. This is a key piece of data gathering for federal and State reporting requirements, the Indicators, and includes Indicator 11, the State-wide Systemic Improvement Plan. The results are used to make the

determinations. A corrective action plan is requested to address any issues of non-compliance identified through the annual report and submitted to the Part C Coordinator within 30 days of written notification.

2. Data verification: throughout the year, activities are completed by the Part C Coordinator to verify the reliability, accuracy and timeliness of data reported by the contractors to DPHHS. Several methods are utilized such as the reporting features of the State's database and ongoing Part C Leadership Team meetings with the five contractors to review data.

3. Dispute resolution: the Part C Coordinator oversees the Part C of the IDEA dispute resolution process: informal complaints, mediation, and due process. The Coordinator supports families and contractors to access the Part C procedural safeguard system; provide technical assistance to the contractors on the implementation of the procedural safeguards and completes Part C formal investigations. Written complaints are investigated to determine whether there are any findings of non-compliance with IDEA with resolution within the 60-day calendar-day timeline. If an area of non-compliance is identified, a corrective action plan is required of the contractor and the contractor has one year from the notification of noncompliance to come into compliance. The contractor must submit the corrective action plan to the Part C Coordinator within identified timelines. The Part C Coordinator reviews and approves the plan and develops a follow-up monitoring plan as appropriate. Any areas of non-compliance must be corrected within one year from the written notification.

4. Contractors' determinations: In making determinations, the Part C Coordinator uses both the compliance and results Indicators. The Coordinator utilizes information from the State's database, and annual report, and the dispute resolution system as criteria in making determinations. Each contractor receives a determination of "meets requirements," "needs assistance," or "needs intervention" based on compliance with Part C of the IDEA.

5. Technical assistance and/or professional development: Data collected from the preceding four monitoring system components inform technical assistance types and intensity as well as professional development opportunities provided to individual or all contractors to support their continuous improvement and adherence to the regulatory requirements.

#### **Technical Assistance System:**

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

Montana accessed the Office of Special Education Program's technical assistance teams from West Ed/NCSI, DaSy, ECTA, and the National Center for Pyramid Model Innovations. The Part C Coordinator, the Part C Early Intervention Specialist, and specific representatives from the five contractors participate in cross-state learning collaboratives: Family Outcomes Data Community of Practice, Dispute Resolution Learning Community, and accessing the ECTA Center and ITCA for strategies and support during the COVID-19 crisis. Montana is receiving Targeted TA, Bringing the Pyramid Model to Early Intervention: Training Trainers to Deliver Pyramid Practices.

The Part C Coordinator makes available ongoing support and technical assistance on-demand and via Part C Leadership Team meetings for the leaders of the five contractors. All types of technical assistance are intended to increase the knowledge, skills, and effectiveness of the recipients. The actions taken because of the technical assistance received:

1. The Social-Emotional Framework for MT Part C was completed by State staff and representatives from the five contractors. Devising next steps to implement the framework led to a series of social-emotional professional development opportunities provided by West Ed professionals beginning March 2020 through August 2020. Due to the pandemic, the professional development was provided virtually encompassing the following topics:

- Behavior Assessment of Baby's Emotional and Social Style Toolkit Training
- Early Childhood Development Foundations – A Relationship-Based Approach
- Relationships, Resilience and Readiness
- Biological and Psychosocial Factors Impacting Outcomes
- Risk and Resiliency
- Parenting, Caregiving, Family Functioning and Parent-Child Relationships
- Building Collaborations and Partnerships on Behalf of Young Children and Families
- Reflective Practice Training and Mentoring (this was provided in person in March 2020, prior to the shutdown)

2. Development of Part C Pyramid Model Team to support targeted technical assistance as Montana's lead coaches participate in sessions provided by NCPMI expected to result in a sustainable train the trainer model for Montana linking social-emotional content with Montana's Coaching Interaction Style.

3. Refining the State's Comprehensive System of Personnel Development (CSPD-C) with the technical assistance of West Ed. Learning content has been identified, shared with stakeholders, and will lead to the development of learning modules in 2021-2022 which will ultimately result in Primary or Comprehensive Certification for Family Support Specialists/Service Coordinators.

4. The Family Outcomes Data Community of Practice participation is supporting Montana as the Family Outcomes survey process is refined to reflect the use of virtual means to obtain Family Outcomes Data.

5. The Dispute Resolution Learning Community continues to be helpful to State staff to ensure regulatory requirements are shared with the five regional contractors. Montana developed and provided training to contractors regarding procedural safeguards including Montana's dispute resolution process.

6. Resources provided by ECTA and ITCA resulted in the development and implementation of Montana Part C's Tele-practices Guidance document.

Additional resources provided by members of the ECTA team supported Montana to better document findings of noncompliance and the State's response to ensure the providers are meeting the regulatory requirements.

7. Technical assistance and support provided by Robin Nelson of DaSy as Montana has been instrumental in the successful development of the data management system for Montana Milestones which is set to go-live February 2021.

#### **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.**

Montana Milestones previously adopted the State's Part B Comprehensive System of Personnel Development developed by Montana's Office of Public Instruction. As one of Montana's improvement strategies documented in the SSIP for Part C, the Part C Coordinator worked with Montana State University (MSU) to develop an online professional development system to promote systemic, consistent, and on-demand professional development pertaining to early intervention in Montana. Review of the four existing learning modules with Montana's technical assistance providers and representatives from Montana State University led the Program to develop a year-long plan to enhance the CSPD-C to deliver high-quality and engaging professional development leading to Primary and Comprehensive Certification for Family Support Specialists/Service Coordinators. Montana contracted with West Ed to develop the framework for MT's CSPD-C. Content areas were developed with stakeholder input including contractor personnel, the Family Support Services Advisory Council (FSSAC), State staff, and staff from the Early Childhood Project of MSU. Next steps will be focused on the development and evaluation of the learning modules. The resulting content and learning module access will be via MSU Early Childhood Practitioners' Registry online learning system in 2022-2023. The plan and action steps will be described in more detail in the State's SSIP.

Montana Milestones contracts with MSU Early Childhood Practitioners' Registry to collect Primary Certification (application, transcripts, verification of employment, and letters of recommendation) data for each Family Support Specialist/Service Coordinator to obtain the initial required certification, Primary. Additional plans and actions steps to use the Registry to obtain the second level of required certification, Comprehensive - linking the CSPD-C with the Registry - will be described in more detail in the State's SSIP.

#### **Stakeholder Involvement:**

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

Stakeholder input for SPP/APR targets is obtained from the Part C Leadership Team made up of the contractor teams: directors, program managers, data managers, Family Support Specialists/Service Coordinators. Additional input is gathered from the State's ICC, the Family Support Services Advisory Council (FSSAC), and from State staff at the lead agency and bureau. The Part C Leadership Team and workgroups made up of regional contractor staff and State staff focusing upon SSIP improvement strategies such as the Child Outcomes Summary workgroup, Social-Emotional workgroup, Coaching workgroup also provide input regarding targets and the development and implementation of the SSIP.

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

YES

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2018 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 2018 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2018 APR in 2020, is available.**

Montana Milestones Part C Early Intervention Program's FFY 2019 APR/SPP will be available on the Department's website as soon as possible after February 1, 2021:

<https://dphhs.mt.gov/ecfsd/montanamilestones/partcreports>

The FFY 2019 APR/SPP is reported to the Governor as soon as possible after February 1, 2021.

The dissemination of the contractors' FFY 2019 APR/SPP and Letters of Determination will be posted to the Department's website as soon as possible after April 1, 2021 and posted to each individual contractor's website as soon as possible after April 1, 2021.

**Intro - Prior FFY Required Actions**

None

**Intro - OSEP Response**

**Intro - Required Actions**

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

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

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

### Data Source

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

### Measurement

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

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

### Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	100.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	97.84%	99.88%	100.00%	100.00%	100.00%

### Targets

FFY	2019
Target	100%

### FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage

198	223	100.00%	100%	98.21%	Did Not Meet Target	Slippage
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**Provide reasons for slippage, if applicable**

Finding: A single contractor identified 31/35 records (88.57%) met the compliance requirements. 4/35 (11.43%) records identified services that were not initiated within 30 days and insufficient data was collected to determine if the reasons for delay were exceptional family circumstances. The contractor has been advised of the findings and will be submitting verification data to ensure correction and subsequent data to ensure 100% compliance with the regulatory requirements.

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

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

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**Include your State's criteria for "timely" receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).**

Montana's definition of timely receipt of early intervention services is identified as services initiated within 30 days from when the parent/family member provides consent (date stamped signature page of the initial IFSP captured in the State's database) for the early intervention services and supports identified within 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).**

The statistically valid, randomized sample size was collected from the second quarter (September 2019 – December 2019) and the fourth quarter (March 2020 - June 2020).

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

All five contractors are monitored for compliance with Indicator 1, Timely Receipt of Services. The State's data management system provides the selected individual records for the time period to validate to ensure compliance with the 30-day timeline for initiation of services. Each contractor was provided an Indicator 1 spreadsheet with a statistically valid, randomized sample of IFSPs completed for the reporting periods collected from the State's database report, Timely Services. For each IFSP record identified in the sample, the agency's personnel document the early intervention service(s) identified on the named IFSP and note the date the service(s) were initiated along with the source of the data. If the service was not initiated within 30 days, the agency's personnel document the reasons for delay. To ensure the data source was verifiable (valid and reliable), the Part C Coordinator also performs randomized checks of the Indicator 1 data submitted by each agency. As documented in the FFY 2018 APR, the report from the State's database used for Indicator 1 reporting is being refined and will link with the Service Coordinator's case notes as stored in the new data management system. The previous go-live date for the new data management was postponed and Indicator 1 data reports will link to the regional Service Coordinator's case notes beginning February 16, 2021.

**If needed, provide additional information about this indicator here.**

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

**1 - Required Actions**

## 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 EDFacts 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	90.70%

FFY	2014	2015	2016	2017	2018
Target>=	97.00%	98.00%	98.00%	99.00%	99.00%
Data	99.30%	99.72%	99.32%	99.41%	99.52%

### Targets

FFY	2019
Target>=	99.00%

### Targets: Description of Stakeholder Input

Stakeholder input for SPP/APR targets is obtained from the Part C Leadership Team made up of the contractor teams: directors, program managers, data managers, Family Support Specialists/Service Coordinators. Additional input is gathered from the State's ICC, the Family Support Services Advisory Council (FSSAC), and from State staff at the lead agency and bureau. The Part C Leadership Team and workgroups made up of regional contractor staff and State staff focusing upon SSIP improvement strategies such as the Child Outcomes Summary workgroup, Social-Emotional workgroup, Coaching workgroup also provide input regarding targets and the development and implementation of the SSIP.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	838
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	838

### FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
838	838	99.52%	99.00%	100.00%	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

Stakeholder input for SPP/APR targets is obtained from the Part C Leadership Team made up of the contractor teams: directors, program managers, data managers, Family Support Specialists/Service Coordinators. Additional input is gathered from the State's ICC, the Family Support Services Advisory Council (FSSAC), and from State staff at the lead agency and bureau. The Part C Leadership Team and workgroups made up of regional contractor staff and State staff focusing upon SSIP improvement strategies such as the Child Outcomes Summary workgroup, Social-Emotional workgroup, Coaching workgroup also provide input regarding targets and the development and implementation of the SSIP.

#### Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2008	Target>=	59.00%	62.00%	65.00%	65.00%	68.00%
A1	62.00%	Data	66.11%	62.72%	53.42%	64.94%	62.78%
A2	2008	Target>=	53.00%	53.00%	56.00%	56.00%	59.00%
A2	55.80%	Data	53.04%	48.07%	35.22%	44.14%	40.22%
B1	2008	Target>=	61.00%	61.00%	64.00%	64.00%	67.00%
B1	63.50%	Data	69.59%	64.21%	55.72%	66.67%	61.63%
B2	2008	Target>=	44.00%	44.00%	47.00%	47.00%	50.00%
B2	46.80%	Data	42.27%	38.41%	30.73%	36.66%	32.83%
C1	2008	Target>=	67.00%	67.00%	70.00%	70.00%	73.00%
C1	70.10%	Data	65.16%	66.48%	59.08%	67.03%	61.50%
C2	2008	Target>=	52.00%	52.00%	55.00%	55.00%	58.00%
C2	54.30%	Data	53.87%	51.45%	35.93%	39.90%	38.91%

#### Targets

FFY	2019
Target A1>=	68.00%
Target A2>=	59.00%
Target B1>=	67.00%
Target B2>=	50.00%
Target C1>=	73.00%
Target C2>=	58.00%

#### FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

451

#### 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	2	0.44%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	172	38.14%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	133	29.49%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	105	23.28%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	39	8.65%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	238	412	62.78%	68.00%	57.77%	Did Not Meet Target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	144	451	40.22%	59.00%	31.93%	Did Not Meet Target	Slippage

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

Since 2013 and following significant drill-down of Child Outcomes ratings and patterns plus monitoring of Child Outcomes measurement processes and procedures across the State, Montana implemented strategies to ensure the validity and reliability of Child Outcomes Summary Statements for all three Child Outcomes: 1) use of a single measurement tool, the MEISR, to be used for age-anchoring across the State; 2) development of consistent COS process to be implemented during every baseline and exit measurement across the State; 3) inclusion of family input during baseline and exit ratings; 4) ongoing monitoring of Child Outcomes data; 5) required annual training on the COS process; 6) annual COSP fidelity checklist; and 7) follow-up training to those not meeting the fidelity threshold. The result of the strategies has been percentage decreases in each Summary Statement. Therefore, the State attributes the slippage to improved COS processes and procedures resulting in more reliable and valid Child Outcomes summary statements data. The State continues to monitor COS data leading to the identification of targets that are more suitable to measure progress anticipated in the FFY 2021 APR package. With the development of authentic targets and the corresponding improvement strategies noted in the SSIP, the State is better able to assess the impact of service providers providing high-quality services that improve results for infants and toddlers with disabilities and their families.

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

Same as identified above.

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	3	0.67%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	179	39.69%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	153	33.92%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	95	21.06%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	21	4.66%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	248	430	61.63%	67.00%	57.67%	Did Not Meet Target	Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	116	451	32.83%	50.00%	25.72%	Did Not Meet Target	Slippage

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

Since 2013 and following significant drill-down of Child Outcomes ratings and patterns plus monitoring of Child Outcomes measurement processes and procedures across the State, Montana implemented strategies to ensure the validity and reliability of Child Outcomes Summary Statements for all three Child Outcomes: 1) use of a single measurement tool, the MEISR, to be used for age-anchoring across the State; 2) development of consistent COS process to be implemented during every baseline and exit measurement across the State; 3) inclusion of family input during baseline and exit ratings; 4) ongoing monitoring of Child Outcomes data; 5) required annual training on the COS process; 6) annual COSP fidelity checklist; and 7) follow-up training to those not meeting the fidelity threshold. The result of the strategies has been percentage decreases in each Summary Statement. Therefore, the

State attributes the slippage to improved COS processes and procedures resulting in more reliable and valid Child Outcomes summary statements data. The State continues to monitor COS data leading to the identification of targets that are more suitable to measure progress anticipated in the FFY 2021 APR package. With the development of authentic targets and the corresponding improvement strategies noted in the SSIP, the State is better able to assess the impact of service providers providing high-quality services that improve results for infants and toddlers with disabilities and their families.

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

Same as above.

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

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	4	0.89%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	164	36.36%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	150	33.26%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	111	24.61%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	22	4.88%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 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	261	429	61.50%	73.00%	60.84%	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	133	451	38.91%	58.00%	29.49%	Did Not Meet Target	Slippage

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

Since 2013 and following significant drill-down of Child Outcomes ratings and patterns plus monitoring of Child Outcomes measurement processes and procedures across the State, Montana implemented strategies to ensure the validity and reliability of Child Outcomes Summary Statements for all three Child Outcomes: 1) use of a single measurement tool, the MEISR, to be used for age-anchoring across the State; 2) development of consistent COS process to be implemented during every baseline and exit measurement across the State; 3) inclusion of family input during baseline and exit ratings; 4) ongoing monitoring of Child Outcomes data; 5) required annual training on the COS process; 6) annual COSP fidelity checklist; and 7) follow-up training to those not meeting the fidelity threshold. The result of the strategies has been percentage decreases in each Summary Statement. Therefore, the State attributes the slippage to improved COS processes and procedures resulting in more reliable and valid Child Outcomes summary statements data. The State continues to monitor COS data leading to the identification of targets that are more suitable to measure progress anticipated in the FFY 2021 APR package. With the development of authentic targets and the corresponding improvement strategies noted in the SSIP, the State is better able to assess the impact of service providers providing high-quality services that improve results for infants and toddlers with disabilities and their families.

**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	752
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.	176

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

Each contractor follows the MT's Child Outcomes Summaries Process Guidance, based upon the ECO Child Outcomes Summary Process, developed in 2016 and revised in 2017. The Guidance includes six learning modules beginning with 1) an overview of the COS process including MEISR training

for age anchoring; 2) essential knowledge for the COS process including age expected skills and behaviors; 3) 7-point rating scale; 4) using the rating scale during case studies, i.e., bucket tree; 5) engaging families in the COS process; and 6) documenting the ratings. Annual training is required for each service coordinator as well as meeting the COS Fidelity Checklist threshold: 85%.

The State's database stores all baseline and exit COS along with Child Outcome Analysis reports: Child Outcomes Summary (report on the Part C totals for each of the OSEP reporting categories) and Child Outcome Analysis Reports (reports on infants and toddlers exiting Part C comparing baseline and exit outcomes, entry distributions, exit distributions, entry and exit distributions). The reporting features are available on demand with current data and have contributed significantly to identifying adjustments and improvement strategies. A report created in FFY 2017 is used to identify those children exiting Part C within six months.

The business rules associated with the reports will also be used in the new data management system set to go-live February 16, 2021.

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

Montana's intense efforts to report high quality child outcomes data has been worthwhile. Ongoing monitoring by the Part C Coordinator as well as the five contractors indicates that pursuing a change in the State's baselines along with resetting targets are our next steps following the FFY 2019 data collection period. Montana proposes to set new baselines and targets using actual FFY 2019 outcomes data in the anticipated new APR package available for 2021. Continuous monitoring and improvement processes are in place and will be highlighted in Montana's SSIP submission in April 2021.

**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 =  $\left[ \frac{\text{(\# of respondent families participating in Part C who report that early intervention services have helped the family know their rights)}}{\text{(\# of respondent families participating in Part C)}} \right] \times 100$ .
- B. Percent =  $\left[ \frac{\text{(\# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs)}}{\text{(\# of respondent families participating in Part C)}} \right] \times 100$ .
- C. Percent =  $\left[ \frac{\text{(\# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn)}}{\text{(\# of respondent families participating in Part C)}} \right] \times 100$ .

#### 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.

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

If the analysis shows that the demographics of the families responding are not representative of the demographics of infants, toddlers, and families enrolled 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.

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2006	Target>=	93.00%	94.00%	94.00%	95.00%	95.00%
A	93.00%	Data	95.94%	88.98%	84.64%	74.52%	94.27%
B	2006	Target>=	93.00%	94.00%	94.00%	95.00%	95.00%
B	92.80%	Data	95.65%	91.67%	91.87%	78.56%	96.04%
C	2006	Target>=	93.00%	94.00%	94.00%	95.00%	95.00%
C	94.80%	Data	95.34%	87.63%	85.93%	73.89%	94.03%

### Targets

FFY	2019
Target A>=	95.00%
Target B>=	95.00%
Target C>=	95.00%

### Targets: Description of Stakeholder Input

Stakeholder input for SPP/APR targets is obtained from the Part C Leadership Team made up of the contractor teams: directors, program managers, data managers, Family Support Specialists/Service Coordinators. Additional input is gathered from the State's ICC, the Family Support Services

Advisory Council (FSSAC), and from State staff at the lead agency and bureau. The Part C Leadership Team and workgroups made up of regional contractor staff and State staff focusing upon SSIP improvement strategies such as the Child Outcomes Summary workgroup, Social-Emotional workgroup, Coaching workgroup also provide input regarding targets and the development and implementation of the SSIP.

**FFY 2019 SPP/APR Data**

<b>The number of families to whom surveys were distributed</b>	<b>542</b>
Number of respondent families participating in Part C	305
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	289
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	292
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	296
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	298
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	283
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	293

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 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)	94.27%	95.00%	98.97%	Met Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	96.04%	95.00%	99.33%	Met Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	94.03%	95.00%	96.59%	Met Target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

**Include the State's analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.**

To ensure the representativeness of the demographics of the families responding are representative of the demographics of the infants, toddlers, and families enrolled in the Part C program, Montana collects Family Outcomes Survey data from a representative group chosen from the larger statistical population according to a specific characteristic: the IFSP six-month review.

- Every family enrolled in MT's Part C Program participates in a review of the IFSP every six months.
- Every family enrolled in MT's Part C Program is provided the Family Outcomes Survey at each six-month review.
- Every family enrolled in MT's Part C Program is provided access to the Family Outcomes Survey at each six-month review in two ways: online or paper. If a family member does not have access to a personal computer, the Family Support Specialist/Service Coordinator provides access to the online survey via his/her personal computer.

The survey was distributed to 542 families at their IFSP six-month review in FFY 2019 and 305 families responded = 56.27%. Therefore, the respondent set accurately represents the larger group of infants, toddlers, and families enrolled in MT's Part C Program.

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

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

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 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 2018 SPP/APR**

MT's report of FFY 2019 response data and its representativeness is included in the textbox entitled, "Include the State's analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program."

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

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



## 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 compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

#### Data Source

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

#### Measurement

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

#### Instructions

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

Describe the results of the calculations and compare the results to the target and to national data. 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	1.33%

FFY	2014	2015	2016	2017	2018
Target >=	1.43%	1.43%	1.46%	1.46%	1.46%
Data	1.15%	1.07%	0.99%	1.19%	1.24%

### Targets

FFY	2019
Target >=	1.46%

### Targets: Description of Stakeholder Input

Stakeholder input for SPP/APR targets is obtained from the Part C Leadership Team made up of the contractor teams: directors, program managers, data managers, Family Support Specialists/Service Coordinators. Additional input is gathered from the State's ICC, the Family Support Services Advisory Council (FSSAC), and from State staff at the lead agency and bureau. The Part C Leadership Team and workgroups made up of regional contractor staff and State staff focusing upon SSIP improvement strategies such as the Child Outcomes Summary workgroup, Social-Emotional workgroup, Coaching workgroup also provide input regarding targets and the development and implementation of the SSIP.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	111
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	11,659

### FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
111	11,659	1.24%	1.46%	0.95%	Did Not Meet Target	Slippage

### Provide reasons for slippage, if applicable

Montana's current eligibility criterion excludes low birth weight babies or infants considered at-risk for neonatal abstinence syndrome unless the infant has an established condition or a measurable delay. Therefore, the State suspects these factors may contribute to few infants served in Part C early intervention. Child Find process and procedures will be further explored in the State's SSIP.

### Compare your results to the national data

Montana's results for FFY 2019 decreased (.29%) thus serving .95% of infants and toddlers, birth to one, with IFSPs compared to the national data, 1.5% of infants and toddlers, birth to one, with IFSPs.

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 compared to national data. (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 EDFacts 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 and compare the results to the target and to national data. 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	2.21%

FFY	2014	2015	2016	2017	2018
Target >=	2.14%	2.20%	2.20%	2.20%	2.25%
Data	2.23%	1.93%	2.34%	2.21%	2.28%

#### Targets

FFY	2019
Target >=	2.25%

#### Targets: Description of Stakeholder Input

Stakeholder input for SPP/APR targets is obtained from the Part C Leadership Team made up of the contractor teams: directors, program managers, data managers, Family Support Specialists/Service Coordinators. Additional input is gathered from the State's ICC, the Family Support Services Advisory Council (FSSAC), and from State staff at the lead agency and bureau. The Part C Leadership Team and workgroups made up of regional contractor staff and State staff focusing upon SSIP improvement strategies such as the Child Outcomes Summary workgroup, Social-Emotional workgroup, Coaching workgroup also provide input regarding targets and the development and implementation of the SSIP.

#### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	838
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	35,545

#### FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
838	35,545	2.28%	2.25%	2.36%	Met Target	No Slippage

#### Compare your results to the national data

Montana's results indicate a slight increase in FFY 2019 (.08%) thus serving 2.36% of infants and toddlers, birth to three, with IFSPs compared to the national data, 2.3% of infants and toddlers, birth to three, with IFSPs.

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

## 6 - Prior FFY Required Actions

None

**6 - OSEP Response**

**6 - Required Actions**

## Indicator 7: 45-Day Timeline

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	100.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.52%	93.09%	99.51%	99.51%	100.00%

### Targets

FFY	2019
Target	100%

### FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
558	644	100.00%	100%	100.00%	Met 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.

**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 was collected for the full reporting period: July 2019 - June 2020.

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

Data collected in the State's data management system which houses all IFSP data. To enhance the quality of the data entered, visual data prompts and validation procedures are embedded into the State's database and include

1. 45-day timeline countdown is depicted on both the pending initial IFSP and the message center for each service coordinator and his/her supervisor;
2. Prior to completion of the pending initial IFSP, the service coordinator is required to explain the reason for delay beginning on the 46th day; and
3. The date-stamp of the completed initial IFSP.

The State's database provides a report, the IFSP Status Report, which specifies the Part C initial IFSP completion status within the 45-day limit. All contractors have access to this report on-demand to support their ongoing monitoring efforts. If, during the data collection period for Indicator 7, records contain insufficient documentation to determine if the regulatory requirements were met, each contractor provides additional documentation supporting why the 45-day timeline did not apply due to attributable to exceptional family circumstances: dates of the multidisciplinary evaluation, child and family assessment, and initial IFSP meeting and case notes.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
22	0	22	0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The 10 findings identified in FFY 2017 and the 12 findings identified in FFY 2016 (22 records total) were verified as being corrected in FFY 2018. The narrative below for FFY 2017 and FFY 2016 include verification that each EIS provider with remaining noncompliance identified in FFY 2017 and FFY 2016 is 1) correctly implementing the specific regulatory requirements as they have achieved 100% compliance based on a review of updated data subsequently collected through monitoring; and 2) has corrected each individual case of noncompliance. The narrative below for FFY 2017 and FFY 2016 describes the specific actions taken to verify the correction.

**FFY 2016 Findings of Noncompliance Verified as Corrected:**

12 findings issued to 4 EIS providers in FFY 2016 were not timely corrected in FFY 2017. The State provided technical assistance and support to each of these 4 programs to ensure they understood the 45-day timeline and requested the programs make adjustments to their internal procedures to ensure correction. However, the State verified subsequent correction for these findings in FFY 2018. Specific information about each of the 4 EIS providers issued these findings is as follows:

EIS Provider: FFY 2016 Performance 194/196 = 99% met the target. 2/196 = 1% did not meet target. 2/196 records did not meet the timeline and did not include sufficient documentation collected in the State's data management system to determine the reason for delay. As a result, 2 findings were issued to this EIS provider in FFY 2016. Subsequent data collected (10 records) in FFY 2018 following identification of the two findings were 100% compliant with the regulatory requirements, indicating the EIS provider had subsequently corrected the findings and was correctly implementing the 45-day timeline requirements.

EIS Provider: FFY 2016 Performance 295/296 = 99% met target. 1/296 = .3% did not meet target. 1/296 records did not meet the timeline and did not include sufficient documentation collected in the State's data management system to determine the reason for delay. As a result, 1 finding was issued to this EIS provider in FFY 2016. Subsequent data collected (10 records) in FFY 2018 following identification of the single finding were 100% compliant with the regulatory requirements, indicating the EIS provider had subsequently corrected the findings and was correctly implementing the 45-day timeline requirements.

EIS Provider: FFY 2016 Performance 477/481 = 99% met target. 4/481 = .8% did not meet target. 4/481 records did not meet the timeline and did not include sufficient documentation collected in the State's data management system to determine the reason for delay. As a result, 4 findings were issued to this EIS provider in FFY 2016. Subsequent data collected (10 records) in FFY 2018 following identification of the four findings were 100% compliant with the regulatory requirements, indicating the EIS provider had subsequently corrected the findings and was correctly implementing the 45-day timeline requirements.

EIS Provider: FFY 2016 Performance 518/522 – 99% met target. 4/522 = .7% did not meet the target. 4/522 records did not meet the timeline and did not include sufficient documentation collected in the State's data management system to determine the reason for delay. As a result, 4 findings were issued to this EIS provider in FFY 2016. Subsequent data collected (10 records) in FFY 2018 following identification of the four findings were 100% compliant with the regulatory requirements, indicating the EIS provider had subsequently corrected the findings and was correctly implementing the 45-day timeline requirements.

**FFY 2017 Findings of Noncompliance Verified as Corrected:**

10 findings issued to 2 EIS providers in FFY 2017 were timely corrected in FFY 2018. Specific information about each of the 2 EIS providers that were issued these findings is as follows:

EIS Provider: FFY 2017 Performance 191/199 = 96% met the target. 8/199 = 4% did not meet target. 8/199 records did not meet the timeline and did not include sufficient documentation collected in the State's data management system to determine the reason for delay. Subsequent data collected (25 records) in FFY 2018 following identification of the eight findings were 100% compliant with the regulatory requirements, indicating the EIS provider had timely corrected the findings and was correctly implementing the 45-day timeline requirements.

EIS Provider: FFY 2017 Performance 499/501 = 99% met target. 2/501 = .4% did not meet target. 2/501 records did not meet the timeline and did not include sufficient documentation collected in the State's data management system to determine the reason for delay. Subsequent data collected (26

records) in FFY 2018 following identification of the two findings were 100% compliant with the regulatory requirements, indicating the EIS provider had timely corrected the findings and was correctly implementing the 45-day timeline.

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

The 10 findings identified in FFY 2017 and the 12 findings identified in FFY 2016 (22 records total) were verified as being corrected in FFY 2018. The narrative below for FFY 2017 and FFY 2016 include verification that each EIS provider with remaining noncompliance identified in FFY 2017 and FFY 2016 is 1) correctly implementing the specific regulatory requirements as they have achieved 100% compliance based on a review of updated data subsequently collected through monitoring; and 2) has corrected each individual case of noncompliance. The narrative below for FFY 2017 and FFY 2016 describes the specific actions taken to verify the correction.

**FFY 2016 Findings of Noncompliance Verified as Corrected:**

For each of the 12 individual cases of noncompliance identified in FFY 2016, the State reviewed each of the child’s records to verify that the initial evaluation and assessment and IFSP meeting was held, although late. Specific data for each program is as follows:

EIS Provider: A desk review of the two records revealed correction data: the two hard copy files contained additional documentation of exceptional family circumstances and the Part C Coordinator verified the initial IFSP meetings were completed on the 46th and 65th day respectively due to exceptional family circumstances.

EIS Provider: A desk review of the single record revealed correction data: the single hard copy file included documentation that the Service Coordinator received the child’s multidisciplinary evaluation and assessment from the Intake Coordinator on the 41st day and was not able to schedule the initial IFSP meeting until the 57th day due to the family’s schedule.

EIS Provider: A desk review of the four records revealed correction data: two hard copy files contained additional documentation that the multidisciplinary evaluation and assessment of the child were completed; however, the Service Coordinator had not completed the family information gathering within the timeline due to the family’s schedule. Following completion of the family information gathering, the initial IFSP meetings were held on the 47th and 60th day respectively. One hard copy file contained additional documentation that the Intake Coordinator had not entered the child’s demographic information into the State’s data management system leading to delay in scheduling the multidisciplinary evaluation and assessment of child and family and the initial IFSP meeting. The Service Coordinator completed the evaluation, assessments, and scheduled the initial IFSP meeting on the 69th day. One hard copy file included similar documentation: the Service Coordinator did not receive the child’s and family’s referral documentation until the 45th day. The Service Coordinator completed the multidisciplinary evaluation, child and family assessments and scheduled the initial IFSP meeting on the 77th day.

EIS Provider: A desk review of the four records revealed correction data: two hard copy files included documentation of the resignation of the initial Service Coordinator and the assignment of the new Service Coordinator within the 45-day timeline. The newly assigned Service Coordinator completed the multidisciplinary evaluation, assessments, and scheduled the initial IFSP meetings on the 57th and 76th days respectively. Two hard copy files included documentation of family illness leading to the completion of the multidisciplinary evaluation, assessments, and scheduling of the initial IFSP meetings on the 46th and 60th days respectively.

**FFY 2017 Findings of Noncompliance Verified as Corrected:**

For each of the individual cases of noncompliance, the State reviewed each of the child’s records to verify that the initial evaluation and assessment and IFSP meeting was held, although late. Specific data for each program is as follows:

EIS Provider: An interview with the agency director and a desk review of the eight records revealed correction data: the eight hard copy files contained additional documentation leading the agency director to issue corrective action plans to the two Service Coordinators which included training on the 45-day timeline regulatory requirement and additional supervisory oversight including subsequent data reviews. One individual resigned. The Part C Coordinator verified the multidisciplinary evaluations, assessments and initial IFSP meetings were completed on the 50th, 53rd, 58th, 61st, 62nd, 65th, 67th, 71st days respectively.

EIS Provider: A desk review of the two records revealed correction data: the two hard copy files contained additional documentation of exceptional family circumstances and the Part C Coordinator verified the initial IFSP meetings were completed on the 50th and 48th day respectively due to exceptional family circumstances.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**7 - Prior FFY Required Actions**

None

**7 - OSEP Response**

**7 - Required Actions**

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	97.50%	97.41%	98.47%	100.00%	100.00%



**Targets**

<b>FFY</b>	<b>2019</b>
Target	100%

**FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
412	424	100.00%	100%	100.00%	Met 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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**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 was collected from the full reporting period, July 1, 2019 – June 30, 2020.

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

Data was collected using the State database system from the following reporting tools:

- Part C Exit Report
- Part C Notification of Potentially Eligible Children Report
- Part C to B Transition Conferences Report
- Part B Service Referrals Report

Data management system was enhanced in FFY 2019 and captures IFSP Transition Plan data: steps, services, transition meetings, and timelines in addition to transition outcomes identified by the family. If a transition plan was not developed within the required timeline, including steps and services, the user is required to document reasons why the transition plan was not developed within the appropriate timelines and record within the system.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	0	4	0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

FFY 2017 Findings of Noncompliance Verified as Corrected

The 4 findings identified in FFY 2017 were verified as being corrected in FFY 2018. The narrative below for FFY 2017 include verification that the EIS provider with noncompliance identified in FFY 2017 is 1) correctly implementing the specific regulatory requirements as they have achieved 100% compliance based on a review of updated data subsequently collected through monitoring; and 2) has corrected each individual case of noncompliance. The narrative below for FFY 2017 describes the specific actions taken to verify the corrections.

4 findings issued to 1 EIS provider in FFY 2017 were not timely corrected until FFY 2018. The State provided technical assistance and support to the EIS program to ensure they understood the early childhood transition requirement: development of an IFSP with transition steps and services developed at least 90 days and no more than 9 months prior to the toddler's third birthday. Specific information about the EIS provider issued these findings is as follows:

EIS Provider: FFY 2017 Performance 36/40 = 90% met the target. 4/40 = 10% did not meet target. 2/40 (5%) records did not meet the timeline and did not include sufficient documentation collected in the State's data management system to determine the reason for delay. As a result, 4 findings were issued to the EIS provider in FFY 2018. Subsequent data collected (10 records) in FFY 2018 following identification of the findings were 100% compliant with the regulatory requirements, indicating the EIS provider had subsequently corrected the findings and was correctly implementing the regulatory requirements: the development of an IFSP with transition steps and services developed at least 90 days and no more than 9 months prior to the toddler's third birthday. 2/40 (5%) records were mistakenly identified as out of compliance. The two records were individuals who had entered the Part C program less than 90 days before his/her third birthday.

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

FFY 2017 Findings of Noncompliance Verified as Corrected

The 4 findings identified in FFY 2017 were verified as being corrected in FFY 2018. The narrative below for FFY 2017 include verification that the EIS

provider with noncompliance identified in FFY 2017 is 1) correctly implementing the specific regulatory requirements as they have achieved 100% compliance based on a review of updated data subsequently collected through monitoring; and 2) has corrected each individual case of noncompliance. The narrative below for FFY 2017 describes the specific actions taken to verify the corrections.

For each of the 4 individual cases of noncompliance identified in FFY 2017, the State reviewed each of the child's records to verify that an IFSP was developed with transition steps and services, although late. Specific data for the program is as follows:

EIS Provider: A desk review of the four records revealed correction data: the four hard copy files contained additional documentation. Two of the four records revealed transition plans developed less than 90 days before the children turned three. The Part C Coordinator verified that the transition plans within the IFSPs were developed on the 82nd and 75th days respectively. The agency supervisor provided additional resources and increased monitoring of the Service Coordinator's caseload to ensure subsequent records were 100% compliant with the regulatory requirements. The remaining two records revealed two individuals who entered the Part C program less than 90 days before the individuals' third birthday: therefore, 100% compliant with the regulatory requirements. The Service Coordinator and family members developed initial IFSPs that included transition plans focused on transition conferences and referrals to Part B.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**8A - Prior FFY Required Actions**

None

**8A - OSEP Response**

**8A - Required Actions**

## 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:

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	100.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	96.43%	100.00%	100.00%	100.00%

**Targets**

<b>FFY</b>	<b>2019</b>
Target	100%

**FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
403	424	100.00%	100%	100.00%	Met Target	No Slippage

**Number of parents who opted out**

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

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

Data was collected using the State's database system from the following reporting tools:

- 1) Part C Exit Report;
- 2) Part C Notification of Potentially Eligible Children Report;
- 3) Part C to B Transition Conferences Report;
- 4) Part B Service Referrals Report.

**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 were collected for the full reporting period, July 1, 2019 through June 30, 2020.

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

The five EIS providers and the Part C Coordinator engage in ongoing monitoring of the process and procedure to validate the data using the State's system reporting features (reports identified above in "method used to collect data"). The five EIS providers engage in ongoing monitoring of individual Service Coordinators' caseloads to ensure and validate notifications are completed at least 90 days prior to a child's third birthday as documented in case management notes and within the State's database.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

**FFY 2015 Findings of Noncompliance Verified as Corrected**

The 2 findings identified in FFY 2015 were verified as being corrected in FFY 2018. The narrative below for FFY 2015 include verification that the EIS provider with noncompliance identified in FFY 2015 is 1) correctly implementing the specific regulatory requirements as they have achieved 100% compliance based on a review of updated data subsequently collected through monitoring; and 2) has corrected each individual case of noncompliance. The narrative below for FFY 2015 describes the specific actions taken to verify the corrections.

2 findings issued to 1 EIS provider in FFY 2015 were not timely corrected in FFY 2016. The State provided technical assistance and support to the program to ensure they understood the regulatory requirement: notified (consistent with any opt-out policy adopted by the State) the SEA and the 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. The State requested the program make adjustments to their internal procedures to ensure correction. However, the State verified subsequent correction for these findings in FFY 2018. Specific information about the provider issued the findings is as follows:

EIS Provider : FFY 2015 Performance 128/130 = 98% met the target. 2/130 = 2% did not meet target. 2/130 records did not meet the timeline where notification (consistent with the 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. The two records did not include sufficient documentation to determine the reason for delay in

notification in the State's database system. As a result, 2 findings were issued to this EIS provider in FFY 2016. Subsequent data collected (10 records) in FFY 2018 following identification of the two findings were 100% compliant with the regulatory requirements, indicating the EIS provider had subsequently corrected the findings and was correctly implementing the notification timeline requirements.

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

**FFY 2015 Findings of Noncompliance Verified as Corrected**

The 2 findings identified in FFY 2015 were verified as being corrected in FFY 2018. The narrative below for FFY 2015 include verification that the EIS provider with noncompliance identified in FFY 2015 is 1) correctly implementing the specific regulatory requirements as they have achieved 100% compliance based on a review of updated data subsequently collected through monitoring; and 2) has corrected each individual case of noncompliance. The narrative below for FFY 2015 describes the specific actions taken to verify the corrections.

For each of the 2 individual cases of noncompliance identified in FFY 2015, the State reviewed each of the child's records to verify that notification had occurred. Specific data for the program is as follows:

EIS Provider: A desk review of the two records revealed correction data: the two hard copy files contained additional documentation that the Service Coordinator had generated her own notification documentation to a specific LEA rather than completing the LEA and SEA notifications required for all notifications in the State's database system. The two individuals were no longer within the jurisdiction of the EIS provider as they had successfully transitioned to Part B services. The EIS provider's Service Coordinators and administrative team participated in SEA and LEA Notifications training provided by the Part C Coordinator targeting the required use of the State's database system' notification functions to generate notifications to the SEA and LEA thereby providing documentation of subsequent records were 100% compliant with the regulatory requirements.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**8B - Prior FFY Required Actions**

None

**8B - OSEP Response**

**8B - Required Actions**

## 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 SEA and the 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 =  $\left[ \frac{\text{\# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday}}{\text{\# of toddlers with disabilities exiting Part C}} \right] \times 100$ .

B. Percent =  $\left[ \frac{\text{\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services}}{\text{\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B}} \right] \times 100$ .

C. Percent =  $\left[ \frac{\text{\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B}}{\text{\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B}} \right] \times 100$ .

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	100.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

**Targets**

<b>FFY</b>	<b>2019</b>
Target	100%

**FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
304	373	100.00%	100%	96.16%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

14 families during the reporting period, July 1, 2019 - June 30, 2020, were unable to participate in timely transition conferences with the LEAs as local school districts and special education cooperatives initially struggled to provide and use alternative methods for holding Part C to B transition conferences at the onset of the pandemic.

**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.

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**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.

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**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 from the full reporting period, July 1, 2019 through June 30, 2020.

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

The five EIS providers and the Part C Coordinator engage in ongoing monitoring of the process and procedure using the State's system reporting features:

1. Part C Exit Report
2. Part C Notification of Potentially Eligible Children Report
3. Part C to B Transition Conferences Report
4. Part B Service Referrals Report

The five EIS providers engage in ongoing monitoring of individual Service Coordinators' caseloads to ensure and validate transition conferences are completed at least 90 days prior to a child's third birthday (not more than 9 months) as documented in case management notes and within the State's database.

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

Data for Indicator 8C was impacted specifically by COVID-19. Montana identified 14 toddlers and their families who did not participate in a transition conference with the LEA within the required timelines due to the inability to schedule a transition conference with the LEA during the pandemic. The data as captured for Indicator 8C is valid, reliable, and complete with the exception that Montana is noncompliant with the regulatory requirements due to the inability to schedule the transition conferences with the LEA. The five regional contractors, with the family members' permission, provided transition information to the LEA such as the toddlers' most recent plans of care, Child Outcomes Summary documentation, and other pertinent information the families desired to share with the LEA using secure means of electronic transfer to the LEA. Montana's school districts have made significant progress since spring 2020 in accommodating virtual means for transition conferences and developing means to meet in person using masks and distancing.

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**8C - Prior FFY Required Actions**

None

**8C - OSEP Response**

**8C - Required Actions**



## 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 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 EDFacts 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.**

Montana adopted Part C due process procedures under section 639 of the IDEA.

### 9 - Prior FFY Required Actions

None

### 9 - OSEP Response

### 9 - Required Actions

## 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 =  $((2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1) \text{ times } 100$ .

#### Instructions

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

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

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

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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/04/2020	2.1 Mediations held	0
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/04/2020	2.1.a.i Mediations agreements related to due process complaints	0
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/04/2020	2.1.b.i Mediations agreements not related to due process complaints	0

#### Targets: Description of Stakeholder Input

Stakeholder input for SPP/APR targets is obtained from the Part C Leadership Team made up of the contractor teams: directors, program managers, data managers, Family Support Specialists/Service Coordinators. Additional input is gathered from the State's ICC, the Family Support Services Advisory Council (FSSAC), and from State staff at the lead agency and bureau. The Part C Leadership Team and workgroups made up of regional contractor staff and State staff focusing upon SSIP improvement strategies such as the Child Outcomes Summary workgroup, Social-Emotional workgroup, Coaching workgroup also provide input regarding targets and the development and implementation of the SSIP.

#### Historical Data

Baseline Year	Baseline Data
2005	

FFY	2014	2015	2016	2017	2018
Target>=					
Data					

#### Targets

FFY	2019
Target>=	

#### FFY 2019 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
		0				N/A	N/A

Provide additional information about this indicator (optional)

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

**10 - 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**

Designated 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:**

Wendy Studt

#### **Title:**

Part C Coordinator

#### **Email:**

wstudt@mt.gov

#### **Phone:**

4064 444 5647

#### **Submitted on:**

02/01/21 10:23:31 AM