State Performance Plan / Annual Performance Report:
Part C

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

For reporting on
FFY18

Maryland

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

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.

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.

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.

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).

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.

No changes to baselines are being proposed for FFY 2018 but as required by the OSEP, the MSDE has set targets for all results indicators for FFY 2019. To set targets, the MSDE obtained stakeholder feedback through a survey sent to MITP stakeholders, including Local Special Education Directors, Local Infants and Toddlers Directors, and all members of the State Interagency Coordinating Council. Survey results guided target setting and proposed targets are included with this APR submission.

Throughout FFY 2018, the MSDE provided information and preliminary data on the Part C APR indicators and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including the SICC, local ITP directors, and local special education directors. Updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings throughout the reporting period. Annually, the draft APR and data are presented to the SICC; the presentation for FFY 2018 occurred on December 5, 2019.

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.

As required in the IDEA of 2004, the MSDE reported to the public on its FFY 2017 (July 1, 2017 - June 30, 2018) performance and will report to the public on the performance of LITPs on Part C Indicators # 1, 2, 3, 4, 5, 6, 7 and 8 for FFY 2018 (July 1, 2018 - June 30, 2019). Performance data in numbers and percentages will be reported for each LITP, along with the State target, State performance data, and a narrative description of the indicator. State performance data on Part C Indicators # 9, 10, and 11 will also be reported to the public.

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.

In partnership with the Johns Hopkins University Center for Technology in Education (JHU/CTE), the MSDE has developed an accessible, state-of-the-art SPP/APR website for local and State performance data. The website currently includes APRs from FFY 2005 to FFY 2017 and can be accessed at http://www.mdideareport.org. In addition to the complete SPP/APR, the website includes State and LITP results for all applicable indicators and tools for comparing local performance in relation to the State targets. The public may see progress and slippage through a combination of tables and graphs populated on the website. This site also includes OSEP’s annual State determination and MSDE’s annual local Infants and Toddlers Program determinations. The FFY 2018 APR will be included on this website shortly after the State’s submission to the Office of Special Education Programs (OSEP) on February 3, 2020. Copies of the APR and SPP will be provided to LITPs, the SICC, and other stakeholders simultaneously.

Intro - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR
Intro - OSEP Response
The State did not provide verification that the ICC Form and the State Systemic Improvement Plan (SSIP) attachments it included in its FFY 2018 SPP/APR submission are in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 and noted in the FFY 2018 SPP/APR User Guides and technical webinar.

The State did not, as required by the measurement table, provide a target for FFY 2019 for Indicator C-11/SSIP.

Intro - Required Actions
**Indicator 1: Timely Provision of Services**

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

Percent = \[
\frac{\text{(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner)}}{\text{(total # of infants and toddlers with IFSPs)}}\] 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

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>96.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2013</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2014</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2015</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2016</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2017</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

#### Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**FFY 2018 SPP/APR Data**

<table>
<thead>
<tr>
<th>Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner</th>
<th>Total number of infants and toddlers with IFSPs</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>9,314</td>
<td>11,371</td>
<td>97.86%</td>
<td>100%</td>
<td>98.07%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

XXX

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

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

1,837
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).

The State’s criterion for timely service delivery is the following: not later than 30 days from parental consent on the IFSP.

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

Data were collected from the full reporting period of July 1, 2018 to June 30, 2019.

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

To report the percentage of infants and toddlers (including 3 and 4 year olds in the Extended Option) with IFSPs who received early intervention services on their IFSPs in a timely manner between 7/1/2018 and 6/30/2019, the MSDE generated a report from the statewide Part C database comparing IFSP meeting date (date of parent consent) and the actual service initiation date for all services on initial IFSPs and any service added during the time period at subsequent IFSP meetings. The State’s criterion for timely service delivery is the following: not later than 30 days from the date of the IFSP.

The data reported for this indicator includes data for all 24 LITPs in Maryland. The MSDE and the LITPs verified family-related reasons, IFSP team decision-making reasons, and weather-related agency closings for the legitimate initiation of services outside the 30-day timeline and the report was modified based on the results of state and local reviews and LITP data verification.

Data Collection, Reporting, and Analysis The percentage of children having timely service initiation includes children who had actual initiation of a new service between 0 and 30 days after parental signature of the IFSP.

There were an additional 1,837 children whose service initiation date exceeded 30 days from the parental signature on the IFSP because of family-related reasons, child unavailability (e.g., child illness or hospitalization), or IFSP team decision making (e.g., physical therapy service two times per year). If the reason for untimely initiation of a service was related to a system issue (e.g., administrative error, scheduling problems, or staff unavailability), the service was considered untimely and the child whose service was untimely was not included in the State’s percentage of children receiving timely services. Before finalization of SPP/APR data, local programs were reminded of the requirement to ensure the submission of timely and accurate data.

On November 21, 2019, the MSDE re-ran the child-level and summary actual service initiation reports and validated data. These data are used for local determinations and are reported in the State’s Annual Performance Report. The data validation for this indicator included contacting jurisdictions about justifications for late services that were unclear. Also, the predefined report includes all services that are untimely, and the MSDE staff must distinguish between those services that are untimely due to family related reasons and those that are late due to system reasons. Untimely services are summed and are reported above. For FFY 2018, local data reports will be distributed in February 2020.

To monitor timely service data, the MSDE uses multiple predefined reports that (1) summarize the percentage of timely services, and (2) list all of the children who have untimely services or who are missing actual service initiation dates. During the FFY 2008 reporting year, the MSDE made changes to the Part C database in order to capture the services that had not been initiated and would never be initiated due to family-related reasons. In particular, some services are added to the IFSP but never actually start, such as when parents change their mind about approving a specific service, when families move out of the local jurisdiction, or when providers are unable to make contact with families despite repeated efforts to do so. These circumstances are now documented in both the early intervention record and the Online IFSP through a “Reason No Actual Service Initiation Date Entered” data field. This data field also reduces the amount of data validation required by the MSDE since the MSDE no longer has to request information about why these service entry dates were not entered. The MSDE also created a report to capture those services that will never start due to family-related reasons (e.g., family changed mind after signing IFSP, family moved out of state, etc.). This report has decreased the validation work required by the MSDE.

If needed, provide additional information about this indicator here.

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>10</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

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

At the systemic level, the MSDE, DEI/SES identified ten (10) findings of noncompliance in FFY 2017 for this indicator. All findings were corrected within one year of issuing the written finding of noncompliance. To verify the correction of FFY 2017 noncompliance, an updated random sample of early intervention records, using the state’s data system, from a data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, the MSDE, DEI/SES staff verified that the LITP identified with noncompliance in FFY 2017 was correctly implementing the specific regulatory requirements. This was based on a review of updated data subsequently collected regarding infants and toddlers who’s services were provided in a timely manner. These data demonstrated that the LITP corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP Memo 09-02.

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

For FFY 2017, there were 234 individual level incidences of noncompliance. The MSDE, DEI/SES reviewed the records of each individual child that did not have IFSP services provided in a timely manner. Although late, the MSDE, DEI/SES verified that services were initiated for all 234 children. As mentioned above, a subsequent data set was also reviewed to determine if those records were compliant. Through the review process, the MSDE verified through its online database that each individual child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP Memo 09-02.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected
Correction of Findings of Noncompliance Identified Prior to FFY 2017

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

1 - Prior FFY Required Actions
None
Response to actions required in FFY 2017 SPP/APR

1 - OSEP Response
The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified 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, OSEP could not determine whether the State 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 reports on the correction of 10 systemic findings and 234 individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the 10 systemic findings. It is not clear how the 10 systemic findings and the 234 individual findings are aligned.

The FFY 2017 OSEP response noted that, "The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, OSEP could not determine whether the State verified that each EIS program or provider with noncompliance identified in FFY 2016 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 reports on the correction of 12 systemic findings and 296 individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the 12 systemic findings. It is not clear how the 12 systemic findings and the 296 individual findings are aligned."
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

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>89.70%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target&gt;=</td>
<td>92.00%</td>
<td>92.50%</td>
</tr>
<tr>
<td>Data</td>
<td>97.81%</td>
<td>97.53%</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.

No changes to baselines are being proposed for FFY 2018 but as required by the OSEP, the MSDE has set targets for all results indicators for FFY 2019. To set targets, the MSDE obtained stakeholder feedback through a survey sent to MITP stakeholders, including Local Special Education Directors, Local Infants and Toddlers Directors, and all members of the State Interagency Coordinating Council. Survey results guided target setting and proposed targets are included with this APR submission.

Throughout FFY 2018, the MSDE provided information and preliminary data on the Part C APR indicators and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including the SICC, local ITP directors, and local special education directors. Updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings throughout the reporting period. Annually, the draft APR and data are presented to the SICC; the presentation for FFY 2018 occurred on December 5, 2019.

Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</td>
<td>8,490</td>
</tr>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Total number of infants and toddlers with IFSPs</td>
<td>8,651</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data
Provide reasons for slippage, if applicable

XXX

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

2 - OSEP Response

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

The State did not provide verification that the attachment it included in its FFY 2018 SPP/APR submission is in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 and noted in the FFY 2018 SPP/APR User Guides and technical webinar.

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 (total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

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

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

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

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

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

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

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

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

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

NO

Targets: Description of Stakeholder Input

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.

No changes to baselines are being proposed for FFY 2018 but as required by the OSEP, the MSDE has set targets for all results indicators for FFY 2019. To set targets, the MSDE obtained stakeholder feedback through a survey sent to MITP stakeholders, including Local Special Education Directors, Local Infants and Toddlers Directors, and all members of the State Interagency Coordinating Council. Survey results guided target setting and proposed targets are included with this APR submission.

Throughout FFY 2018, the MSDE provided information and preliminary data on the Part C APR indicators and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including the SICC, local ITP directors, and local special education directors. Updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings throughout the reporting period. Annually, the draft APR and data are presented to the SICC; the presentation for FFY 2018 occurred on December 5, 2019.

Historical Data

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Targets

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<td>Target B1</td>
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<td>Target B2</td>
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<td>Target C1</td>
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</tr>
<tr>
<td>Target C2</td>
<td>50.44%</td>
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</table>

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

7,020

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

<table>
<thead>
<tr>
<th></th>
<th>Number of children</th>
<th>Percentage of Total</th>
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<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>59</td>
<td>0.84%</td>
</tr>
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</table>
anchoring tools prior to the COS rating discussion with the family, local early intervention providers and leaders recognize that COS ratings have been
quality improves. With a more comprehensive understanding of a child's functioning within daily routines and activities and the consistent use of age
outcomes data, in each of the three childhood outcomes (3A, 3B and 3C) across both Summary Statement #1 and Summary Statement #2, as data
along with the use of age anchoring tools and the decision tree for every COS rating. This intense focus is contributing to decreases in the child
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along with age anchoring tools prior to the COS rating discussion with the family, local early intervention providers and leaders recognize that COS ratings have been
elevated at entry. A new COS Entry report supports data analysis at the program and provider level. Program-level data analysis has found that elevated
COS entry scores directly contribute to decreases in COS data. For Summary Statement #1, children with high entry ratings are exiting without showing
significant gains in their developmental trajectory compared to same age peers. For Summary Statement #2, data analysis indicates that significantly less
children are entering with a COS score of 6 or 7, which overall lowers the percentages across all three indicators. Additionally, as more of
Maryland’s early intervention and preschool special education programs effectively collaborate with families to ensure that the COS ratings at exit from
early intervention become the COS ratings at entry for preschool special education, there are further concerns about decreases in the early intervention
child outcomes data.

Specific activities over the past year to address fidelity of the COS process and to continue improving data quality include: 1) Maryland Birth to
Kindergarten Child Outcomes Gateway website for initial and ongoing professional learning, along with the Guide to Birth to Kindergarten Child
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Maryland Online IFSP form, process, and guide with a stronger focus on evidence-based practices in early intervention including robust authentic
assessment of natural routines/activities and environments and present levels of functional development summaries in each early childhood outcome
area; and 4) Revised Maryland Online IFSP tool including a built-in, required COS decision tree to support collaborative COS ratings.

Provide reasons for A1 slippage, if applicable
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Provide reasons for A2 slippage, if applicable
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Outcome B: Acquisition and use of knowledge and skills (including early language/communication)
Part C

Provide reasons for B1 slippage, if applicable

The DEI/SES continues to focus on fidelity of the Child Outcomes Summary (COS) process with a strong emphasis on authentic assessment practices along with the use of age anchoring tools and the decision tree for every COS rating. This intense focus is contributing to decreases in the child outcomes data, in each of the three childhood outcomes (3A, 3B and 3C) across both Summary Statement #1 and Summary Statement #2, as data quality improves. With a more comprehensive understanding of a child’s functioning within daily routines and activities and the consistent use of age anchoring tools prior to the COS rating discussion with the family, local early intervention providers and leaders recognize that COS ratings have been elevated at entry. A new COS Entry report supports data analysis at the program and provider level. Program-level data analysis has found that elevated COS entry scores directly contribute to decreases in COS data. For Summary Statement #1, children with high entry ratings are exiting without showing significant gains in their developmental trajectory compared to same age peers. For Summary Statement #2, data analysis indicates that significantly less children are entering with a COS score of 6 or 7, which overall lowers the percentages across all three indicators. Additionally, as more or Maryland’s early intervention and preschool special education programs effectively collaborate with families to ensure that the COS ratings at exit from early intervention become the COS ratings at entry for preschool special education, there are further concerns about decreases in the early intervention child outcomes data.

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Provide reasons for B2 slippage, if applicable

The DEI/SES continues to focus on fidelity of the Child Outcomes Summary (COS) process with a strong emphasis on authentic assessment practices along with the use of age anchoring tools and the decision tree for every COS rating. This intense focus is contributing to decreases in the child outcomes data, in each of the three childhood outcomes (3A, 3B and 3C) across both Summary Statement #1 and Summary Statement #2, as data quality improves. With a more comprehensive understanding of a child’s functioning within daily routines and activities and the consistent use of age anchoring tools prior to the COS rating discussion with the family, local early intervention providers and leaders recognize that COS ratings have been elevated at entry. A new COS Entry report supports data analysis at the program and provider level. Program-level data analysis has found that elevated COS entry scores directly contribute to decreases in COS data. For Summary Statement #1, children with high entry ratings are exiting without showing significant gains in their developmental trajectory compared to same age peers. For Summary Statement #2, data analysis indicates that significantly less children are entering with a COS score of 6 or 7, which overall lowers the percentages across all three indicators. Additionally, as more or Maryland’s early intervention and preschool special education programs effectively collaborate with families to ensure that the COS ratings at exit from early intervention become the COS ratings at entry for preschool special education, there are further concerns about decreases in the early intervention child outcomes data.

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<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
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<tr>
<td>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</td>
<td>3,674</td>
<td>6,090</td>
<td>66.13%</td>
<td>66.61%</td>
<td>60.33%</td>
<td>Did Not Meet Target</td>
</tr>
<tr>
<td>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</td>
<td>3,054</td>
<td>7,020</td>
<td>49.16%</td>
<td>55.15%</td>
<td>43.50%</td>
<td>Did Not Meet Target</td>
</tr>
</tbody>
</table>

Provide reasons for B1 slippage, if applicable

The DEI/SES continues to focus on fidelity of the Child Outcomes Summary (COS) process with a strong emphasis on authentic assessment practices along with the use of age anchoring tools and the decision tree for every COS rating. This intense focus is contributing to decreases in the child outcomes data, in each of the three childhood outcomes (3A, 3B and 3C) across both Summary Statement #1 and Summary Statement #2, as data quality improves. With a more comprehensive understanding of a child’s functioning within daily routines and activities and the consistent use of age anchoring tools prior to the COS rating discussion with the family, local early intervention providers and leaders recognize that COS ratings have been elevated at entry. A new COS Entry report supports data analysis at the program and provider level. Program-level data analysis has found that elevated COS entry scores directly contribute to decreases in COS data. For Summary Statement #1, children with high entry ratings are exiting without showing significant gains in their developmental trajectory compared to same age peers. For Summary Statement #2, data analysis indicates that significantly less children are entering with a COS score of 6 or 7, which overall lowers the percentages across all three indicators. Additionally, as more or Maryland’s early intervention and preschool special education programs effectively collaborate with families to ensure that the COS ratings at exit from early intervention become the COS ratings at entry for preschool special education, there are further concerns about decreases in the early intervention child outcomes data.

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Provide reasons for B2 slippage, if applicable

The DEI/SES continues to focus on fidelity of the Child Outcomes Summary (COS) process with a strong emphasis on authentic assessment practices along with the use of age anchoring tools and the decision tree for every COS rating. This intense focus is contributing to decreases in the child outcomes data, in each of the three childhood outcomes (3A, 3B and 3C) across both Summary Statement #1 and Summary Statement #2, as data quality improves. With a more comprehensive understanding of a child’s functioning within daily routines and activities and the consistent use of age anchoring tools prior to the COS rating discussion with the family, local early intervention providers and leaders recognize that COS ratings have been elevated at entry. A new COS Entry report supports data analysis at the program and provider level. Program-level data analysis has found that elevated COS entry scores directly contribute to decreases in COS data. For Summary Statement #1, children with high entry ratings are exiting without showing significant gains in their developmental trajectory compared to same age peers. For Summary Statement #2, data analysis indicates that significantly less children are entering with a COS score of 6 or 7, which overall lowers the percentages across all three indicators. Additionally, as more or Maryland’s early intervention and preschool special education programs effectively collaborate with families to ensure that the COS ratings at exit from early intervention become the COS ratings at entry for preschool special education, there are further concerns about decreases in the early intervention child outcomes data.

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Outcome C: Use of appropriate behaviors to meet their needs

<table>
<thead>
<tr>
<th>Outcome C</th>
<th>Number of Children</th>
<th>Percentage of Total</th>
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<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
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<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
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<td>33.53%</td>
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<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
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<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
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<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>595</td>
<td>8.48%</td>
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</table>

Provide reasons for C1 slippage, if applicable

The DEI/SES continues to focus on fidelity of the Child Outcomes Summary (COS) process with a strong emphasis on authentic assessment practices along with the use of age anchoring tools and the decision tree for every COS rating. This intense focus is contributing to decreases in the child outcomes data, particularly in each of the three childhood outcomes (3A, 3B and 3C) across both Summary Statement #1 and Summary Statement #2, as data quality improves. With a more comprehensive understanding of a child’s functioning within daily routines and activities and the consistent use of age anchoring tools prior to the COS rating discussion with the family, local early intervention providers and leaders recognize that COS ratings have been elevated at entry. A new COS Entry report supports data analysis at the program and provider level. Program-level data analysis has found that elevated COS entry scores directly contribute to decreases in COS data. For Summary Statement #1, children with high entry ratings are exiting without showing significant gains in their developmental trajectory compared to same age peers. For Summary Statement #2, data analysis indicates that significantly less children are entering with a COS score of 6 or 7, which overall lowers the percentages across all three indicators. Additionally, as more Maryland’s early intervention and preschool special education programs effectively collaborate with families to ensure that the COS ratings at exit from early intervention become the COS ratings at entry for preschool special education, there are further concerns about decreases in the early intervention child outcomes data.

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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?

XXX

### Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>FFY</th>
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<th>2014</th>
<th>2015</th>
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<td>A1 AR</td>
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</tr>
<tr>
<td>B1 AR</td>
<td>XXX</td>
<td>Target ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>B1 AR</td>
<td>XXX</td>
<td>Data</td>
<td>XXX</td>
<td>XXX</td>
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<td>XXX</td>
</tr>
<tr>
<td>B2</td>
<td>XXX</td>
<td>Target ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
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</tr>
<tr>
<td>B2</td>
<td>XXX</td>
<td>Data</td>
<td>XXX</td>
<td>XXX</td>
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<td>XXX</td>
</tr>
<tr>
<td>B2 AR</td>
<td>XXX</td>
<td>Target ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
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</tr>
<tr>
<td>B2 AR</td>
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<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C1</td>
<td>XXX</td>
<td>Target ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C1</td>
<td>XXX</td>
<td>Data</td>
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<td>XXX</td>
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</tr>
<tr>
<td>C1 AR</td>
<td>XXX</td>
<td>Target ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
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</tr>
<tr>
<td>C1 AR</td>
<td>XXX</td>
<td>Data</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C2</td>
<td>XXX</td>
<td>Target ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C2</td>
<td>XXX</td>
<td>Data</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C2 AR</td>
<td>XXX</td>
<td>Target ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C2 AR</td>
<td>XXX</td>
<td>Data</td>
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### Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target A1 ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>A1 AR</td>
<td>XXX</td>
<td></td>
</tr>
<tr>
<td>Target A2 ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>A2 AR</td>
<td>XXX</td>
<td></td>
</tr>
<tr>
<td>Target B1 ( \geq )</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>B1 AR</td>
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<td></td>
</tr>
<tr>
<td>Target B2 &gt;=</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>B2 AR</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>Target C1 &gt;=</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C1 AR</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>Target C2 &gt;=</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>C2 AR</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

**FFY 2018 SPP/APR Data**

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

XXX

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

<table>
<thead>
<tr>
<th>Not including at-risk infants and toddlers</th>
<th>Number of children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Just at-risk infants and toddlers/All infants and toddlers</th>
<th>Number of children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

**Not including at-risk infants and toddlers**

<table>
<thead>
<tr>
<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

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

XXX

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

XXX
<table>
<thead>
<tr>
<th><strong>Just at-risk infants and toddlers/All infants and toddlers</strong></th>
<th><strong>Numerator</strong></th>
<th><strong>Denominator</strong></th>
<th><strong>FFY 2017 Data</strong></th>
<th><strong>FFY 2018 Target</strong></th>
<th><strong>FFY 2018 Data</strong></th>
<th><strong>Status</strong></th>
<th><strong>Slippage</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

Provide reasons for A1 AR/ALL slippage, if applicable
XXX

Provide reasons for A2 AR/ALL slippage, if applicable
XXX

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

**Not including at-risk infants and toddlers**

<table>
<thead>
<tr>
<th></th>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
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</table>

**Just at-risk infants and toddlers/All infants and toddlers**

<table>
<thead>
<tr>
<th></th>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
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<td>XXX</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
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<td>XXX</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
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<td>XXX</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
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**Not including at-risk infants and toddlers**

<table>
<thead>
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<th></th>
<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>Not including at-risk infants and toddlers</td>
<td>Numerator</td>
<td>Denominator</td>
<td>FFY 2017 Data</td>
<td>FFY 2018 Target</td>
<td>FFY 2018 Data</td>
<td>Status</td>
<td>Slippage</td>
</tr>
<tr>
<td>------------------------------------------</td>
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<td>---------------</td>
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<td>---------------</td>
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</tr>
<tr>
<td>years of age or exited the program</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</table>

Provide reasons for B1 slippage, if applicable
XXX

Provide reasons for B2 slippage, if applicable
XXX

<table>
<thead>
<tr>
<th>Just at-risk infants and toddlers/All infants and toddlers</th>
<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
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</tr>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
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<td>XXX</td>
</tr>
</tbody>
</table>

Provide reasons for B1 AR/ALL slippage, if applicable
XXX

Provide reasons for B2 AR/ALL slippage, if applicable
XXX

Outcome C: Use of appropriate behaviors to meet their needs

<table>
<thead>
<tr>
<th>Not including at-risk infants and toddlers</th>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Just at-risk infants and toddlers/All infants and toddlers</th>
<th>Number of Children</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Infants and toddlers who did not improve functioning</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</td>
<td>XXX</td>
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</tr>
<tr>
<td>c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it</td>
<td>XXX</td>
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</tr>
<tr>
<td>d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers</td>
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<tr>
<td>e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers</td>
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<table>
<thead>
<tr>
<th>Not including at-risk infants and toddlers</th>
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<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
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</thead>
<tbody>
<tr>
<td>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</td>
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<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
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</table>
### Part C

Not including at-risk infants and toddlers

<table>
<thead>
<tr>
<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
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</thead>
<tbody>
<tr>
<td>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</td>
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<td>XXX</td>
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</tbody>
</table>

Provide reasons for C1 slippage, if applicable
XXX

Provide reasons for C2 slippage, if applicable
XXX

### Just at-risk infants and toddlers/All infants and toddlers

<table>
<thead>
<tr>
<th>Numerator</th>
<th>Denominator</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>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</td>
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<td>XXX</td>
<td>XXX</td>
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<td>XXX</td>
</tr>
</tbody>
</table>

Provide reasons for C1 AR/ALL slippage, if applicable
XXX

Provide reasons for C2 AR/ALL slippage, if applicable
XXX

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>10,357</td>
</tr>
<tr>
<td>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.</td>
<td>3,145</td>
</tr>
</tbody>
</table>

Was sampling used? NO

Has your previously-approved sampling plan changed?

If the plan has changed, please provide sampling plan.

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

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

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

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

Maryland began integrating the Child Outcomes Summary (COS) process into the IFSP in FFY 2011 with full implementation during FFY 2012. The COS process was completed and documented on the Strengths and Needs Summary page of the IFSP which replaces the Child Outcome Summary Form (COSF) as the mechanism for collecting, measuring, and reporting on the three early childhood outcomes.

On October 1, 2018 the Maryland IFSP process, document, and online tool was revised and requires more robust child and family assessment activities as well as a more integrated COS process. My Child and Family’s Story now includes three Assessment sections: Natural Routines/Activities and Environments, Our Family’s Resources, Priorities, and Concerns, and the Assessment Summary: Present Levels of Functional Development. The first assessment section on natural routines and activities is completed through a Routines-Based Interview (RBI), the completion of the Scale for the...
Assessment of Family Enjoyment within Routines (SAFER), or the completion of the Everyday Routines and Activities section on the IFSP. The Family Resources, Priorities and Concerns section includes the ability to upload an Ecomap and utilizes prompts to assess the family’s resources, priorities, and concerns, and includes service linkages. Finally, the Assessment Summary: Present Levels of Functional Development summarizes all sources of information, including conversations with the family, observations of the child in daily routines, the eligibility evaluation across the five developmental domains, child and family assessment activities, and outside reports, in order create a plan that fits well with the child’s developmental strengths and interests.

The Assessment Summary: Present Levels of Functional Development documents all of the information gathered within each of the three early childhood outcomes areas: developing positive social skills and relationships, acquiring and using knowledge and skills, and using appropriate behaviors to meet needs. Using the COS Rating Prep Tool for each of the three early childhood outcome areas, teams document the discussion and identification of the child’s skills and behaviors compared to other children the same age as either Foundational, Immediate Foundational, or Age-Expected. Together with the family, teams review the Assessment Summary, share information about typical development and age-anchoring while reviewing the COS Rating Prep Tool, elicit additional thoughts or information from the family and then use the Decision Tree for COS Summary Rating Discussions. The required online Decision Tree Procedural Facilitator guides teams to reach consensus about the appropriate COS descriptor statement. The COS Rating Descriptors use family-friendly language to assist families to understand their child’s development in relation to same age peers and are matched to the COS 1 through 7 scale. Only the COS Rating Descriptors are written on the IFSP, not the 1 to 7 numbers. The 1 to 7 numbers are assigned in the database to calculate child progress data. For each of the three early childhood outcome areas, the appropriate COS Rating Descriptor is checked on the IFSP. In addition to the COS Rating Descriptor the following question is also required: “Has my child shown any new skills or behaviors related to this area since the last summary?” “Yes, No or Not Applicable?” When developing an initial IFSP and completing the COS entry, the answer to the question is “not applicable” since the child has not yet received early intervention services. At annual reviews and at exit this yes/no question must be answered.

Prior to FFY 2015, the COS was only required at entry and exit and best practice guidance was provided to local programs to complete the COS process at every annual IFSP review. The online IFSP document allows for multiple interim COS ratings. In December 2015, MSDE distributed a Child Outcomes Summary Technical Assistance Bulletin requiring the COS progress/rating to be completed at every annual IFSP review. The revised IFSP process and online tool now requires the entire Assessment Section of the IFSP to be updated and completed at every annual evaluation, along with the completion of a COS interim and/or exit rating. Additional guidance has been provided in the MITP IFSP Process and Document Guide as well as an updated version of the COS Technical Assistance Bulletin. These resources are posted on the MSDE website.

Provide additional information about this indicator (optional)
In FFY 2017, revised Birth to Kindergarten COS training of trainers were held in five regions with the expectation for all staff to be trained or retrained in the COS process. The Maryland Birth to Kindergarten Child Outcomes Gateway website was created to support COS training and the implementation of the COS process with fidelity. These revised COS trainings were designed to help participants understand implementation of the COS process with fidelity, ensuring the consistent use of the Maryland four core components of the COS process (authentic assessment, age-anchoring, COS Rating Prep Tool, and Decision Tree) and to assess competency in the COS rating process. The expectation for the trainers who attended was to conduct local training of all birth to kindergarten staff and culminate the training with the completion of the Maryland COS Competency Check. The Maryland COS Competency Check is now required for all early intervention staff with the ultimate goal being that every provider pass both the knowledge check and the case study competency. The DEI/SES provides annual COS Competency Check reports to ensure that providers are meeting the competency requirements. In FFY 2018, the DEI/SES developed the Maryland COS Process Fidelity Checklist in response to local leaders requesting a tool to monitor fidelity. Additionally, COS data reports, including COS Entry and data visualizations, continue to be updated and revised to support the State and local programs with using COS data for program improvement.

3 - Prior FFY Required Actions
None

Response to actions required in FFY 2017 SPP/APR

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

The State did not provide verification that the attachment it included in its FFY 2018 SPP/APR submission is in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 and noted in the FFY 2018 SPP/APR User Guides and technical webinar.

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 = \[rac{\text{(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights)}}{\text{(# of respondent families participating in Part C)}}\] times 100.

B. Percent = \[rac{\text{(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs)}}{\text{(# of respondent families participating in Part C)}}\] times 100.

C. Percent = \[rac{\text{(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn)}}{\text{(# of respondent families participating in Part C)}}\] 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

<table>
<thead>
<tr>
<th>Baseline</th>
<th>FFY</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>A 2006</td>
<td>Target &gt;=</td>
<td>81.00%</td>
<td>83.00%</td>
<td>85.00%</td>
<td>87.00%</td>
<td>89.00%</td>
</tr>
<tr>
<td>A 76.00%</td>
<td>Data</td>
<td>94.70%</td>
<td>95.86%</td>
<td>98.10%</td>
<td>98.18%</td>
<td>97.91%</td>
</tr>
<tr>
<td>B 2006</td>
<td>Target &gt;=</td>
<td>79.00%</td>
<td>81.20%</td>
<td>83.40%</td>
<td>85.60%</td>
<td>87.80%</td>
</tr>
<tr>
<td>B 74.00%</td>
<td>Data</td>
<td>94.71%</td>
<td>95.37%</td>
<td>97.31%</td>
<td>97.74%</td>
<td>98.05%</td>
</tr>
<tr>
<td>C 2006</td>
<td>Target &gt;=</td>
<td>89.00%</td>
<td>89.50%</td>
<td>90.00%</td>
<td>90.50%</td>
<td>91.00%</td>
</tr>
<tr>
<td>C 81.00%</td>
<td>Data</td>
<td>94.92%</td>
<td>95.50%</td>
<td>98.21%</td>
<td>97.88%</td>
<td>98.31%</td>
</tr>
</tbody>
</table>

#### Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target A &gt;=</td>
<td>91.00%</td>
<td>93.00%</td>
</tr>
<tr>
<td>Target B &gt;=</td>
<td>90.00%</td>
<td>92.50%</td>
</tr>
<tr>
<td>Target C &gt;=</td>
<td>91.50%</td>
<td>92.00%</td>
</tr>
</tbody>
</table>

**Targets: Description of Stakeholder Input**

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.
No changes to baselines are being proposed for FFY 2018 but as required by the OSEP, the MSDE has set targets for all results indicators for FFY 2019. To set targets, the MSDE obtained stakeholder feedback through a survey sent to MITP stakeholders, including Local Special Education Directors, Local Infants and Toddlers Directors, and all members of the State Interagency Coordinating Council. Survey results guided target setting and proposed targets are included with this APR submission.

Throughout FFY 2018, the MSDE provided information and preliminary data on the Part C APR indicators and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including the SICC, local ITP directors, and local special education directors. Updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings throughout the reporting period. Annually, the draft APR and data are presented to the SICC; the presentation for FFY 2018 occurred on December 5, 2019.

### FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>Description</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>The number of families to whom surveys were distributed</td>
<td></td>
<td></td>
<td>11,029</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of respondent families participating in Part C</td>
<td></td>
<td></td>
<td>4,339</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights</td>
<td>4,172</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A2. Number of responses to the question of whether early intervention services have helped the family know their rights</td>
<td>4,278</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>4,165</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs</td>
<td>4,255</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>4,127</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn</td>
<td>4,205</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Provide reasons for part A slippage, if applicable

XXX

Provide reasons for part B slippage, if applicable

XXX

Provide reasons for part C slippage, if applicable

XXX

<table>
<thead>
<tr>
<th>Was sampling used?</th>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, has your previously-approved sampling plan changed?</td>
<td>NO</td>
</tr>
<tr>
<td>If the plan has changed, please provide the sampling plan.</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Was a collection tool used?</th>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, is it a new or revised collection tool?</td>
<td>NO</td>
</tr>
<tr>
<td>If your collection tool has changed, upload it here</td>
<td>XXX</td>
</tr>
</tbody>
</table>
The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.

If not, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

The State continues to focus on achieving representativeness through improvement plans for local programs with lower response rates. Accordingly, the State’s response rate showed an increase from FFY 2017 to FFY 2018. As response rates in jurisdictions increases, so does the State's overall representativeness. Improvement Plans are assigned to local programs with poor response rates to help increase representativeness.

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.

In support of the effort to meet federal reporting requirements for State Performance Plan (SPP) Indicator 4, the vendor (ICF) administered the Early Intervention Services Family Survey of the Maryland Infants and Toddlers Program (MITP). Surveys were completed by the parents/guardians of children who received early intervention services through the MITP program in 2018-19. The Survey was launched in mid-September and closed in mid-November.

As in prior years, the 2018-19 Survey consists of items obtained from the National Center for Special Education Accountability Monitoring (NCSEAM) item bank. The Survey includes 22 core questions, two demographic questions, and two questions for parents of children older than three receiving early intervention services through an Extended Individualized Family Service Plan (IFSP). The MSDE provided the external evaluation team with a data file of all active eligible children as of June 30, 2019 receiving early intervention services across 24 local Infants and Toddlers Programs (ITPs), including children and families receiving services through an Extended IFSP. Each child was also assigned a unique identifier; this identifier was included on each printed survey. Printed surveys were batched by county and delivered in boxes to the appropriate county’s Local Infants and Toddlers Program (LITP) director. These directors were responsible for distributing the surveys to families. Directors also received a Frequently Asked Questions document that contained answers to common questions about the purpose of the survey. Families also had the opportunity to complete the survey in English or Spanish online. Families could either use the identifier located on their printed survey to login to the survey, or they could complete an alternative version of the survey that did not require them to login. Respondents completing the alternative version of the survey were required to answer several demographic questions that are not included on the primary version of the survey. A bilingual telephone and email help desk was maintained for parents for the duration of the survey.

The value of Indicator 4 is determined by calculating the percentage of respondents that agreed with three statements. Each of the three statements corresponds to a separate Indicator.

4a: know about my child’s and family’s rights concerning early intervention services. (Item 19)
4b: communicate more effectively with the people who work with my child and family. (Item 17)
4c: understand my child’s special needs. (Item 21)

Response Rates

A total of 11,029 surveys were distributed to families, and 4,339 completed surveys were returned – resulting in an adjusted response rate[1] of 40.1% (a increase from 35.8% last year). Four jurisdictions achieved an adjusted response rate of at least 70%, and 20 jurisdictions (83% of all local jurisdictions) achieved a response rate of at least 30%.

Statewide, 3,953 surveys were completed in English (91.1%) and 386 surveys were completed in Spanish (8.8%). Paper surveys were much more common than online surveys. Overall, 4,001 paper surveys were completed (92.2% of all surveys), whereas 338 surveys were completed online.

Survey Representativeness

Demographic data for all active and eligible children were provided to the external evaluation team by the MSDE prior to the survey mailing. These data were then matched to survey respondents using the unique confidential identification number printed on each distributed survey. The survey respondents reported that the majority of children in the sample that were receiving services were male (64.4%, n=2,788), while 1,542 of the respondent’s children receiving services were female (35.6%). This is representative of the gender breakdown of children receiving early intervention services in the State.

Respondents were asked to classify their relationship to the child receiving early intervention services (n=4,221). Overwhelmingly, mothers completed the survey (86.8%), followed by fathers (10.0%). Foster parents, grandparents and others accounted for the remaining 3.2% of respondents.

The three racial groups that account for the largest percentage of the respondent population are parents of White (43.4%), Black or African-American (29.3%), and Hispanic (18.0%) children. Parents of Black or African-American children, Asian children, and Hispanic or Latino children were under represented by 0.84, 0.88, and 1.01 percentage points, respectively, in the survey compared to the state population. Parents of White children are overrepresented in the survey by 2.54 percentage points.

The most common exceptionality evident in the MITP population is a developmental delay of at least 25%, with 68.7% of the population reporting this disability. The second most common exceptionality or disability statewide is a physical or mental condition with likely developmental delay (23.9% of the population). The third category of exceptionalties, atypical development or behavior, constitutes 7.4% of the population. Parents of children who have at least 25% Developmental Delay (DD) were slightly underrepresented among survey respondents (63.5% of respondents), as well as parents of children who have an Atypical Development or Behavior (7.2% of respondents). Parents of children Diagnosed Physical or Mental Condition with High Probability of Developmental Delay (DD) were slightly overrepresented by the survey (25.8% of respondents).

Response rates were also examined by jurisdiction. Please see the attachment titled: 2018-19 Survey Representativeness by Jurisdiction.

The State continues to make efforts to ensure a representative sample. MSDE requires LITPs with low response rates to complete and submit an Improvement Plan. As response rates increase, so does the State’s representativeness. Overall, representativeness by race/ethnicity was better in the current reporting year than it was in FFY 2017.

In general, the survey was fairly representative across all key respondent demographic variables, although not fully representative. And, it should be noted that 12 surveys (0.3%) were completed online and the respondent did not put in the survey’s unique identifier, limiting the State’s ability to determine demographic variables for those families. Its possible that with demographic information on those families, the State’s data would have been more representative.
Provide additional information about this indicator (optional)

4 - Prior FFY Required Actions
In the FFY 2018 SPP/APR, the State must report whether its FFY 2018 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Response to actions required in FFY 2017 SPP/APR

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

The State did not provide verification that the attachment it included in its FFY 2018 SPP/APR submission is in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 and noted in the FFY 2018 SPP/APR User Guides and technical webinar.

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

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>1.24%</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Target</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt;=</td>
<td>1.50%</td>
<td>1.51%</td>
<td>1.52%</td>
<td>1.53%</td>
<td>1.54%</td>
</tr>
<tr>
<td>Data</td>
<td>1.68%</td>
<td>1.53%</td>
<td>1.61%</td>
<td>1.59%</td>
<td>1.53%</td>
</tr>
</tbody>
</table>

Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>1.55%</td>
<td>1.56%</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.

No changes to baselines are being proposed for FFY 2018 but as required by the OSEP, the MSDE has set targets for all results indicators for FFY 2019. To set targets, the MSDE obtained stakeholder feedback through a survey sent to MITP stakeholders, including Local Special Education Directors, Local Infants and Toddlers Directors, and all members of the State Interagency Coordinating Council. Survey results guided target setting and proposed targets are included with this APR submission.

Throughout FFY 2018, the MSDE provided information and preliminary data on the Part C APR indicators and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including the SICC, local ITP directors, and local special education directors. Updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings throughout the reporting period. Annually, the draft APR and data are presented to the SICC; the presentation for FFY 2018 occurred on December 5, 2019.

Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers birth to 1 with IFSPs</td>
<td>1,187</td>
</tr>
<tr>
<td>Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin</td>
<td>06/20/2019</td>
<td>Population of infants and toddlers birth to 1</td>
<td>70,843</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>Number of infants and toddlers birth to 1 with IFSPs</th>
<th>Population of infants and toddlers birth to 1</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,187</td>
<td>70,843</td>
<td>1.53%</td>
<td>1.55%</td>
<td>1.68%</td>
<td>Met Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

XXX

Compare your results to the national data
Compared to the average national data percentage of children birth to 1 year of age receiving early intervention services (1.25%), Maryland served 1.68% of the resident population of children birth to 1 year of age. Maryland exceeds the national average by .43 percentage points and the percentage served is ranked 13th among the 50 states and the District of Columbia.

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions
None
Response to actions required in FFY 2017 SPP/APR

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

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

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>2.88%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target &gt;=</td>
<td>3.00%</td>
<td>3.05%</td>
</tr>
<tr>
<td>Data</td>
<td>3.51%</td>
<td>3.50%</td>
</tr>
<tr>
<td>FFY 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target &gt;=</td>
<td>3.10%</td>
<td>3.15%</td>
</tr>
<tr>
<td>Data</td>
<td>3.55%</td>
<td>3.68%</td>
</tr>
<tr>
<td>FFY 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target &gt;=</td>
<td>3.20%</td>
<td>3.25%</td>
</tr>
<tr>
<td>Data</td>
<td>3.55%</td>
<td>3.68%</td>
</tr>
<tr>
<td>FFY 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target &gt;=</td>
<td>3.20%</td>
<td>3.25%</td>
</tr>
<tr>
<td>Data</td>
<td>3.68%</td>
<td>3.86%</td>
</tr>
<tr>
<td>FFY 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target &gt;=</td>
<td>3.20%</td>
<td>3.25%</td>
</tr>
<tr>
<td>Data</td>
<td>3.86%</td>
<td>3.86%</td>
</tr>
<tr>
<td>FFY 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target &gt;=</td>
<td>3.25%</td>
<td>3.30%</td>
</tr>
<tr>
<td>Data</td>
<td>3.86%</td>
<td>3.86%</td>
</tr>
</tbody>
</table>

**Targets: Description of Stakeholder Input**

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.

No changes to baselines are being proposed for FFY 2018 but as required by the OSEP, the MSDE has set targets for all results indicators for FFY 2019. To set targets, the MSDE obtained stakeholder feedback through a survey sent to MITP stakeholders, including Local Special Education Directors, Local Infants and Toddlers Directors, and all members of the State Interagency Coordinating Council. Survey results guided target setting and proposed targets are included with this APR submission.

Throughout FFY 2018, the MSDE provided information and preliminary data on the Part C APR indicators and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including the SICC, local ITP directors, and local special education directors. Updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings throughout the reporting period. Annually, the draft APR and data are presented to the SICC; the presentation for FFY 2018 occurred on December 5, 2019.

### Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 Child Count/Educational Environment Data Groups</td>
<td>07/10/2019</td>
<td>Number of infants and toddlers birth to 3 with IFSPs</td>
<td>8,651</td>
</tr>
<tr>
<td>Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin</td>
<td>06/20/2019</td>
<td>Population of infants and toddlers birth to 3</td>
<td>216,874</td>
</tr>
</tbody>
</table>

### FFY 2018 SPP/APR Data

<table>
<thead>
<tr>
<th>Number of infants and toddlers birth to 3 with IFSPs</th>
<th>Population of infants and toddlers birth to 3</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>8,651</td>
<td>216,874</td>
<td>3.86%</td>
<td>3.25%</td>
<td>3.99%</td>
<td>Met Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

XXX

Compare your results to the national data
Compared to the average national data percentage of children birth to 3 years of age receiving early intervention services (3.48%), Maryland served 3.99% of the resident population of children birth to 3 years of age. Maryland exceeds the national average by .51 percentage points and the percentage served is ranked 16th among the 50 states and the District of Columbia.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions
None
Response to actions required in FFY 2017 SPP/APR

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 = \[\left(\frac{\text{# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline}}{\text{# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted}}\right) \times 100\]

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 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**

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>92.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

**Targets**

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

**FFY 2018 SPP/APR Data**

<table>
<thead>
<tr>
<th>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</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>7,093</td>
<td>97.16%</td>
<td>100%</td>
<td>95.94%</td>
<td>Did Not Meet Target</td>
<td>Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

The State’s data decreased from 97.16% in FFY 2017 to 95.94% in FFY 2018. The slippage was primarily a result of two large jurisdictions in Maryland that had significant slippage from FFY 2017 to FFY 2018. Individual incidences of noncompliance in one jurisdiction increased from 41 in FFY 2017 to 122 in FFY 2018. In the other, individual incidences of noncompliance increased from 97 in FFY 2017 to 178 in FFY 2018. These 2 jurisdictions were responsible for 74% of all Indicator 7 noncompliance in FFY 2018. Both jurisdictions identified resource and staffing issues as the major reason for missing the 45 Day Timeline. Both jurisdictions were assigned Improvement Plans to facilitate correction of noncompliance and subsequent maintenance of future compliance.

**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.
Correction of Findings of Noncompliance Identified in FFY 2017

Provide additional information about this indicator (optional)

Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>8</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

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

At the systemic level, the MSDE, DEI/SES identified eight (8) findings of noncompliance in FFY 2017 for this indicator. All findings were corrected within one year of issuing the written finding of noncompliance (achieved 100%). To verify the correction of FFY 2017 noncompliance, an updated random sample of early intervention records, using the state's data system, from a data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, the MSDE, DEI/SES staff verified that the LITP identified with noncompliance in FFY 2017 was correctly implementing the specific regulatory requirements. This was based on a review of updated data subsequently collected regarding infants and toddlers who had an initial evaluation and initial assessment and an initial IFSP meeting conducted within Part C’s 45-day timeline. These data demonstrated that the LITP corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP Memo 09-02.

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

For FFY 2017, there were 271 individual level incidences of noncompliance. The MSDE, DEI/SES reviewed the records of each individual child that did not have an initial evaluation and initial assessment, and an initial IFSP meeting conducted within Part C’s 45-day timeline. Although late, the MSDE, DEI/SES verified that initial evaluations, assessments and IFSPs were provided for all 271 children. As mentioned above, a subsequent data set was also reviewed to determine if those records were compliant. Through the review process, the MSDE verified through its online database that each individual child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP Memo 09-02.

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

Actions taken if noncompliance not corrected

XX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

---

**Correction of Findings of Noncompliance Identified in FFY 2017**

Provide additional information about this indicator (optional)

In FFY 2009, the MSDE redesigned Maryland’s IFSP and Online IFSP Database. The major focus of the redesign was to create a more family-focused document. The revised Online IFSP Database gives users the ability to complete the IFSP online with IFSP data being entered directly into the database. This process helped to decrease data entry errors by data entry staff. In FFY 2018, the Maryland IFSP and Maryland Online IFSP Data System underwent major revisions including usability of the online tool to support both compliance and results. The revised data system includes a dashboard display of important information needed by service coordinators, service providers, and data managers to manage their workload and achieve program objectives.

In addition to general notification regarding ongoing workflows, the dashboard supports the monitoring of Part C Indicators in a variety of ways. This dashboard is dynamic and displays elements and information based on the role of the user.

Information that is found on the dashboard includes:

- Real-time alerts whenever an online referral is received (so that action is taken right away)
- List of children and their 45-day timelines (with ability to drill through to the child’s record)
- List of children and their 30-day timelines (with ability to drill through to the child’s record)
- Number of upcoming IFSP meetings, with ability to drill through to a full report which can be sorted and filtered
- Number of children older than 36 months and still active (to remind users of cases that need to be closed to maintain the integrity of the data)
- Number of children who are in TPM range (with ability to drill through to a full report which can be sorted and filtered
- Number of children with Extended IFSPs (for at-a-glance resource planning)

Provide additional information about this indicator (optional)
Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

7 - OSEP Response
The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified 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, OSEP could not determine whether the State 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 reports on the correction of eight systemic findings and 271 individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the eight systemic findings. It is not clear how the eight systemic findings and the 271 individual findings are aligned.

The FFY 2017 OSEP response noted that, “The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, OSEP could not determine whether the State verified that each EIS program or provider with noncompliance identified in FFY 2016 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 reports on the correction of 11 systemic findings and 140 individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the 11 systemic findings. It is not clear how the 11 systemic findings and the 140 individual findings are aligned.”

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 = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

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

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

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

**Instructions**

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

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

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

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

**Indicator 8B:** Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in 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 number of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers and age 3 should be included in the denominator.

**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.

**Instructions**

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

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>97.60%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>100%</td>
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</tr>
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<td>2014</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Target</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Data</td>
<td>99.94%</td>
<td>99.95%</td>
</tr>
</tbody>
</table>
 Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

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)

NO

If no, please explain.

The State's data also include children with transition steps and services added to the IFSP outside of the specified timeline as a result of documented delays attributed to exceptional family circumstances. Data also include ten (10) children, who had transition steps and services added to their IFSP, but late due to noncompliance. The reason for all 10 incidences of noncompliance was "staff errors." As mentioned, all 10 children, although late, had transition steps and services added to their IFSP as required.

<table>
<thead>
<tr>
<th>Number of children exiting Part C who have an IFSP with transition steps and services</th>
<th>Number of toddlers with disabilities exiting Part C</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,652</td>
<td>4,390</td>
<td>99.93%</td>
<td>100%</td>
<td>99.77%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

XXX

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.

728

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

Data reported for Indicator 8A were based on a database review of Early Intervention records of all children who transitioned between July 1, 2018 and June 30, 2019.

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

The MSDE and LITPs conducted online record reviews of all transitioning children to determine the percentage of children exiting Part C with timely transition steps and services. In FFY 2010, the MSDE began requiring transition outcomes to be entered directly into the IFSP database. This enabled the MSDE to obtain these data through electronic record review beginning in FFY 2011, whereas in prior years the MSDE had to conduct site visits with the sole purpose of collecting these data. In FFY 2012, changes were made to the predefined transition reports in the IFSP database to capture the “transition outcome” fields. Missing and/or unclear data were validated with local programs to ensure a complete analysis of data. These changes enabled the MSDE to report on all children who transitioned in the reporting year for the first time in FFY 2013 and continuing to present.

In FFY 2018, the MSDE generated state and local reports throughout the reporting period from the statewide Part C database, and validated data in conjunction with LITPs. The statewide database comprises every IFSP, including the Transition Outcomes (Steps and Services) information for all eligible children in Maryland. Once the reports are generated, local programs are asked to validate missing or unclear data before the reports are rerun and finalized.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

FFY 2017 Findings of Noncompliance Verified as Corrected

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

At the systemic level, the MSDE, DEI/SES identified two (2) findings of noncompliance in FFY 2017 for this indicator. All findings were corrected within one year of issuing the written finding of noncompliance (achieved 100%). To verify the correction of FFY 2017 noncompliance, an updated random sample of early intervention records, using the state's data system, from a data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, the MSDE, DEI/SES staff verified that the LITP identified with noncompliance in FFY 2017 was correctly implementing the specific regulatory requirements. This was based on a review of updated data subsequently
collected regarding infants and toddlers who had an IFSP developed 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. These data demonstrated that the LITP corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP Memo 09-02.

Describe how the State verified that each individual case of noncompliance was corrected
For FFY 2017, there were three (3) individual level incidences of noncompliance. The MSDE, DEI/SES reviewed the records of each individual child that did not have an IFSP developed with transition steps and services at least 90 days and not more than nine months, prior to the toddler's third birthday. Although late, the MSDE, DEI/SES verified that transition steps and services were added to the IFSP for all 3 children. As mentioned above, a subsequent data set was also reviewed to determine if those records were compliant. Through the review process, the MSDE verified through its online database that each individual child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP Memo 09-02.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

Findings of Noncompliance Not Yet Verified as Corrected

<table>
<thead>
<tr>
<th>Actions taken if noncompliance not corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXX</td>
</tr>
</tbody>
</table>

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

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

Findings of Noncompliance Not Yet Verified as Corrected

<table>
<thead>
<tr>
<th>Actions taken if noncompliance not corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXX</td>
</tr>
</tbody>
</table>

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

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

Findings of Noncompliance Not Yet Verified as Corrected

<table>
<thead>
<tr>
<th>Actions taken if noncompliance not corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXX</td>
</tr>
</tbody>
</table>

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

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

Findings of Noncompliance Not Yet Verified as Corrected

<table>
<thead>
<tr>
<th>Actions taken if noncompliance not corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXX</td>
</tr>
</tbody>
</table>

8A - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

8A - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified 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, OSEP could not determine whether the State 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 reports on the correction of two systemic findings and three individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the two systemic findings. It is not clear how the two systemic findings and the three individual findings are aligned.

The FFY 2017 OSEP response noted that, "The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, OSEP could not determine whether the State verified that each EIS program or provider with noncompliance identified in FFY 2016 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 reports on the correction of four systemic findings and seven individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the four systemic findings. It is not clear how the four systemic findings and the seven individual findings are aligned."

The State did not provide the reasons for delay, as required by the measurement table.

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

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

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

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

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

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

Indicators 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 the 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.

Indicators 8B, 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

<table>
<thead>
<tr>
<th></th>
<th>2005</th>
<th>98.90%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY</td>
<td>2013</td>
<td>2014</td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Data</td>
<td>100.00%</td>
<td>100.00%</td>
</tr>
</tbody>
</table>
Targets

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

FFY 2018 SPP/APR Data
Data include notification to both the SEA and LEA
YES
If no, please explain.

<table>
<thead>
<tr>
<th>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</th>
<th>Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>4,390</td>
<td>4,390</td>
<td>100.00%</td>
<td>100%</td>
<td>100.00%</td>
<td>Met Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable
XXX

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
The statewide database comprises every IFSP, including the required child and family notification information. To report the target data for Indicator 8B, the MSDE generated monthly reports of all children older than 24 months of age. Each month, the MSDE generated a report with the names, addresses, phone numbers, and birthdates of all children 24-months and older. The reports were sorted by jurisdiction and then uploaded to a secure server for download by both Part C and Part B local staff. The requirement to notify the SEA is met automatically, since the MSDE is the lead agency and the DEI/SES structure is birth to kindergarten in nature.

Between 7/1/18 and 6/30/19, local school systems and the SEA were notified of all 4,390 of the children, potentially eligible for Part B, who transitioned during the time period (4,3904,390). Notification for 3,962 children occurred at least 90 days prior to the child’s third birthday. Another 428 children were found eligible for Part C less than 90 days prior to their third birthday as a result of later referrals to the program. Notification still occurred for all 4,390 children. Therefore, timely notification to the SEA and LEA (or late notification with a valid reason) occurred for all children potentially eligible for Part B services.

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

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

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

Describe the method used to select EIS programs for monitoring.
XXX

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).
Data include all children who transitioned in the reporting year, from July 1, 2018 - June 30, 2019.

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.
The statewide database comprises every IFSP, including the required child and family notification information. The MSDE ensures accurate data through data validation monitoring and through the assignment of Improvement Plans for untimely and/or inaccurate data. Since the MSDE provides these data to the LEA and SEA on a monthly basis, the MSDE ensures notification is provided for every child found eligible for early intervention services.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

Describe how the State verified that each individual case of noncompliance was corrected
**Corrections of Findings of Noncompliance Identified Prior to FFY 2017**

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

Findings of Noncompliance Verified as Corrected
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements
XXX
Describe how the State verified that each individual case of noncompliance was corrected
XXX

Findings of Noncompliance Not Yet Verified as Corrected
Actions taken if noncompliance not corrected
XXX

**8B - Prior FFY Required Actions**
None
Response to actions required in FFY 2017 SPP/APR

**8B - OSEP Response**

**8B - Required Actions**
**Indicator 8C: Early Childhood Transition**

**Instructions and Measurement**

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

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

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

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

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

**Instructions**

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

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

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

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

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of the 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

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2005</th>
<th>92.00%</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2013</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2014</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2015</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2016</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FFY 2017</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Target</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Data</td>
<td>99.53%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>99.06%</td>
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</tr>
<tr>
<td></td>
<td>99.35%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>99.62%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>99.75%</td>
<td></td>
</tr>
</tbody>
</table>
**Targets**

<table>
<thead>
<tr>
<th></th>
<th>FFY 2018</th>
<th>FFY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**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)

NO

If no, please explain.

Data include children with documented delays attributable to exceptional family circumstances. Data also include 25 children who’s transition conferences were held untimely as a result of noncompliance and 2 children who did not have a transition conference as a result of noncompliance. Of the 25 children with untimely transition conferences, 18 were late due to staff/administrative errors, 6 were late due to weather, and 1 was late due to an interpreter issue. The 2 children who did not have transition conferences (both due to staff/administrative errors) were no longer within the jurisdiction once noncompliance was identified, so transition conferences could not be held.

<table>
<thead>
<tr>
<th>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</th>
<th>Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,541</td>
<td>4,390</td>
<td>99.75%</td>
<td>100%</td>
<td>99.38%</td>
<td>Did Not Meet Target</td>
<td>No Slippage</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

XXX

**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.

31

**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.

791

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

Data include all children who transitioned in the reporting year, from July 1, 2018 - June 30, 2019.

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

For Indicator 8C, transition compliance data were tracked by the MSDE and LITPs throughout the reporting period. Children whose parents did not consent to participate in a transition-planning conference were not included in the numerator or denominator for 8C. In FFY 2018, thirty-one (31) families declined or did not make themselves available to participate in a transition planning meeting for their family.

To report on Indicator 8C, the MSDE generated state and local reports throughout the reporting period from the statewide Part C database, and validated data in conjunction with LITPs. The statewide database comprises every IFSP, including the Transition Planning Meeting information for all eligible children in Maryland. The reports generated by the MSDE to report on Indicator 8C are based on the calculation of the number of days between the date of the transition planning meeting and the child’s third birthday. Once the reports are generated, local programs are asked to validate missing or unclear data before the reports are rerun and finalized.

Provide additional information about this indicator (optional)

**Correction of Findings of Noncompliance Identified in FFY 2017**

<table>
<thead>
<tr>
<th>Findings of Noncompliance Identified</th>
<th>Findings of Noncompliance Verified as Corrected Within One Year</th>
<th>Findings of Noncompliance Subsequently Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>6</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

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

At the systemic level, the MSDE, DEI/SES identified six (6) findings of noncompliance in FFY 2017 for this indicator. All findings were corrected within one year of issuing the written finding of noncompliance (achieved 100%). To verify the correction of FFY 2017 noncompliance, an updated random
sample of early intervention records, using the state's data system, from a data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, the MSDE, DEI/SES staff verified that the LITP identified with noncompliance in FFY 2017 was correctly implementing the specific regulatory requirements. This was based on a review of updated data subsequently collected regarding infants and toddlers who had a 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. These data demonstrated that the LITP corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP Memo 09-02.

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

For FFY 2017, there were eleven (11) individual level incidences of noncompliance. The MSDE, DEI/SES reviewed the records of each individual child that did not have a transition conference held at least 90 days, and not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. Although late, the MSDE, DEI/SES verified that transition conferences were held for all 11 children. As mentioned above, a subsequent data set was also reviewed to determine if those records were compliant. Through the review process, the MSDE verified through its online database that each individual child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP Memo 09-02.

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

Actions taken if noncompliance not corrected

XXX

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

<table>
<thead>
<tr>
<th>Year Findings of Noncompliance Were Identified</th>
<th>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</th>
<th>Findings of Noncompliance Verified as Corrected</th>
<th>Findings Not Yet Verified as Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

Actions taken if noncompliance not corrected

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

Actions taken if noncompliance not corrected

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

Actions taken if noncompliance not corrected

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

Actions taken if noncompliance not corrected

XXX

**8C - Prior FFY Required Actions**

None

Response to actions required in FFY 2017 SPP/APR
8C - OSEP Response

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified 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, OSEP could not determine whether the State 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 reports on the correction of six systemic findings and 11 individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the six systemic findings. It is not clear how the six systemic findings and the 11 individual findings are aligned.

The FFY 2017 OSEP response noted that, "The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2016 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, OSEP could not determine whether the State verified that each EIS program or provider with noncompliance identified in FFY 2016 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 reports on the correction of eight systemic findings and 15 individual findings. However, the State only reports verifying that the source of noncompliance is correctly implementing the specific regulatory requirements for the eight systemic findings. It is not clear how the eight systemic findings and the 15 individual findings are aligned."

The State did not provide the reasons for delay, as required by the measurement table.

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.

NO
Provide an explanation of why it is not applicable below.

Select yes to use target ranges.
Target Range is 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
Provide an explanation below.

Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints</td>
<td>11/11/2019</td>
<td>3.1 Number of resolution sessions</td>
<td>0</td>
</tr>
<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints</td>
<td>11/11/2019</td>
<td>3.1(a) Number resolution sessions resolved through settlement agreements</td>
<td>0</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

In preparation for the current APR cycle, the MSDE began discussions about new targets with stakeholders at a Professional Learning Institute (PLI) statewide meeting in January 2014. During the meeting, results trend data were shared, proposed target scenarios were provided, and stakeholders were given the opportunity to suggest specific targets for each results indicator. In addition, the MSDE created a SPP/APR Stakeholder Survey to obtain stakeholder feedback regarding proposed SPP/APR targets. Feedback from stakeholders was received through December 5, 2014. Results from this survey guided final target setting and were presented at the January 8, 2015 SICC meeting.

No changes to baselines are being proposed for FFY 2018 but as required by the OSEP, the MSDE has set targets for all results indicators for FFY 2019. To set targets, the MSDE obtained stakeholder feedback through a survey sent to MITP stakeholders, including Local Special Education Directors, Local Infants and Toddlers Directors, and all members of the State Interagency Coordinating Council. Survey results guided target setting and proposed targets are included with this APR submission.

Throughout FFY 2018, the MSDE provided information and preliminary data on the Part C APR indicators and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including the SICC, local ITP directors, and local special education directors. Updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings throughout the reporting period. Annually, the draft APR and data are presented to the SICC; the presentation for FFY 2018 occurred on December 5, 2019.

Historical Data

<table>
<thead>
<tr>
<th>Baseline</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
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<tbody>
<tr>
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</table>
Target >=  
Data

<table>
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<tr>
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<th>2018</th>
<th>2019</th>
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</thead>
<tbody>
<tr>
<td>Target &gt;=</td>
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<td>XXX</td>
</tr>
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**FFY 2018 SPP/APR Data**

<table>
<thead>
<tr>
<th>3.1(a) Number resolutions sessions resolved through settlement agreements</th>
<th>3.1 Number of resolutions sessions</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
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**Targets**

<table>
<thead>
<tr>
<th>FFY</th>
<th>2018 (low)</th>
<th>2018 (high)</th>
<th>2019 (low)</th>
<th>2019 (high)</th>
</tr>
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<tbody>
<tr>
<td>Target</td>
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<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**FFY 2018 SPP/APR Data**

<table>
<thead>
<tr>
<th>3.1(a) Number resolutions sessions resolved through settlement agreements</th>
<th>3.1 Number of resolutions sessions</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target (low)</th>
<th>FFY 2018 Target (high)</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
</tr>
</thead>
<tbody>
<tr>
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<td>0</td>
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<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

XXX

Provide additional information about this indicator (optional)

There were no resolution sessions in FFY 2018.

**9 - Prior FFY Required Actions**

None

Response to actions required in FFY 2017 SPP/APR

**9 - OSEP Response**

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

**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)) divided by 2.1) times 100.

Instructions

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

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

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

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

Provide an explanation below

Prepopulated Data

<table>
<thead>
<tr>
<th>Source</th>
<th>Date</th>
<th>Description</th>
<th>Data</th>
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<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests</td>
<td>11/11/2019</td>
<td>2.1 Mediations held</td>
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<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests</td>
<td>11/11/2019</td>
<td>2.1.a.i Mediations agreements related to due process complaints</td>
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<tr>
<td>SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests</td>
<td>11/11/2019</td>
<td>2.1.b.i Mediations agreements not related to due process complaints</td>
<td>0</td>
</tr>
</tbody>
</table>

Targets: Description of Stakeholder Input

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Targets

<table>
<thead>
<tr>
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<th>2018</th>
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</tr>
</thead>
<tbody>
<tr>
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**FFY 2018 SPP/APR Data**

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<thead>
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<th>2.1.a.i Mediation agreements related to due process complaints</th>
<th>2.1.b.i Mediation agreements not related to due process complaints</th>
<th>2.1 Number of mediations held</th>
<th>FFY 2017 Data</th>
<th>FFY 2018 Target (low)</th>
<th>FFY 2018 Target (high)</th>
<th>FFY 2018 Data</th>
<th>Status</th>
<th>Slippage</th>
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<td>N/A</td>
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<td></td>
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</tbody>
</table>

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<th>2019 (high)</th>
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<tbody>
<tr>
<td>Target</td>
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<td>XXX</td>
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<th>2.1.b.i Mediation agreements not related to due process complaints</th>
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<td>XXX</td>
</tr>
</tbody>
</table>

Provide reasons for slippage, if applicable

XXX

Provide additional information about this indicator (optional)

There were no mediations held in FFY 2018.

**10 - Prior FFY Required Actions**

None

Response to actions required in FFY 2017 SPP/APR

**10 - OSEP Response**

The State reported fewer than ten mediations held in FFY 2018. The State is not required to provide 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:
Marcella Franczkowski

Title:
Assistant State Superintendent

Email:
marcella.franczkowski@maryland.gov

Phone:
4107670238

Submitted on:
04/24/20 2:37:47 PM