

**State Performance Plan / Annual Performance Report:
Part C**

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

**For reporting on
FFY18**

California



PART C DUE February 3, 2020

**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 U.S. Department of Education Office of Special Education Programs (OSEP) requires each state to submit the Part C of the Individuals with Disabilities Education Act (IDEA) State Performance Plan (SPP)/Annual Performance Report (APR). Part C of IDEA is commonly referred to as Early Start in the State of California. This APR for federal fiscal year (FFY) 2018 represents data covering the period from July 1, 2018, through June 30, 2019. It provides OSEP with information on the progress of California's Early Start program in meeting the established targets for each of the indicators listed in its SPP/APR.

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.

California monitors the implementation of Part C Early Intervention Services provided in California through the Early Start programs at Regional Centers (RCs) and Local Educational Agencies (LEAs). The primary focus of State monitoring activities is on improving results and functional outcomes for all children with disabilities, and ensuring that local programs meet all Part C requirements.

The Department of Developmental Services (DDS) monitors RCs using quantifiable indicators in each of the priority areas specified by the OSEP. DDS conducts on-site program monitoring on a three year cycle, and reviews a random selection of records during the Part C on-site review.

Compliance monitoring for the Early Start programs at the LEAs is addressed by the California Department of Education (CDE) Special Education Division's Quality Assurance Process (QAP). The QAP addresses non compliance and time lines for corrective actions. Through subsequent reviews, DDS and CDE verify the correction of non compliance on all findings at both the individual and systemic level within a year of notification to the RC or LEA, consistent with OSEP Memo 09-02.

As part of the General Supervision requirements, California's dispute resolution process is available to address disagreements between parents and the service system. At any time, parents have the right to request a due process hearing, a mediation conference, or file a state complaint to resolve disagreements related to Early Start services or allegations that a federal or state statute or regulation has been violated. The court appointed administrative law judge or complaint investigator may identify non compliance during an investigation or hearing. If non compliance has been identified, DDS and CDE verify the correction of findings derived from the dispute resolution process to ensure that decisions rendered are implemented at the local level through the RCs or LEAs.

Technical Assistance System:

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

The State identifies the need to provide technical assistance (TA) through on-going monitoring activities, results of dispute resolution activities, and regular review of information contained in data collection systems. These methods allow for the provision of targeted and/or statewide assistance as needed. TA is provided in a variety of ways and may include State and/or contractors in the delivery of assistance.

TA is available upon request and on-going assistance is provided on various topics.

Additionally, the State provides TA on topics relevant to Early Start at the regional Early Start supervisor meetings and the Association of Regional Center Agencies Early Start Discipline Group. Staff also provides TA during the monitoring process by assisting local programs with identifying the root cause of noncompliance and the required follow up activities. California regularly provides TA on Early Start program requirements to the University of California, Center for Excellence on Developmental Disabilities' California Early Start Support Network. This group is comprised of Early Intervention Service providers, including LEAs, and early childhood personnel from DDS and CDE.

In addition, pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), California utilized many opportunities to receive TA in FFY 2018 on topics specific to the APR/SPP and State Systemic Improvement Plan (SSIP). Staff participated in webinars and training, and utilized resources made available from the following sources: OSEP, the Individual with Disabilities Education Act (IDEA) Data Center, the Center for IDEA Early Childhood Data Systems (DaSy), National Center for Systemic Improvement (NCSI), the Early Childhood Technical Assistance Center (ECTA), and WestEd. As a result of receiving TA, the following occurred:

- OSEP and NCSI resources were utilized in moving regional centers from SSIP implementation toward SSIP sustainability activities;
- ECTA-DaSy resources were utilized to examine and improve Family Survey dissemination;
- ECTA and WestEd technical assistance resulted in corrections made regarding child outcomes for Indicator 3. The data reported in this year's report more accurately reflects the progress infants and toddlers made during their time receiving services in the Early Start Program. Specific data programming detail is provided in the additional comments section of Indicator 3; and
- DaSy guidance began with stakeholder discussions in July of 2018 to explore the possibilities of enhancing the functionalities of the current Early Start Data system. Discussions were focused on the improvement of accountability and child outcomes; these collaborations are expected to continue in the upcoming year.

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.

The Early Start Training and Technical Assistance Development Leadership Group, comprised of DDS, CDE, and WestEd staff, convened regularly to address on-going development and implementation of the multi-modal personnel development system. Components of the Early Start Personnel Development System include:

- Early Start Online: The courses on this web-based, interactive training platform address foundational and advanced knowledge-level content. Ongoing facilitation by parent-professional teams expands the expertise and perspectives available to online training participants, maintains participant satisfaction with training experiences, and supports participant course completion. Pre- and post-training assessments validate increases in knowledge levels for training participants. Participation in and feedback on Early Start Online is consistently high and positive. Impact survey results validate integration of increased knowledge into work at the individual level for Early Start Online participants. Early Start Online consists of two course series: Foundations and Skill Base.

The full Early Start Online Foundations Series consists of three Foundations courses:

1. Foundations: Understanding Systems, Processes and Practices
 - Family Systems
 - Early Start System
 - Utilizing Evidence-Based Practice
 - Individual Family Service Plan (IFSP) Development
 - Supporting Families Using Coaching and Other Help--Giving Practices
2. Foundations: Working through the IFSP Process
 - Early Child Development
 - Screening, Evaluation, and Assessment
 - Creating Functional Outcomes
 - Natural Environments for Families
 - Selecting and Developing Interventions
3. Foundations: Partnering for Effective Service Delivery
 - Working with Diverse Families
 - Relationship--Based Early Intervention
 - Quality Assurance in Early Intervention
 - Transition Planning
 - Collaboration with the Early Start Team and Community Resources

The Early Start Skill Base Series includes courses that address development and intervention within specific developmental domains or disability conditions. Each Skill Base course includes five lessons addressing similar content areas but with a focus on a specific domain. There are five Skill Base courses, on sensory processing, social/emotional, communication, cognitive and adaptive development.

In addition, a non-facilitated open access version of the Skill Base course on social and emotional development is available to Early Start stakeholders to support attainment of California's State Identified Measurable Result under California's SSIP.

The roles reported most frequently by participants who completed the courses are early intervention direct service providers (40 percent; from both LEAs and RC-vendored programs) and Early Start service coordinators (24 percent). Agencies reported most frequently by participants who completed the courses are regional center (24 percent), regional center vendor (24 percent), or a local education agency/infant program (22 percent).

Early Start Effective Practice Training Activities: Live trainings, online modules and real-time webinars on special, possibly one-time topics, are conducted to offer timely communication to the field on issues critical to Early Start implementation.

The Early Start Partners Symposium (ESPS) is an annual Effective Practice training event supporting Early Start multi-disciplinary personnel and cross sector partners with skills and resources to serve children and families in communities throughout California. The development of the ESPS is a collaborative process, led by DDS, involving the participation of training and technical assistance providers representing the partner state agencies as well as regional center, regional center vendor, local educational agency, and family resource center stakeholders from all regions of the state. General sessions focused on approaches for working with diverse families and breakout session content focused on building provider capacity to implement early intervention services, support social and emotional development and address other critical topics as identified by Early Start practitioners participating on the planning group of stakeholders. The ESPS is highly anticipated and very well-attended each year. Evaluation feedback was very positive in this fiscal year.

Early Start Attendance Scholarships and Training Grants: Scholarships continue to be available to individual Early Start personnel to encourage them to attend Early Start training events to enhance their qualifications and competencies to provide quality services. Early Start Training Grants were available to support regional centers to support their SSIP implementation activities.

Early Start Neighborhood: The Neighborhood is a web-based community designed to inform and connect Early Start personnel with timely news and resources focusing on evidence-based practices in early intervention. In addition, the Early Start Neighborhood supports the state-identified measurable result under California's SSIP. Features include:

- Weekly blog posts that highlight state and federal initiatives of interest to the Early Start community, including those related to California SSIP priorities.
- Resources for Early Start professionals, including the Early Start Service Coordination Handbook and similar job-related publications, which are located and available for download from the Neighborhood.
- All SSIP resources developed for the implementation of the SSIP on social and emotional development are located and available for download from the Neighborhood.

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's Systemic Improvement Plan (SSIP).

Input on current and future (FFY 19/20) targets included in this APR, including those associated with California's SSIP, were provided by the State's broad and diverse Interagency Coordinating Council (ICC) which includes parents, professionals providing services to infants and toddlers, as well as State departments involved in the provision of services for infants and toddlers. In California, the ICC also benefits from the participation of community representatives, which increases the diversity of perspectives presented.

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 2017 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 2017 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 2017 APR in 2019, is available.

The FFY 2017 performance of each local program is posted at the following link: https://www.dds.ca.gov/wp-content/uploads/2019/05/EarlyStart_LocalPerf2017.pdf. The State's 2017 APR/SPP is available at the following link: https://www.dds.ca.gov/wp-content/uploads/2019/08/EarlyStart_PerformanceReport2017.pdf.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

The State's determinations for both 2018 and 2019 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 18, 2019 determination letter informed the State that it must report with its FFY 2018 SPP/APR submission, due February 3, 2020, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

States were instructed to submit Phase III, Year Four, of the State Systemic Improvement Plan (SSIP), indicator C-11, by April 1, 2020. The State provided the required information. The State provided a target for FFY 2019 for this indicator, and OSEP accepts the target.

Intro - Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State's capacity to improve its SiMR data.

OSEP notes that one or more of the attachments included in the State's FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

The State's IDEA Part C determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

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 2018 SPP/APR, the data for FFY 2017), 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	2005	91.50%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	85.04%	82.05%	88.84%	78.45%	82.15%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
219	280	82.15%	100%	82.86%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

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).

California defines timeliness as early intervention service (EIS) identified on an infant or toddler’s IFSP starting as soon as possible, but no later than 45 days after the parent(s) provides consent for the service.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

DDS conducts on-site reviews of a cohort of RC Early Start programs each year as part of a three-year monitoring cycle. DDS conducted seven on-site reviews during FFY 2018. The sample of records reviewed is random and based on the population served. CDE data is derived from monitoring for infants and toddlers served with solely low incidence (SLI) disabilities in FFY 2018.

If needed, provide additional information about this indicator here.

Reasons for Delay

There were various reasons for delay including: Service provider availability (e.g. rural locations, language capabilities etc.), and administrative issues.

Correction of Findings of Noncompliance Identified in FFY 2017

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	20	2	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

In order to verify the correction of noncompliance, California confirms that the identified EIS were provided, although late for any child whose services did not occur in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In addition, California ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent review of records is in 100% compliance as soon as possible, but in no case later than one year from identification of noncompliance. This is the process used by California to clear all findings of noncompliance, including those findings cleared prior to the issuance of the report.

Of the twenty-two findings of noncompliance identified in FFY 2017, six findings were identified by DDS and the remaining sixteen findings were identified by CDE. The outcomes of these findings are broken down in the following two sections below:

Findings identified by DDS

In addition to the above, DDS notifies the RC, in writing, of the noncompliance. A root cause analysis for all outstanding findings is completed by the RC, with assistance from DDS, to determine the actions necessary to ensure compliance. These actions are documented in a plan of correction and submitted to DDS. DDS ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent verification review as soon as possible.

Six of the twenty-two findings identified in FFY 2017 were identified at RCs by DDS. DDS completed a verification review at the RCs with outstanding findings from FFY 2017. DDS verified that four of the six RCs are correctly implementing the specific regulatory requirements in 34 Code of Federal Regulations (CFR), §§ 303.342(e), and 303.344(f)(1), and are in 100% compliance within the required timeline. Following additional subsequent reviews, DDS verified that the two remaining RCs are correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.342(e), and 303.344(f)(1), and are in 100% compliance, however outside the required timeline.

Findings identified by CDE

CDE requires a stringent level of follow-up review and reporting in districts with identified noncompliance related to this indicator. The CDE ensures LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures and practices, providing staff training, and by reviewing a new sample of student records for each district-level finding. District-level corrective actions are given a timeline of three months. For all findings, correction must be completed as soon as possible but, in no case later than one year.

CDE issued the remaining sixteen findings identified on this indicator that were verified as corrected within the required timeline. CDE verified that each LEA with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.342(e), and 303.344(f)(1), and are in 100% compliance.

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

For each individual finding identified, DDS or CDE confirmed that all EIS were provided, although late for all children whose services did not occur in a timely manner, unless the child is no longer within the jurisdiction of the EIS program.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

None

1 - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified by DDS in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

The State must demonstrate, in the FFY 2019 SPP/APR, that the six findings identified by DDS in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

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	2005	72.09%			
FFY	2013	2014	2015	2016	2017
Target>=	86.41%	86.41%	87.00%	87.50%	88.00%
Data	93.60%	94.15%	93.24%	91.34%	95.62%

Targets

FFY	2018	2019
Target>=	88.50%	89.00%

Targets: Description of Stakeholder Input

Input on current and future (FFY 19/20) targets included in this APR, including those associated with California's SSIP, were provided by the State's broad and diverse Interagency Coordinating Council (ICC) which includes parents, professionals providing services to infants and toddlers, as well as State departments involved in the provision of services for infants and toddlers. In California, the ICC also benefits from the participation of community representatives, which increases the diversity of perspectives presented.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	47,067
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Total number of infants and toddlers with IFSPs	50,175

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
47,067	50,175	95.62%	88.50%	93.81%	Met Target	No Slippage

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

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)

YES

Targets: Description of Stakeholder Input

Input on current and future (FFY 19/20) targets included in this APR, including those associated with California's SSIP, were provided by the State's broad and diverse Interagency Coordinating Council (ICC) which includes parents, professionals providing services to infants and toddlers, as well as State departments involved in the provision of services for infants and toddlers. In California, the ICC also benefits from the participation of community representatives, which increases the diversity of perspectives presented.

Will your separate report be just the at-risk infants and toddlers or aggregated performance data on all of the infants and toddlers it serves under Part C?

Aggregated Performance

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A1	2013	Target >=	44.32%	44.32%	44.32%	45.00%	47.00%
A1	44.32%	Data	44.32%	46.54%	46.15%	46.93%	48.24%
A1 ALL	2015	Target >=			44.32%	45.00%	47.00%
A1 ALL	46.19%	Data			46.19%	47.12%	49.29%
A2	2013	Target >=	65.88%	65.88%	65.88%	66.00%	66.50%
A2	65.88%	Data	65.88%	67.74%	67.13%	67.75%	68.90%
A2 ALL	2015	Target >=			65.88%	66.00%	66.50%
A2 ALL	67.14%	Data			67.14%	67.83%	69.11%
B1	2013	Target >=	49.53%	49.53%	49.53%	50.00%	50.50%
B1	49.53%	Data	49.53%	50.55%	50.87%	50.53%	50.78%
B1 ALL	2015	Target >=			49.53%	50.00%	50.50%
B1 ALL	50.92%	Data			50.92%	50.60%	50.98%
B2	2013	Target >=	52.23%	52.23%	52.23%	53.00%	53.50%
B2	52.23%	Data	52.23%	54.03%	54.39%	54.91%	56.23%
B2 ALL	2015	Target >=			52.23%	53.00%	53.50%
B2 ALL	54.44%	Data			54.44%	55.01%	56.39%
C1	2013	Target >=	37.85%	37.85%	37.85%	38.50%	39.00%
C1	37.85%	Data	37.85%	39.31%	39.26%	39.11%	38.94%
C1 ALL	2015	Target >=			37.85%	38.50%	39.00%
C1 ALL	39.30%	Data			39.30%	39.39%	40.10%
C2	2013	Target >=	61.83%	61.83%	61.83%	62.00%	62.50%
C2	61.83%	Data	61.83%	63.56%	62.81%	63.76%	63.71%
C2 ALL	2015	Target >=			61.83%	62.00%	62.50%
C2 ALL	62.82%	Data			62.82%	63.85%	63.80%

Targets

FFY	2018	2019
Target A1 >=	49.00%	49.50%
Target A1 ALL >=	49.00%	49.50%
Target A2 >=	67.00%	67.50%
Target A2 ALL >=	67.00%	67.50%
Target B1 >=	51.00%	51.50%
Target B1 ALL >=	51.00%	51.50%
Target B2 >=	54.00%	54.50%
Target B2 ALL >=	54.00%	54.50%
Target C1 >=	39.50%	40.00%
Target C1 ALL >=	39.50%	40.00%
Target C2 >=	63.00%	63.50%
Target C2 ALL >=	63.00%	63.50%

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

25,080

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

Not including at-risk infants and toddlers	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	1,385	5.79%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3,133	13.10%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	2,980	12.46%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	5,868	24.54%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	10,548	44.11%

Just at-risk infants and toddlers/All infants and toddlers	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	1,394	5.56%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3,456	13.78%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	2,983	11.89%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	6,468	25.79%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	10,779	42.98%

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	8,848	13,366	48.24%	49.00%	66.20%	Met Target	No Slippage

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
turned 3 years of age or exited the program							
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	16,416	23,914	68.90%	67.00%	68.65%	Met Target	No Slippage

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	9,451	14,301	49.29%	49.00%	66.09%	Met Target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	17,247	25,080	69.11%	67.00%	68.77%	Met Target	No Slippage

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

Not including at-risk infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	649	2.71%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3,639	15.22%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	6,218	26.00%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	7,796	32.60%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	5,612	23.47%

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	657	2.62%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	4,104	16.36%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	6,224	24.82%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	8,351	33.30%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	5,744	22.90%

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	14,014	18,302	50.78%	51.00%	76.57%	Met Target	No Slippage

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
they turned 3 years of age or exited the program							
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	13,408	23,914	56.23%	54.00%	56.07%	Met Target	No Slippage

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	14,575	19,336	50.98%	51.00%	75.38%	Met Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	14,095	25,080	56.39%	54.00%	56.20%	Met Target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Not including at-risk infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	1,432	5.99%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	4,257	17.80%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	3,089	12.92%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	4,798	20.06%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	10,338	43.23%

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	1,448	5.77%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	4,706	18.76%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	3,093	12.33%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	5,329	21.25%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	10,504	41.88%

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	7,887	13,576	38.94%	39.50%	58.10%	Met Target	No Slippage

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	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	15,136	23,914	63.71%	63.00%	63.29%	Met Target	No Slippage

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	8,422	14,576	40.10%	39.50%	57.78%	Met 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	15,833	25,080	63.80%	63.00%	63.13%	Met Target	No Slippage

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

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	43,506
The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.	9,050

	Yes / No
Was sampling used?	NO

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

NO

Provide the criteria for defining "comparable to same-aged peers."

Children were considered comparable to same-aged peers if their functional age in a given developmental domain was within 25 percent of their chronological age.

Beyond the use of standard evaluation tools specific to each licensed professional, informed clinical judgment was one of several key principles employed for determining functional levels and, therefore, child progress/outcomes. RC and contracted clinicians also used: (1) formal assessment techniques and instruments; (2) direct informal observations of the child; (3) review of all pertinent records; and, (4) parent/caregiver interview or discussion.

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

Data for this indicator is gathered by the California Department of Developmental Services (DDS) and the California Department of Education (CDE). DDS' Early Start Report captures OSEP required data elements for children, including those with high risk conditions, assessed in all child outcome areas, served by all 21 regional centers. CDE's data is gathered via the Desired Results Developmental Profile and includes all infants and toddlers with SLI disabilities assessed in all child outcome areas.

Provide additional information about this indicator (optional)

Of note this year, corrections were made to the calculations regarding child outcomes for this indicator. As a result, the data in this report more accurately reflects the progress infants and toddlers made during their time receiving services in the Early Start Program. More specifically, prior data programming for the five progress categories (see below) under-represented the number of children whose rate of growth increased (Category C) and over-represented the number of children who both entered and exited the program functioning at a level comparable to their peers.

Category A--Infants and toddlers whose functional age declined or remained unchanged.

Category B--Infants and toddlers who increased functional age but whose rate of growth remained the same or declined.

Category C--Infants and toddlers who increased functional age and whose rate of growth increased, although still not functioning at a level comparable to their peers.

Category D--Infants and toddlers who increased functional age and are now functioning at a level comparable to their peers.

Category E--Infants and toddlers who entered and exited the program functioning at a level comparable to their peers.

3 - Prior FFY Required Actions

None

3 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

Report the number of families to whom the surveys were distributed.

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

	Baseline	FFY	2013	2014	2015	2016	2017
A	2005	Target>=	70.00%	70.00%	70.00%	70.00%	70.00%
A	48.00%	Data	75.37%	78.00%	78.74%	80.97%	80.70%
B	2005	Target>=	80.00%	80.00%	80.00%	80.00%	80.00%
B	42.00%	Data	81.18%	82.21%	87.00%	83.71%	83.91%
C	2005	Target>=	75.00%	75.00%	75.00%	75.00%	75.00%
C	71.00%	Data	76.66%	78.26%	86.00%	81.62%	81.89%

Targets

FFY	2018	2019
Target A>=	70.00%	70.50%
Target B>=	80.00%	80.50%
Target C>=	75.00%	75.50%

Targets: Description of Stakeholder Input

Input on current and future (FFY 19/20) targets included in this APR, including those associated with California's SSIP, were provided by the State's broad and diverse Interagency Coordinating Council (ICC) which includes parents, professionals providing services to infants and toddlers, as well as State departments involved in the provision of services for infants and toddlers. In California, the ICC also benefits from the participation of community representatives, which increases the diversity of perspectives presented.

FFY 2018 SPP/APR Data

The number of families to whom surveys were distributed	9,681
Number of respondent families participating in Part C	2,207
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,748
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	2,196
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	1,826
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	2,190
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	1,811
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	2,194

	FFY 2017 Data	FFY 2018 Target	FFY 2018 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)	80.70%	70.00%	79.60%	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)	83.91%	80.00%	83.38%	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)	81.89%	75.00%	82.54%	Met Target	No Slippage

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

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

California continues to employ an adapted version of the Family Outcomes Survey (FOS Revised Part C, 2010)[1] to gather and analyze Indicator 4 data for FFY 2018. The survey includes seventeen questions and allows the State to compile accurate data with regard to early intervention services. The questions were designed to be easy to understand, and are aligned with Indicator 4 sub-indicators, A, B, and C.

The State employed Dillman's Tailored Design Method (2009) [2] for the most recent survey distribution and collection. Packets were mailed to families in October 2019 and included cover letters, surveys in English and Spanish, and a self-addressed return envelope, parents were also given an online completion option. For families with children served by LEAs only, the surveys were made available in an online format.

Descriptive statistics (means, frequencies, percentages and standard deviations) were employed to analyze the responses to the seventeen Indicator 4 survey items within the three target areas.

[1] Bailey, D.B., Hebbler, K., & Bruder, M.B. (2006). Family Outcomes Survey. Retrieved October 18, 2009 from, <http://www.fpg.unc.edu/~eco/pages/tools.cfm#SurveyVersions>.

[2] Dillman, D., Smythe, J., & Christian, M. (2009). Internet, Mail and Mixed-Mode Surveys: The Tailored Design Method. New York: John Wiley & Sons, Inc.

	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.

California achieved a return rate from the total un-stratified surveys to yield a 90 percent confidence level overall, with a 1.8 percent margin of error. When delineated by ethnicity, results indicate that the Hispanic, African

American, Asian, White and 2 or More Races subgroups achieved response rates yielding a 90 percent confidence level with margins of error ranging from 4.2 to 4.7 percent. Because last year's survey return rate was not representative for the Native American population (which is 0.2 percent of the overall population of infants and toddlers served) surveys were sent to all Native American families for this year's survey, and the return rate yielded a 90 percent confidence level with a 15.7 percent margin of error.

Provide additional information about this indicator (optional)

4 - Prior FFY Required Actions

None

4 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

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	2013	0.79%			
FFY	2013	2014	2015	2016	2017
Target >=	0.79%	0.80%	0.81%	0.82%	0.83%
Data	0.79%	0.83%	0.93%	1.07%	1.08%

Targets

FFY	2018	2019
Target >=	0.84%	1.09%

Targets: Description of Stakeholder Input

Input on current and future (FFY 19/20) targets included in this APR, including those associated with California's SSIP, were provided by the State's broad and diverse Interagency Coordinating Council (ICC) which includes parents, professionals providing services to infants and toddlers, as well as State departments involved in the provision of services for infants and toddlers. In California, the ICC also benefits from the participation of community representatives, which increases the diversity of perspectives presented.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 1 with IFSPs	3,023
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 1	477,320

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
3,023	477,320	1.08%	0.84%	0.63%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

The prepopulated Child Count Data is incorrect. Although California updated the FFY 2018-19 Child Count Data during the 2019 clarification period, the updated data is not reflected above. It was determined by OSERS that a Data Note will be added to the Part C Child Count Data Report stating: "The correct number of infants (birth to 1) served by California in FY 2018-19 is 5,105." Using the correct number (5,105) of infants and toddlers from birth to 1 with IFSPs, California served 1.07 percent (5,105/477,320) of infants birth to 1 in FFY 2018. The difference of .01% from FFY 2017 does not constitute slippage.

Compare your results to the national data

California met the measurable and rigorous targets for this indicator. FFY 2018 data indicate that 1.07 percent of infants, ages birth to 1, were served. This figure is .18 percent below the national average of 1.25 percent.

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

The State provided alternate data in the narrative for this indicator. These data are not consistent with the IDEA Part C Child Count and Settings data it submitted in EDFacts on March 25, 2019. The State submitted an updated data quality report and data through the system used to communicate with OSEP about data quality; however, the State did not submit the updated data into the EMAPS system, as required by the EDFacts data instructions, prior to the resubmission period ending on July 10, 2019.

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	2005	1.99%			
FFY	2013	2014	2015	2016	2017
Target >=	2.20%	2.20%	2.20%	2.20%	2.20%
Data	2.30%	2.45%	2.68%	2.94%	3.18%

Targets

FFY	2018	2019
Target >=	2.20%	2.70%

Targets: Description of Stakeholder Input

Input on current and future (FFY 19/20) targets included in this APR, including those associated with California's SSIP, were provided by the State's broad and diverse Interagency Coordinating Council (ICC) which includes parents, professionals providing services to infants and toddlers, as well as State departments involved in the provision of services for infants and toddlers. In California, the ICC also benefits from the participation of community representatives, which increases the diversity of perspectives presented.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 3 with IFSPs	50,175
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 3	1,446,871

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
50,175	1,446,871	3.18%	2.20%	3.47%	Met Target	No Slippage

Compare your results to the national data

California met the measurable and rigorous targets for this indicator. FFY 2018-19 data indicate that 3.47 percent of infants and toddlers, ages birth to 3, were served. This figure is .01 percent below the national average of 3.48 percent.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

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 2018 SPP/APR, the data for FFY 2017), 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	2005	90.43%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	86.14%	82.05%	85.54%	78.80%	86.87%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
198	280	86.87%	100%	78.21%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

FFY 2018 data indicate 78.21 percent of the children had the initial evaluation, assessment, and an Initial IFSP meeting conducted within the 45-day timeline (219 divided by 280 times 100 equals 78.21 percent). This figure represents slippage from FFY 2017 of 8.66 percent.

The majority of findings on this indicator were identified at two local programs. If the results from these two programs were excluded, performance on this indicator would be at 91 percent. The State has provided targeted technical assistance for these two local programs and are confident that with the increased monitoring and support, the performance on this indicator will improve.

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 monitoring

Describe the method used to select EIS programs for monitoring.

DDS conducts on-site reviews of a cohort of RC Early Start programs each year as part of a three-year monitoring cycle. DDS conducted seven on-site reviews during FFY 2018. The sample of records reviewed is random and based on the population served. CDE data is derived from monitoring for infants and toddlers served with SLI disabilities in FFY 2018.

Provide additional information about this indicator (optional)

Reasons for Delay

There were various reasons for delay including: Service provider availability (e.g. rural locations, language capabilities etc.), and administrative issues.

Correction of Findings of Noncompliance Identified in FFY 2017

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	22	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected**Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements**

In order to verify the correction of noncompliance, California confirms that the IFSP meeting was held, although late for any child whose IFSP meeting did not occur in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In addition, California ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent review of records is in 100% compliance as soon as possible but in no case later than one year from identification of noncompliance. This is the process used by California to clear all findings of noncompliance, including those findings cleared prior to the issuance of the report.

Of the twenty-two findings of noncompliance identified in FFY 2017, six findings were identified by DDS and the remaining sixteen findings were identified by CDE. The outcomes of these findings are broken down in the following two sections below:

Findings identified by DDS

In addition to the above, DDS notifies the RC, in writing, of the noncompliance. A root cause analysis for all outstanding findings is completed by the RC, with assistance from DDS, to determine the actions necessary to ensure compliance. These actions are documented in a plan of correction and submitted to DDS. DDS ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent verification review as soon as possible.

Six of the twenty-two findings identified in FFY 2017 were identified at RCs by DDS. DDS completed verification reviews at the RCs with findings from FFY 2017. DDS verified that all six of the RCs are correctly implementing the specific regulatory requirements in 34 Code of Federal Regulations (CFR), §§303.321 and 303.342, and are in 100% compliance within the required timeline.

Findings identified by CDE

CDE requires a stringent level of follow-up review and reporting in districts with identified noncompliance related to this indicator. The CDE ensures LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures and practices, providing staff training, and by reviewing a new sample of student records for each district-level finding. District-level corrective actions are given a timeline of three months. For all findings, correction must be completed as soon as possible but, in no case later than one year.

CDE issued the remaining sixteen findings identified on this indicator which were verified as corrected within the required timeline. CDE verified that each LEA with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements in 34 CFR, §§303.321 and 303.342, and are in 100% compliance.

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

For each individual finding identified, DDS or CDE confirmed that the IFSP was completed, although late for all children whose IFSP did not occur in a timely manner, unless the child is no longer within the jurisdiction of the EIS program.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

7 - Prior FFY Required Actions

None

7 - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified by DDS in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

The State must demonstrate, in the FFY 2019 SPP/APR, that the six findings identified by DDS in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a

review of updated data such as data subsequently collected through on-site monitoring or a State data system. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), 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	2005	85.71%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	74.06%	91.41%	80.36%	79.12%	74.47%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
221	278	74.47%	100%	81.65%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

6

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

State monitoring

Describe the method used to select EIS programs for monitoring.

DDS conducts on-site reviews of cohort of RC Early Start programs each year as part of the three-year monitoring cycle. DDS conducted seven on-site reviews during FFY 2018. The sample of records reviewed is random and based on the population served. CDE data is derived from monitoring for infant and toddlers served SLI disabilities in FFY 2018.

Provide additional information about this indicator (optional)

Reasons for Delay

There were various reasons for delay including: Administrative challenges with RCs and LEAs.

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	7	1	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

California confirms that transition steps and services were completed, although late, for any child whose transition did not occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In addition, California ensures that each agency with identified non compliance is correctly implementing the specific regulatory requirements based on a subsequent review of records is in 100% compliance as soon as possible but in no case later than one year from identification of non compliance. This is the process used by California to clear all findings of noncompliance, including those findings cleared prior to the issuance of the report.

Of the eight findings of noncompliance identified in FFY 2017, six findings were identified by DDS and two remaining findings were identified by CDE. The outcomes of these findings are broken down in the following two sections below:

Findings identified by DDS

In addition to the above, DDS notifies the RC, in writing, of the noncompliance. A root cause analysis for all outstanding findings is completed by the RC, with assistance from DDS, to determine the actions necessary to ensure compliance. These actions are documented in a plan of correction and submitted to DDS. DDS ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent verification review as soon as possible.

Six of the eight findings identified in FFY 2017 were identified at RCs by DDS. DDS completed a verification review at the RCs with outstanding findings from FFY 2017. DDS verified that five of the six RCs are correctly implementing the specific regulatory requirements in 34 Code of Federal Regulations (CFR), §§ 303.209 and 303.344(h), and are in 100% compliance within the required timeline. Following additional subsequent reviews, DDS verified that the remaining RC is correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.209 and 303.344 (h), and are in 100% compliance, however outside the required timeline.

Findings identified by CDE

CDE requires a stringent level of follow-up review and reporting in districts with identified noncompliance related to this indicator. The CDE ensures LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures and practices, providing staff training, and by reviewing a new sample of student records for each district-level finding. District-level corrective actions are given a timeline of three months. For all findings, correction must be completed as soon as possible but, in no case later than one year.

CDE issued the remaining two findings identified on this indicator that were verified as corrected within the required timeline. CDE verified that each LEA with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.209 and 303.344(h), and are in 100% compliance.

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

For each individual finding identified, DDS or CDE confirmed that the transition steps and services were completed, although late, for any child whose transition did not occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY Required Actions

None

8A - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified by DDS in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

The State must demonstrate, in the FFY 2019 SPP/APR, that the six findings identified by DDS in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

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:

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), 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	2005	92.86%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	64.85%	74.54%	76.07%	78.85%	87.23%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
244	281	87.23%	100%	86.83%	Did Not Meet Target	No Slippage

Number of parents who opted out

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

0

Describe the method used to collect these data

Notification to the LEA

DDS conducts on-site reviews of a cohort of RC Early Start programs each year as part of a three-year monitoring cycle. DDS conducted seven on-site reviews during FFY 2018. The sample of records reviewed is random and based on the population served. CDE data is derived from monitoring for infants and toddlers served with SLI disabilities in FFY 2018.

Notification to the State Educational Agency (SEA)

Each month, DDS notifies CDE of children potentially eligible for Part B services at least 90 days prior to each child's third birthday.

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

NO

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

State monitoring

Describe the method used to select EIS programs for monitoring.

DDS conducts on-site reviews of a cohort of RC Early Start programs each year as part of a three-year monitoring cycle. DDS conducted seven on-site reviews during FFY 2018. The sample of records reviewed is random and based on the population served. CDE data is derived from monitoring for infants and toddlers served with SLI disabilities in FFY 2018.

Provide additional information about this indicator (optional)

Reasons for Delay

There were various reasons for delay including: Administrative challenges with RCs and LEAs.

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	6	1	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

California confirms that the LEA and SEA notification occurred, although late, for any child whose transition notification did not occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In addition, California ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent review of records is in 100% compliance as soon as possible but in no case later than one year from identification of noncompliance. This is the process used by California to clear all findings of noncompliance, including those findings cleared prior to the issuance of the report.

Of the seven findings of noncompliance identified in FFY 2017, five findings were identified by DDS and two remaining findings were identified by CDE. The outcomes of these findings are broken down in the following two sections below:

Findings identified by DDS

In addition to the above, DDS notifies the RC, in writing, of the noncompliance. A root cause analysis for all outstanding findings is completed by the RC, with assistance from DDS, to determine the actions necessary to ensure compliance. These actions are documented in a plan of correction and submitted to DDS. DDS ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent verification review as soon as possible.

Five of the seven findings identified in FFY 2017 were identified at RCs by DDS. DDS completed a verification review at the RCs with outstanding findings from FFY 2017. DDS verified that four of the five RCs are correctly implementing the specific regulatory requirements in 34 Code of Federal Regulations (CFR), §§ 303.209 and 303.344 (h) within one year. Following additional subsequent reviews, DDS verified that the remaining RC is correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.209 and 303.344 (h), and are in 100% compliance, however outside the

required timeline.

Findings identified by CDE

CDE requires a stringent level of follow-up review and reporting in districts with identified noncompliance related to this indicator. The CDE ensures LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures and practices, providing staff training, and by reviewing a new sample of student records for each district-level finding. District-level corrective actions are given a timeline of three months. For all findings, correction must be completed as soon as possible but, in no case later than one year.

CDE issued the remaining two findings identified on this indicator that were verified as corrected within the required timeline. CDE verified that each LEA with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.209 and 303.344(h), and are in 100% compliance.

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

For each individual finding identified, DDS or CDE confirmed that the notification to the LEA and SEA occurred, although late, for any child whose notification did not occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8B - Prior FFY Required Actions

None

8B - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified by DDS in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

The State must demonstrate, in the FFY 2019 SPP/APR, that the five findings identified by DDS in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), 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	2005	92.86%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	72.01%	86.20%	87.86%	88.60%	90.91%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
225	278	90.91%	100%	84.31%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

FFY 2018 data indicate 84.31 percent of the children exited Part C that had an timely transition conference (231 (225 plus 6 - total records plus the number of documented delays attributable to exceptional family circumstances) divided by 274 (278 minus 4 - total records minus the number of toddlers for whom the parent did not provide approval for the transition conference) times 100 equals 84.31 percent. This figure represents slippage from FFY 2017 of 6.60 percent.

The majority of findings on this indicator were identified at two local programs. If the results from these two programs were excluded, performance on this indicator would be at 91.96 percent. The State has provided targeted technical assistance for these two local programs and are confident that with the increased monitoring and support, the performance on this indicator will improve.

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.

4

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.

6

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

State monitoring

Describe the method used to select EIS programs for monitoring.

DDS conducts on-site reviews of cohort of RC Early Start programs each year as part of the three-year monitoring cycle. DDS conducted seven on-site reviews during FFY 2018. The sample of records reviewed is random and based on the population served. CDE data is derived from monitoring for infant and toddlers served solely low incidence disabilities in FFY 2018.

Provide additional information about this indicator (optional)

Reasons for Delay

There were various reasons for delay including: Administrative challenges with RCs and LEAs.

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	8	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

In order to verify the correction of noncompliance, California confirms that the transition conference was held, although late, for any child whose transition conference did not occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In addition, California ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent review of records is in 100% compliance as soon as possible but in no case later than one year from identification of non compliance. This is the process used by California to clear all findings of noncompliance, including those findings cleared prior to the issuance of the report.

Of the eight findings of noncompliance identified in FFY 2017, six findings were identified by DDS and two remaining findings were identified by CDE. The outcomes of these findings are broken down in the following two sections below:

Findings identified by DDS

In addition to the above, DDS notifies the RC, in writing, of the noncompliance. A root cause analysis is completed by the RC for all outstanding findings, with assistance from DDS, to determine the actions necessary to ensure compliance. These actions are documented in a plan of correction and submitted to DDS. DDS ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on

a subsequent verification review as soon as possible.

Six of the eight findings identified in FFY 2017 were identified at RCs by DDS. DDS completed a verification review at the RCs with outstanding findings from FFY 2017. DDS verified that all of the six RCs are correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.209 and 303.344(h), and are in 100% compliance within the required timeline.

Findings identified by CDE

CDE requires a stringent level of follow-up review and reporting in districts with identified noncompliance related to this indicator. The CDE ensures LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures and practices, providing staff training, and by reviewing a new sample of student records for each district-level finding. District-level corrective actions are given a timeline of three months. For all findings, correction must be completed as soon as possible but, in no case later than one year.

CDE issued the remaining two findings identified on this indicator that were verified as corrected within the required timeline. CDE verified that each LEA with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements in 34 CFR, §§ 303.209 and 303.344(h), and are in 100% compliance.

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

For each individual finding identified, DDS or CDE confirmed that the transition conference was held, although late, for any child whose transition conference did not occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8C - Prior FFY Required Actions

None

8C - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified by DDS in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

The State must demonstrate, in the FFY 2019 SPP/APR, that the six findings identified by DDS in FFY 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2017 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

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.

This indicator is not applicable because the State does not follow Part B due process procedures.

9 - Prior FFY Required Actions

None

9 - OSEP Response

This Indicator is not applicable to the State.

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 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1 Mediations held	8
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.a.i Mediations agreements related to due process complaints	3
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.b.i Mediations agreements not related to due process complaints	4

Targets: Description of Stakeholder Input

Input on current and future (FFY 19/20) targets included in this APR, including those associated with California's SSIP, were provided by the State's broad and diverse Interagency Coordinating Council (ICC) which includes parents, professionals providing services to infants and toddlers, as well as State departments involved in the provision of services for infants and toddlers. In California, the ICC also benefits from the participation of community representatives, which increases the diversity of perspectives presented.

Historical Data

Baseline	2005	55.00%			
FFY	2013	2014	2015	2016	2017
Target>=	85.00%	85.00%	85.00%	85.00%	85.00%
Data	88.24%	86.67%	88.89%	100.00%	80.00%

Targets

FFY	2018	2019
Target>=	85.00%	85.00%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
3	4	8	80.00%	85.00%	87.50%	Met Target	No Slippage

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State provided a FFY 2019 target for this indicator, and OSEP accepts that target.

The State reported fewer than ten mediations held in FFY 2018. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

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:

Jim Knight

Title:

Deputy Director, Federal Programs Division

Email:

jim.knight@dds.ca.gov

Phone:

916-654-2759

Submitted on:

04/28/20 10:32:54 PM

**ANNUAL REPORT CERTIFICATION OF THE
INTERAGENCY COORDINATING COUNCIL
UNDER PART C OF THE
INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)**

Under IDEA Section 641(e)(1)(D) and 34 C.F.R. §303.604(c), the Interagency Coordinating Council (ICC) of each jurisdiction that receives funds under Part C of the IDEA must prepare and submit to the Secretary of the U.S. Department of Education (Department) and to the Governor of its jurisdiction an annual report on the status of the early intervention programs for infants and toddlers with disabilities and their families operated within the State. The ICC may either: (1) prepare and submit its own annual report to the Department and the Governor, or (2) provide this certification with the State lead agency's State Performance Plan/Annual Performance Report (SPP/APR)¹ under Part C of the IDEA. This certification (including the SPP/APR) is due no later than February 3, 2020.

On behalf of the ICC of the State/jurisdiction of California, I hereby certify that the ICC is: [please check one]

Submitting its own annual report (which is attached); or

Using the State's Part C SPP/APR for FFY 2018 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C SPP/APR for accuracy and completeness.²

I hereby further confirm that a copy of this Annual Report Certification and the annual report or SPP/APR has been provided to our Governor.

Original signed by Marie Kanne Poulsen

1/16/2020

Signature of ICC Chairperson

Date

mpoulsen@chla.usc.edu

Address or e-mail

(323) 361-3819

Daytime telephone number

¹ Under IDEA Sections 616(b)(2)(C)(ii)(II) and 642 and under 34 C.F.R. §80.40, the lead agency's SPP/APR must report on the State's performance under its SPP/APR and contain information about the activities and accomplishments of the grant period for a particular Federal fiscal year (FFY).

² If the ICC is using the State's Part C SPP/APR and it disagrees with data or other information presented in the State's Part C SPP/APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 3, 2020.