

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2023**

Maryland



**PART C DUE
February 3, 2025**

**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) and early intervention service (EIS) providers and EIS programs meets the requirements of Part C of the IDEA. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary

The Maryland State Department of Education (MSDE), Division of Early Intervention/Special Education Services (DEI/SES) has the responsibility under the Individuals with Disabilities Education Act (IDEA) to have a comprehensive system of general supervision that monitors the implementation of the IDEA, State laws, and applicable federal and State regulations. The mission of the DEI/SES is to provide leadership, support, and accountability for results to Local Education Agencies (LEAs), twenty-four (24) Local Infants and Toddlers Programs (LITPs), Public Agencies (PAs), and stakeholders through the provision of a seamless, comprehensive system of coordinated services to infants, toddlers, young children, and youth with disabilities, birth through age 21, and their families. MSDE continues to implement the Extended IFSP Option that allows families to choose the continuation of early intervention services after the child turns three until the beginning of the school year following the child's fourth birthday if the child is determined eligible for Part B special education services.

The Division is organized into five branches with early childhood integrated throughout:

- Policy and Accountability;
- Performance Support and Technical Assistance (TA);
- Family Support and Dispute Resolution;
- Interagency Collaboration; and
- Resource Management and Monitoring.

The Division's matrix organizational design integrates knowledge to improve compliance and results and ensures consistent communication within the DEI/SES, throughout MSDE, and with external stakeholders and partners.

Through the implementation of cross-matrix leadership, the DEI/SES is committed to the following essential principles to improve results and functional outcomes for all children and youth with developmental delays and disabilities and their families:

Transparency: Maintaining an open door to stakeholders and regularly communicating through formal and informal outreach

Stakeholder Engagement: Engaging our stakeholders in timely and meaningful consultation on priority topics, including policies that affect children with disabilities

Effectiveness: Serving stakeholders in a timely and effective manner and ensuring the availability of the best "real-time" data for decision-making and dissemination of evidence-based models throughout the State

Alignment: Arranging our priorities to be synchronous with those of MSDE and federal requirements while also including the concerns of our LEAs, PAs, and advocates

Accountability: Striving to improve compliance and performance results for all local infants and toddlers programs. The DEI/SES has developed a tiered system of general supervision and performance support, the Differentiated Framework, to identify systems and agencies in need of differentiated support and TA.

The Differentiated Framework includes tiers of general supervision and engagement (Universal, Targeted, Focused, and Intensive) to improve birth through 21 special education/early intervention results. Essential components of Maryland's comprehensive system of general supervision include (see General Supervision section for detailed information):

- Effective policies and procedures
- State Performance Plan (SPP) goals and targets
- Accountability to Improve Performance (AIP)
- Fiscal management
- Dispute resolution
- Targeted TA and support
- Data on Processes and Results
- Improvement, Correction, Incentives, & Sanctions

The DEI/SES has aligned its general supervisory responsibilities with engagement for performance support and TA to provide a tiered system of monitoring and support to address the needs of each LITP. The Differentiated Framework illustrates the shared responsibility and shared accountability to improve results for children with disabilities. The DEI/SES is committed to maintaining compliance and providing support to improve the quality of early intervention services. An LITP is assigned to a tier based upon performance on federal compliance and results indicators, correction of noncompliance, analysis of data, fiscal management, monitoring findings and a comprehensive analysis of the LITP's needs.

The Differentiated Framework involves directing the DEI/SES' attention to LITPs in need of more comprehensive engagement, TA, and support in order to enable those programs to meet indicator targets, improve results, narrow the achievement gap, correct identified noncompliance, and maintain compliance.

The majority of the LITPs are in the Universal Tier of General Supervision/Engagement. This Tier represents LITPs that have met identified performance and compliance criteria, resulting in a determination status of "Meets Requirements" or are in the first year of "Needs Assistance." In the Universal Tier, the focus is on professional learning and follow-up coaching and support to address statewide needs based on overall State trend data. This includes general information related to early intervention policies, procedures, and practices, as well as the general work of MSDE. Examples of statewide TA include State and regional professional development, online tools, resources through MSDE websites, Q&A Documents, and TA Bulletins. Comprehensive monitoring for the Universal Tier occurs once every four years.

An LITP receiving a determination status of "Needs Assistance" for two consecutive years or one year of "Needs Intervention" is assigned to the Targeted Tier. An LITP in this tier may have an active Corrective Action Plan(s) (CAPs) for identified noncompliance or if compliance is not sustained despite correction within the required one-year time period. The corresponding Targeted Tier focuses on professional learning and support (training, coaching, and TA) to address the needs of the LITP on specific topics identified through general supervision. It is a responsive and proactive approach

to prevent the LITP from needing substantial support. The LITP leadership is required to engage with the DEI/SES to review State and local data and information in order to implement an Improvement Plan (IP) that is approved by the DEI/SES to build capacity to effectively address the identified needs. LITPs in the Targeted Tier receive comprehensive monitoring every three years.

An LITP receiving a determination status of "Needs Assistance" for three consecutive years, "Needs Intervention" for two consecutive years, or "Needs Substantial Intervention" for one year is assigned to the Focused Tier. At this level, the goal of the Focused Tier is to direct substantial support to address the continuous lack of improvement of the LITP through significant systems change. A multi-faceted State and local leadership team meets regularly to develop and implement an action plan designed to effect systems change in policy, program, instructional practices, and professional learning at multiple systems levels. The State Superintendent and the DEI/SES Assistant State Superintendent work closely with the local School Superintendent or local lead agency (LLA) Head to develop a cross-departmental, cross-divisional State and local implementation team. MSDE provides increased oversight activities to assess progress and may direct federal funds, impose special conditions, and/or require regular submission of data. Comprehensive monitoring for LITPs in the Focused Tier occurs bi-annually.

At the highest tier, the Intensive Tier, an LITP fails to progress and correct previously identified noncompliance despite receiving TA and support. The failure to comply has affected core requirements, such as the delivery of services to children with developmental delays and disabilities or the provision of effective general supervision and oversight. The LITP enters into a formal agreement with MSDE to guide improvement and may have additional sanctions. MSDE may direct, recover, or withhold State or federal funds. Comprehensive monitoring for LITPs in the Intensive Tier occurs annually.

Additional information related to data collection and reporting

General Supervision System

The systems that are in place to ensure that the IDEA Part C requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions). Include a description of all the mechanisms the State uses to identify and verify correction of noncompliance and improve results. This should include, but not be limited to, State monitoring, State database/data system, dispute resolution, fiscal management systems as well as other mechanisms through which the State is able to determine compliance and/or issue written findings of noncompliance. The State should include the following elements:

Describe the process the State uses to select EIS providers and/or EIS programs for monitoring, the schedule, and number of EIS providers/programs monitored per year.

Much of the work of MSDE, DEI/SES relies on the Differentiated Framework, which establishes tiers of supervision and support. A LITP and LEA/PA is assigned to one of four tiers – Universal, Targeted, Focused, or Intensive – based upon performance on the SPP/APR compliance and results Indicators, correction of noncompliance, analysis of data, fiscal management, and monitoring findings. The DEI/SES uses this comprehensive information to provide differentiated engagement, focused on building capacity, to improve performance, and directs State resources to those LITPs and LEAs/PAs that are the lowest-performing. Its assigned Tier of General Supervision determines a LITP's and LEA's/PA's performance monitoring cycle, Differentiated Framework (above), the frequency of which is as follows:

Tier of General Supervision/Monitoring Frequency

Intensive Tier/Every Year

Focused Tier/Every Two Years

Targeted Tier/Every Three Years

Universal Tier/Every Four Years

The DEI/SES assigns Maryland's LITPs and LEAs/PAs to Tiers of Supervision based on annual SPP/APR data. The number of LITPs and/or LEAs/PAs varies annually based on their assigned Tier of General Supervision; however, each LITP and/or LEA/PA receive comprehensive monitoring at least once every four years. If a LITP and/or LEA/PA assigned to one particular Tier of General Supervision (i.e., Universal) based on one specific year of SPP/APR data is placed into a higher Tier of General Supervision (i.e., Targeted) based on a subsequent year's SPP/APR data, the DEI/SES will modify the LITP's and/or LEA's/PA's performance monitoring schedule based on the LITP's/LEA's/PA's new Tier of General Supervision.

The DEI/SES may conduct additional monitoring activities based on Indicator data verification, trends and patterns emerging from State and due process complaints, fiscal data, family support information, advocacy concerns, and as directed by the Assistant State Superintendent. The DEI/SES may conduct additional monitoring activities based on Indicator data verification, trends and patterns emerging from State and due process complaints, fiscal data, family support information, advocacy concerns, and as directed by the Assistant State Superintendent. The DEI/SES also conducts additional targeted monitoring activities when it receives credible allegations of potential noncompliance.

Subrecipient Fiscal Monitoring

The Resource Management and Monitoring Branch conducts ten (10) fiscal monitoring visits annually. The schedule of annual monitoring is dependent on the date of the prior monitoring visit and annual self-assessment data. Each LITP is monitored at least once every six (6) years.

Describe how child records are chosen, including the number of child records that are selected, as part of the State's process for determining an EIS provider's and EIS program's compliance with IDEA requirements and verifying the EIS provider/program's correction of any identified compliance.

For Part C Desk Audit Reviews, the Monitoring Specialists will audit current-year Individualized Family Service Plans (IFSP) and Individualized Education Programs (IEP) from a randomly selected sample of children and students via ELEVATE, the State's Performance Monitoring System. The purpose of the audit is to allow the Monitoring Specialists to identify significant IFSP/IEP development and implementation trends in the LITP and LEA/PA. The Monitoring Specialists primarily use the Maryland Online IFSP, and the Maryland Online IEP tools to conduct desk audits. If the Monitoring Specialist is monitoring an LITP/LEA/PA that does not use the Maryland Online IEP system, the Monitoring Specialist will work with the LITP/LEA/PA staff to access the randomly selected IEPs, preferably through electronic review on the LITP/LEA's/PA's online system. Part C: The number of IFSPs the Monitoring Specialists audit is based on the number of children receiving Part C services from the LITP (identified by small, medium and large jurisdictions). Records are also pulled from each age band (birth to 1, 1 to 2, 2 to 3, and Extended IFSP). The DEI/SES staff use various parameters to randomly select children for the IFSP desk audits, including children with a range of eligibility criteria across varied ages.

Part C supporting documentation to include:

- Signed consent for screening, assessment/evaluation, and initiation of Early Intervention (EI) services;
- Evaluation reports;
- Prior Written Notice (PWN);
- Sign-in sheets; and
- Progress on outcomes.

For Part C Related Service Record Reviews, the Monitoring Specialist will review twenty-five (25) Part C service records for each LITP; for a period of four (4) months, including at least one (1) summer month. ELEVATE randomly selects a sample of service records reviewed for direct services, not consult, for special instruction, Speech and Language Therapy, Physical Therapy, and Occupational Therapy. The LITP must upload to ELEVATE early intervention visit logs/notes indicating:

1. The length of time of each service session;
2. Activities completed during the session;
3. Progress toward child and family outcomes; and
4. Provider's signature and title.

Compliance is determined by ensuring that each IFSP is meeting the regulatory requirements of IDEA and COMAR. Monitors use the State's Desk Audit Tool (<https://marylandpublicschools.org/programs/Documents/Special-Ed/Desk-Audit-Tool-2024-2025-A.pdf>), which has been integrated into the State's Elevate System.

For SPP/APR Indicators, the state does not use survey data. All compliance data comes from the Special Services Information System (SSIS). All student records applicable to the compliance indicators are reviewed and noncompliance is identified.

The issuance of the Monitoring Report and/or Local Determinations (the State's Notification of Noncompliance, for monitoring and SPP/APR indicators, respectively) begins the one (1) year timeline for the correction of identified noncompliance. The OSEP, as indicated in the OSEP QA 23-01, requires a Two-prong correction process. If both reviews result in 100% compliance, correction is achieved, and the correction of noncompliance is complete. However, if 100% correction is not reached within the one (1) year timeline, a Corrective Action Plan(s) is required. Child/Student Specific Noncompliance Prong 1 The LITP/LEA/PA must submit data demonstrating correction of all individual child/student-specific findings of noncompliance. Prong 2 The Monitoring Specialists will verify the correction of the noncompliance by reviewing documents that evidence program-level corrective actions by selecting a smaller sample of child/student records that were not reviewed in the original audit process.

If Systemic Noncompliance is identified, the LITP and/or LEA/PA must develop, submit, and implement an Improvement Plan(s) to address each item/area of Systemic Noncompliance. System Noncompliance is identified when an audit item is rated at seventy-five percent (75.00%) or less compliant for a sample size of at least five (5) records.

Still, any level of noncompliance requires the Two-prong correction process (even if compliance does not fall below 75%).

Additional Information on the State's Monitoring Process can be found here: <https://marylandpublicschools.org/programs/Pages/Special-Education/PAB/index.aspx>

Describe the data system(s) the State uses to collect monitoring and SPP/APR data, and the period from which records are reviewed.

The majority of data reported in the APR, as well as data used for pulling child records for monitoring, comes from the Maryland Online IFSP System. The system is used by all 24 LITPs and contains the active and previously active IFSPs of all children who received services through the Maryland Infants and Toddlers Program. Other Data sources include the Parent Survey and Elevate, Maryland's performance management system (for dispute resolution data).

Data for monitoring is exported from the Maryland Online IFSP System to the State's performance monitoring system, Elevate, for the record review and related service audits. Early intervention records for monitoring are pulled for the 2-3 months prior to the monitoring activities.

For the SPP/APR, all data are from the entire reporting year required (July 1, 2023-June 30, 2024). The State does not use any sampling for its Indicator reporting.

Dispute resolution data comes from the Elevate system and records are pulled from the current FFY reporting period. These data are ultimately prepopulated into the APR system by the USDE.

Correction of noncompliance data is handled by several different branches within the DEI/SES. Each Branch reports to the Branch Chief for Policy and Accountability on the timeliness of correction for each finding of noncompliance to be reported in the APR, as well as used in local determinations. The Policy and Accountability Branch tracks the correction of findings made using APR data and comprehensive monitoring. The Resource Management and Monitoring Branch tracks the correction of fiscal findings. The Family Support and Dispute Resolution Branch tracks the correction of findings made through dispute resolution processes.

Describe how the State issues findings: by EIS provider and/or EIS program; and if findings are issued by the number of instances or by EIS provider and/or EIS program.

For dispute resolution, the State makes findings by the number of individual incidences of noncompliance since these are dependent upon periodic investigations that occur throughout the year. For monitoring and APR data, the state makes findings by LITPs/LEAs/PAs using comprehensive monitoring reports and report cards/determinations, respectively, because monitoring reports and determinations occur only one (1) time annually. Tracking of the correction noncompliance occurs through the Maryland Elevate System.

If applicable, describe the adopted procedures that permit its EIS providers/ programs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction).

The State does not utilize pre-finding correction.

Describe the State's system of graduated and progressive sanctions to ensure the correction of identified noncompliance and to address areas in need of improvement, used as necessary and consistent with IDEA Part C's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State policies.

The DEI/SES has aligned its responsibility for general supervision with tiers of engagement for program support and technical assistance to provide a Multi-Tiered System of Support for monitoring and technical assistance to address the needs of each LITP/LEA/PA. The Differentiated Framework illustrates the shared responsibility and shared accountability to improve results for children and youth with disabilities. The DEI/SES is committed to maintaining compliance and providing supports to improve the quality of special education services. An LITP/LEA/PA is assigned to a tier of general supervision and oversight based upon performance on federal compliance and results indicators, correction of noncompliance, analysis of data, fiscal management, and monitoring findings. The corresponding programmatic support an LITP/LEA/PA can expect to receive is differentiated and based on their assigned tier and a comprehensive analysis of the public agency's needs. The Differentiated Framework directs the DEI/SES' attention to LITPs/LEAs/PAs in need of more comprehensive engagement, technical assistance, and support to enable those LITP/LEAs/PAs to meet indicator targets, improve results, narrow the achievement gap, correct identified noncompliance, and maintain compliance.

Universal Tier

In the Universal Tier of Engagement, the focus is on professional development/learning and support to address statewide needs based on overall State trend data (e.g., performance on SPP Indicators, child outcomes, and student achievement). This includes general information related to special education policies, procedures and practices, as well as the general work of the MSDE. Examples of statewide technical assistance include State and regional professional development, online tools, resources through the DEI/SES' Elevates website (formerly Maryland Learning Links: <https://elevates.marylandpublicschools.org/>) and Technical Assistance Bulletins. Comprehensive monitoring for the universal tier occurs once every four years.

Targeted Tier

An LITP/LEA/PA receiving a determination status of "Needs Assistance" for two consecutive years or "Needs Intervention" for one year is assigned to the Targeted Tier of General Supervision. An LITP/LEA/PA in this tier may have an active Corrective Action Plan(s) (CAPs) for uncorrected noncompliance.

Comprehensive monitoring occurs every three years and includes customized data analysis with real-time local and State data. Activities may include but are not limited to: student record reviews using selected sections of the student record review document, a review of policies, procedures, and practices, a review of the LITP/LEA/PA's system of general supervision, interview questions, and/or case studies. State and local joint cross-departmental and cross-divisional teams are formed to address identified needs. The LITP/LEA/PA develops a local Improvement Plan which is submitted to and approved by the DEI/SES.

In accordance with 34 C.F.R. §300.604(a), if Maryland determines, for two consecutive years, a public agency needs assistance under §300.603(b)(1)(ii) in implementing the requirements of the IDEA, the MSDE must take one or more of the following actions:

- (1) Advise the public agency of available sources of technical assistance that may help to address the identified areas in which the public agency needs assistance;
- (2) Direct the use of federal funds, in accordance with 34 C.F.R. §300.604(a)(2), on the area or areas in which the public agency needs assistance; and/or
- (3) Identify the public agency as a high-risk grantee and impose special conditions on the public agency application for federal funds under the IDEA.

The corresponding Targeted Tier of Engagement focuses on professional learning and support (training, coaching, and technical assistance) to address the needs of the LITP/LEA/PA on specific topics identified through general supervision. It is a responsive and proactive approach to prevent the LITP/LEA/PA from needing substantial support. The LITP/LEA/PA leadership is required to engage with the DEI/SES to review State and local data and information in order to implement an Improvement Plan that is approved by the DEI/SES to build capacity to effectively address the identified needs. Evaluation and periodic feedback are critical elements of Targeted Engagement. A Targeted Assistance and Support Committee (TASC) team, consisting of jointly identified local and state cross-divisional members, provides performance-based and responsive support.

Focused Tier

An LITP/LEA/PA receiving a determination status of "Needs Assistance" for three consecutive years, "Needs Intervention" for two consecutive years, or "Needs Substantial Intervention" for one year is assigned to the Focused Tier of General Supervision. These LITPs/LEAs/PAs generally continue to have findings of noncompliance, have active CAPs for uncorrected noncompliance for two or more years, and demonstrate little progress despite general and targeted technical assistance. These LITPs/LEAs/PAs also may have issues meeting multiple state targets for results indicators.

At this level, the goal of the Focused Tier of Engagement is to direct substantial support to address the continuous lack of improvement of the LITP/LEA/PA through significant systems change. A joint multi-faceted State and local Focused Intervention and Accountability Team (FIAT) meet quarterly to develop, implement, and review progress in affecting systems change in policy, program, instructional practices, and professional learning at multiple systems levels. Principles of effective systems change, implementation, evaluation, and sustainability are foundational elements of the technical assistance. Frequent feedback and general supervision are maintained throughout the extent of the technical assistance. Comprehensive monitoring occurs every other year for LITPs/LEAs/PAs in the focused tier.

In accordance with 34 C.F.R. §300.604(b), if Maryland determines, for three or more consecutive years, that a public agency needs intervention under §300.603(b)(1)(iii) in implementing the requirements of the IDEA, the MSDE must implement enforcement actions. The MSDE may:

- (1) Take any of the actions described in 34 C.F.R. §300.604(a); and/or
- (2) Take one or more of the following actions:
 - (i) Requires the public agency to prepare a corrective action plan or improvement plan if the MSDE determines that the public agency should be able to correct the problem within one year;
 - (ii) Require the public agency to enter into a compliance agreement under section 457 of the General Education Provisions Act, as amended, 20 U.S.C. §1221 et seq. (GEPA), if the MSDE has reason to believe that the public agency cannot correct the problem within one year;
 - (iii) For each year of the determination, withholds not less than 20 percent and not more than 50 percent of the State's funds under Section 611(e) of the IDEA, until the MSDE determines the public agency has sufficiently addressed the areas in which the public agency needs intervention;
 - (iv) Seeks to recover funds under Section 452 of the GEPA; and/or
 - (v) Withholds, in whole or in part, any further payments to the public agency under Part B of the IDEA.

Intensive Tier

At the highest tier, the Intensive Tier of General Supervision, an LITP/LEA/PA fails to progress and correct previously identified noncompliance despite receiving technical assistance and support. The failure to comply has affected the core requirements, such as the delivery of services to students with disabilities or to provide effective general supervision and oversight. The LITP/LEA/PA enters into a formal agreement with the MSDE to guide improvement and may have additional sanctions. The LITP/LEA/PA informs the MSDE of its unwillingness to comply with core requirements.

Describe how the State makes annual determinations of EIS program performance, including the criteria the State uses and the schedule for notifying EIS programs of their determinations. If the determinations are made public, include a web link for the most recent determinations.

Each year, the State assigns each LITP/LEA/PA with a determination (Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention). To make determinations, the State uses a results-based rubric on identified indicators to rate the performance for each LITP/LEA/PA in meeting the State's targets as defined by the State Performance Plan for Part C and Part B. For both Part C and Part B, the rubric includes both compliance and results. The rubric is located on the right-hand side of the mdideareport.org website. Beginning for FFY 2022 determinations, the State began using the Elevate System to calculate the determinations based on the rubric. Unless the state is setting a new baseline for an indicator, all SPP/APR indicators are used in the State's rubric. Determinations are typically released to LITPs and LEAs/PAs around May. Once released, the status and results for each LITP and LEA/PA are posted, as required, on the MSDE Public Website of State Performance Plan Results at

<http://mdideareport.org> no later than July 1, annually. Current determination letters are posted within each LITP or LEA/PA. Past determination letters can be found along the right-hand side.

Provide the web link to information about the State's general supervision policies, procedures, and process that is made available to the public.

<https://marylandpublicschools.org/programs/Pages/Special-Education/PAB/index.aspx>

Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to EIS programs.

Through the DEI/SES's strategic plan, Moving Maryland Forward: Sharpen the Focus, the DEI/SES focuses on building the capacity of LITPs, LEAs, PAs, and IHE, to narrow the performance gap and enable all children to be kindergarten ready. The DEI/SES works collaboratively with other Divisions within MSDE to improve performance on statewide accountability measures and achievement of the Maryland College and Career Ready Standards. As described under the General Supervision Section, the Tiers of Engagement provide differentiated program support and technical assistance based on State and local needs related to implementing a high-quality, seamless, evidence-based early childhood intervention system of services. A specific State birth to kindergarten liaison is designated for each LITP and supports data-informed systematic planning, implementation, and evaluation of evidence-based professional learning to enhance the quality of recommended early childhood practices, including assessment, environment, family partnerships, instruction, intervention, teaming and collaboration, and transition. The differentiated engagement model focuses on building capacity to improve results and direct State resources to those LITPs that are the lowest performing while recognizing and providing the support needed to publish and disseminate successful best practices from those LITPs which are achieving success. The State engages with LITPs using an implementation science-based approach called Team, Analyze, Plan, Implement, Track.

Team, Analyze, Plan, Implement, Track (TAP-IT)

The TAP-IT process is the universal delivery system for improved results through the DEI/SES Differentiated Framework: Tiers of Engagement. TAP-IT ensures purposeful resource allocation and collaborative effort in support of research-based actions that narrow the achievement gap for children with disabilities and their non-disabled peers. Through TAP-IT, the DEI/SES partners with LITPs around five levers for change based on State Education Agency (SEA) Levers for Change in Local Education Agencies and Schools (Redding, 2013):

Opportunity by braiding of resources to support innovative practices;

Incentives through Statewide recognition of child progress and gap reduction;

Systemic Capacity by providing Statewide data systems that include the Longitudinal Accountability Decision Support System (LADSS), Maryland Online IFSP, and the Maryland Online IEP (MOEIP);

Local Capacity building through expert consultation, establishment of Communities of Practice (CoP), training, coaching and opportunities for diagnostic site reviews;

Intervention through the DEI/SES Differentiated Framework - Tiers of Engagement that include universal support for internal decision-making processes based on implementation science, and dissemination of proven practices with demonstrated results.

The TAP-IT process begins with the formation of an implementation team comprised of LITP and DEI/SES representatives who operate in a clearly defined partnership. The team collects all current, relevant data sources [for example: SPP/APR, Maryland Report Card, Ready at Five - School Readiness Data, Maryland Online IFSP database, and Family Survey Data]. An August 2017 WestEd/NCSI Spotlight highlighted the TAP-IT process with a focus on mathematics in Maryland: <https://ncsi.wested.org/resources/state-spotlights/>

Team: The LITP leadership selects team members who are decision-makers [programmatic, fiscal, organizational, human capital, and general educator(s) as appropriate] and will represent the LITP in partnership with MSDE, DEI/SES team (data, fiscal, and programmatic MSDE liaisons). Collaborative team sessions are scheduled face-to-face and/or through technology applications to establish team function, roles and operating norms. There is attention to building the capacity of the team using implementation science. A partnership is jointly formed by the LITP and DEI/SES team to guide the work that includes outcomes, design, and assessment.

Analyze: The team studies the processes currently in place to analyze data at the State and LITP levels. The team reviews the available data including formative, summative, longitudinal summary reports and early warning alert systems that may be in place. The purpose of each data source is reviewed, and the strength and limitations are identified. The team describes/defines the sources and processes to analyze data and identifies opportunities for programmatic support and/or technical assistance. The team analyzes the data using an agreed-upon protocol and documents their findings for subsequent steps.

Plan: The team reviews the effectiveness of existing processes and interventions to narrow the gap between children with disabilities and their non-disabled peers. The team shares current research and research-based practices for narrowing the achievement gap. Allocation of resources is reviewed to determine their effectiveness in narrowing the gap. The team uses evidence-based questioning strategies such as Teams Intervening Early to Reach all Students (TIERS): Asking the Right Questions and implementation science tools that include the Hexagon Tool where information is gathered and organized. These provide the team with a complete picture of the targeted interventions and their use in the LITP. Based on the data analysis, plans are created and resources are aligned to narrow the achievement gap. Strategic, Measurable, Attainable, Results-based and Time-bound (SMART) goals and ideas for sharing success and replication are included in developed plans.

Implement: The plan is implemented with the support and resources identified from the LITP, the DEI/SES, and other external partners. Monitoring of progress, identification and removal of barriers to change, and diagnostic site reviews are conducted.

Track: Team members meet quarterly face-to-face and/or through technology applications. Assigned monitors provide updates on each data set, financial reports are discussed, and plans are modified as needed (e.g., based on intervention implementation fidelity, child performance, etc.). The team completes an annual review and report of the work through the SMART Process. Success is shared, and the work is scaled up as appropriate.

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for infants and toddlers with disabilities and their families.

The DEI/SES has several key mechanisms in place to ensure that service providers are effectively providing services to improve results for infants, toddlers, and preschoolers with disabilities and their families. These include the annual submission of local Comprehensive System of Personnel Development (CSPD) Plans, Maryland's Early Intervention & Preschool Special Education System Personnel Standards, and ongoing professional learning activities and resources.

Annually, each LITP is required to submit a Consolidated Local Improvement Grant (CLIG) designated as the single grant mechanism through which local jurisdictions receive federal and State funds to implement local early intervention programs in compliance with federal and State regulations,

policies, and procedures to support positive results for infants, toddlers, and preschool children with disabilities and their families. A requirement of the annual CLIG submission has been revised to include an Early Intervention Program Plan (EIPP) which addresses both infrastructure and personnel development within the following sections (as required):

Local IPs/CAPs

Public Awareness Plans

Child Outcomes Summary (COS) Process

Effective IFSP Development

The EIPP culminates with the CSPD which specifically addresses the personnel development strategies across all sections of the EIPP.

CSPD Plan

The purpose of the CSPD Plan is to describe how the local early intervention system will ensure a consistent knowledge base that builds capacity, for public and private providers, primary referral sources, community partners, Family Support personnel, parents, paraprofessionals and service coordinators to improve outcomes for infants and toddlers with disabilities, including children in the Extended IFSP Option, and their families. In addition to including personnel development strategies to promote continuous improvement to support local IPs/CAPs, public awareness plans, the COS process, and effective IFSP development, implementation and evaluation, the CSPD Plan developed by a local jurisdiction must include, where appropriate, training on the basic components of the early intervention system; the coordination of transition services from the LITP to preschool special education services, or another appropriate early childhood program; and the development, implementation, and incorporation of educational outcomes in the IFSP that promote school readiness, including pre-literacy, language, and numeracy skills.

MSDE supports TAP-IT to assist jurisdictions in aligning local CSPD Plans with conclusions drawn from the review and analysis of the Early Intervention and Preschool Personnel Standards report, self-monitoring, local data profiles, IPs, CAPs, complaints, parent calls, and investigations requiring corrective actions, and other data related to program improvement. Gathered information from all the data sources discussed above are clearly summarized in the data analysis section of the CSPD Plan. A list of anticipated professional learning topics reflecting the results of the Personnel Development Strategies within the EIPP, the required Early Intervention and Preschool Personnel Standards report, other needs identified through local needs assessment data is included and based on the Learning Forward Standards for Professional Learning. Specific documentation about the actual professional learning provided and the results of those professional learning experiences are included in the LITP Final Program Report.

Required local CSPD Plan components in FFY 2023 included:

A summary of the specific personnel development strategies within the EIPP, data on the required Suitable Qualifications - Early Intervention Personnel Standards and data on the results of the local training needs assessment of public and private providers, primary referral sources, Family Support personnel, parents, paraprofessionals, and service coordinators, in addition to other data analysis results;

A description of each professional learning activity, including anticipated dates, training level, topic, presenters, and audience;

The specific type of coaching support being provided (internal/external) coaching frequency, duration, and context (individual, team, communities of practice); and

Evaluation levels, instruments, and program/early intervention provider fidelity checks to assess fidelity of implementation, continuous improvement, and level of impact on the local early intervention system.

After CLIG submissions are received by the DEI/SES, each CSPD Plan is reviewed by DEI/SES staff through the utilization of a comprehensive template created to ensure all required plan components are adequately addressed. Approval of each local CSPD Plan is required to maintain robust professional learning for all early intervention providers, families, and other early care and education professionals.

Jurisdictions can access TA from the DEI/SES to support local/regional planning and implementation efforts for customized COS and IFSP professional development. The DEI/SES continues to promote its professional development website - MD Birth to Kindergarten Child Outcomes Gateway at <http://olms.cte.jhu.edu/olms2/mdcos-gateway>. In addition to providing the rationale, training, and supports to implement the COS rating process with fidelity across jurisdictions and programs, this online resource provides birth to kindergarten providers with the foundations of early intervention/preschool special education, including the Mission and Key Principles for Providing Early Intervention Services in Natural Environments, DEC Recommended Practices, and the integration of child outcomes into the IFSP and preschool IEP process.

Personnel Standards

The DEI/SES has established policies relating to the establishment and maintenance of personnel standards pursuant to COMAR 13A.13.02.08(I) and 34 CFR §303.119. Maryland's Early Intervention & Preschool Special Education System Personnel Standards became effective on July 1, 2019. The standards are part of the State's revised CSPD to ensure a consistent base of knowledge by establishing a universal onboarding/orientation process along with an ongoing training plan for all personnel. The associated guide outlines the requirements for early intervention providers and recommendations for preschool special educators and related service providers. All early intervention providers are required to complete the Personnel Standards, regardless of full-time or part-time status. Completing the Personnel Standards will provide the foundation for all early intervention and preschool special education providers to implement the natural and inclusive evidence-based practices throughout the development, implementation, and evaluation of the IFSP and preschool IEP processes, as well as the teaming and coaching practices essential to supporting the process.

Ongoing Professional Learning Activities and Resources

In order to improve program quality and services to positively impact child and family outcome results, MSDE's DEI/SES, in collaboration with numerous partners, provides resources, training, consultation, and technical assistance to local LITP directors, service providers, community partners, stakeholders and parents through various formats and forums. Dissemination of these trainings, resources, media, and tools to strengthen child outcomes and the early intervention and education services provided to infants, toddlers, and young children with disabilities, and their families, is supported through the DEI/SES website marylandlearninglinks.org in collaboration with the Johns Hopkins University Center for Technology in Education (CTE).

An additional website, Making Access Happen, (<http://olms.cte.jhu.edu/olms2/makingaccesshappen>) provides specific support around authentic assessment (<https://medium.com/mah-authentic-assessment-support>) including the Routines-Based Interview, and reflective coaching.

Stakeholder Engagement:

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

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet

needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

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

YES

Number of Parent Members:

81

Parent Members Engagement:

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

Committees/Councils, including the State Interagency Coordinating Council (SICC), Special Education State Advisory Committee (SESAC), and Education Advisory Council (EAC), support Maryland's comprehensive birth through twenty-one (21) system of services. Parents and advisory/advocacy committees are engaged in target settings, analyzing data, developing improvement strategies, and evaluating progress in numerous ways. Parents, including representatives from the Parent Training and Information Center (PTIC) in Maryland, Parents Place of Maryland, are actively involved in the SICC, SESAC, and EAC. Parents Place of Maryland employs eleven (11) parents of children and students with identified delays and disabilities. The SICC currently has three (3) parent members, all from different local jurisdictions systems, who attend regularly. Maryland's SESAC has nineteen (19) parent members who attend regularly. Non-member parents attend both the SICC and SESAC since the meetings are open to the public. The EAC is a diverse coalition of over 25 individuals and organizations, including individual advocates, advocacy law centers, disability societies/councils, educational consultants, and other agencies, with a focus on empowering and supporting children with disabilities and their families. As mentioned before, Parents Place of Maryland, Maryland's PTIC, is a valuable stakeholder with membership on each committee.

Parents, parent support staff, and advocacy groups are also included in State Professional Learning Institutes (PLIs) and statewide webinars intended to provide stakeholders with up-to-date information on legislation, program strategies, evidence-based practice updates, and progress on program results and APR indicators. Thirty-one (31) of forty-three (43) Family Support providers in Maryland's LITP/LEA's/PAs are parents of students with disabilities. Several ongoing committees have regular participation by parents, including:

The State Implementation Teams (Part B and Part C);

These teams are responsible for moving SSIP work forward.

One (1) parent serves on each Team.

The Inclusion State Leadership Team (Part B and Part C);

This team advances technical assistance activities that are focused on advancing effective evidence-based inclusion policies and practices within the State's comprehensive birth through age 21 education system.

Two (2) parents serve on this Team.

The State Inclusion Leadership Team (Part B and Part C);

This team develops state-level guidance and support for the local school systems that were awarded the PS Inclusion grants.

Two (2) parents serve on this Team.

The Pyramid Model Leadership Committee, which is not led by DEI/SES, but the DEI/SES serves as partners (Part C and Part B);

This committee focuses development, evaluation, and sustainability of a statewide collaborative effort, guided by national models, that supports the local implementation of the Pyramid Model framework.

Two (2) parents serve on this Committee.

The Maryland Certificate of Program Completion (MCoPC) Endorsement Task Force

The task force's charge is to review the requirements for the Maryland Certificate of Program Completion requirements and develop standards for endorsements that can be added to the MCoPC that address employment, postsecondary education, and community/citizenship.

Six (6) parents serve on this Task Force.

In addition, MSDE has convened an ongoing Special Education Workgroup to discuss and make recommendations on instruction and services for students with disabilities. Workgroup meetings are held approximately once per month, and each meeting includes a dedicated time for public comment during which parents of students with disabilities in Maryland have the opportunity to provide their input. Parents are also engaged as members of the workgroup, with four (4) parents of students with disabilities currently serving as members.

Activities to Improve Outcomes for Children with Disabilities:

Describe the activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for infants and toddlers with disabilities and their families.

To increase the capacity of diverse groups of parents to aid in the development of implementation activities designed to improve outcomes, the State provides details on methods and measurement tools used in the collection and analysis of data, and provides interpreters for all meetings, as needed. The State has also developed numerous parent guides to facilitate knowledge of the State's early intervention and special education system, as well as to build the capacity of parents to be engaged in their children's development. Publications are translated into at least 17 different languages. Parent guides can be found here: <https://marylandpublicschools.org/programs/Pages/Special-Education/info.aspx>

MSDE DEI/SES develops State leadership teams for new initiatives, including a diverse membership. Parent members fully participate in the processes and discussions and are encouraged to take on leadership roles at times. The expectation is that State leadership teams will then be modeled at the local level for each jurisdiction participating in the initiative. MSDE DEI/SES provides grant funding to several family organizations, including Parents Place of Maryland (PPMD), Frostburg State University, and Maryland Coalition of Families (MCF), to enhance parent leadership and encourage diverse parent participation at all levels of decision-making.

The Frostburg State University HUB@University of Maryland System Equitable Family Engagement In Early Learning Grant builds on a previous grant where a process manual was created to assist interested LITPs/LEAs/PAs and community organizations to replicate a successful program that supports families of young children and infants who are at risk and/or receiving early intervention services. This grant's goals include the development of multiple modules for parents around understanding how to support their child's learning at home and in the community, understanding the special education process and navigating mental and behavioral health resources. There are also modules for program leads to replicate their successful family engagement strategies which are informed by evidence-based practices used across Maryland and incorporate strategies to address the needs of culturally, linguistically and socio-economically diverse families. The modules are being piloted in 2 jurisdictions and will be available to share across the state when completed.

Through a DEI/SES grant, the MCF provides training programs aimed at promoting family/school partnerships and empowering families to advocate for their children, as well as other children, in education and other child-serving care systems. The MCF's annual Family Leadership Institute (FLI) provides an intensive training program in order to promote the development of local partnerships and community ties. Through the MCF's FLI program, MCF seeks to increase parent/caregiver capacity, engagement, and partnership with LITP/LEA's/PAs. Equipping parents/caregivers who care for children with mental health disorders with knowledge, skills, and resources will promote a positive partnership with the school and positive educational outcomes for their child.

The SICC facilitates an annual joint meeting with LICCs across Maryland, encouraging state-level representation and engagement from parents and various stakeholders. This diverse group of parents and stakeholders advises the State's development of activities that support children and students with special needs. In addition, the collaborative meeting has resulted in the recruitment of additional parents to the SICC, ultimately broadening the diversity and representativeness of the SICC.

The DEI/SES provides the EAC an opportunity to review all guidance documents, including technical assistance bulletins and parent guides, before they are finalized and disseminated. Since the start of the COVID-19 Pandemic, the DEI/SES has developed over 45 guidance documents. Ultimately, these documents are published on the MSDE website to ensure wide dissemination to both providers and families. The DEI/SES technical assistance bulletins and family guides can be found here: <https://www.marylandpublicschools.org/programs/Pages/Special-Education/TAB.aspx>. In 2023 the DEI/SES developed a Parent Information Series: <https://marylandpublicschools.org/programs/Pages/Special-Education/FSDR/ParentInformationSeries-2.aspx>. Each Series document has been translated into twenty-four (24) languages to help ensure parent access to information. During the FFY 2023 reporting year, the DEI/SES began creating a new smaller "Guidance Brief" with "bite-size" digestible guidance that is more family friendly than the technical assistance bulletins. These documents, when receiving full approval by legal counsel and MSDE leadership will also be posted on the divisions' website to ensure wide dissemination.

Finally, the DEI/SES Family Support Section also provides Technical Assistance to the Local Family Support Coordinators in each jurisdiction in Maryland, including the Maryland School for the Blind and Maryland School for the Deaf. Technical Assistance included discussions about:

- 1) Finding and interpreting local and State SPP/APR data;
- 2) Reviewing their SPP/APR improvement strategies;
- 3) Providing feedback on SPP/APR data, improvement strategies, and targets; and
- 4) the importance of including this in conversations with local ICCs, advisory groups and families.

Family support coordinators encourage and support effective parent participation on a variety of committees and workgroups at all levels of decision-making.

Soliciting Public Input:

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

Throughout the year, stakeholders are made aware of data analysis, improvement strategies, and program data/progress evaluation in a variety of ways, including through statewide meetings/webinars, SICC/SESAC/EAC meetings, and family support conferences. Statewide webinars occur frequently, as they are utilized to address hot topics or immediate concerns or initiatives. SICC, SESAC, and EAC meetings occur regularly with the schedule set at the beginning of each fiscal year. For both types of meetings, stakeholders can provide feedback on data analysis, improvement strategies, evaluation, and target setting. In addition to Statewide meetings and regular stakeholder workgroups, the State hosts family support conferences and webinars. These meetings are attended by parents and family support professionals. Below are examples of topics discussed at Family Support Conferences/webinars during the FFY 2022 and FFY 2023:

Tri-annual reviews with all LITP/LEA's/PAs and Local Family Support Coordinators

Data highlight review with each LITP/LEA/PA;

Parent/Family Survey report and discussions;

Family Engagement strategies;

Early Intervention support and resources;

Components of IEP Goals;

Parent Information Guides;

Review of MSDE Technical Assistance Bulletins;

Decision-Making for Students with the Most Significant Cognitive Disabilities;

Improving Outcomes through Family Support;

Understanding the IFSP/IEP Process;

Helping Families Create a Vision for Their Child;

Grant reviews and technical assistance;

Resources for: Autism Waiver; Community Mediation Maryland; Developmental Disabilities Administration; and Pathfinders information through local agencies;

Review of Parental Rights Maryland's Procedural Safeguards Notice Document;

Compensatory Education/Recovery Services Topics;

Restraint and Seclusion;

Family Engagement Core Competencies;

Dispute resolution;

Autism Waiver;

Facilitated IEP Meetings;

Community Organizations that Support Families in Special Education and the community

Agencies that support families – DDA;

K- grade 2 suspensions;

Threat Assessments; and

Student Removals from the school setting.

Making Results Available to the Public:

The mechanisms and timelines for making the results of the setting targets, data analysis, development of the improvement strategies, and evaluation available to the public.

After receiving input from the Part C target survey, the State revised and finalized the proposed FFY 2020 targets for submission to the USDE. The revised targets were included in Maryland's FFY 2020 APR submission as Maryland's final targets. To make the set targets available to the public, the State disseminated the final targets included in both APRs to stakeholders (including parents, advocacy groups, Maryland's PTI Center, SICC, SESAC, EAC, and Program Directors/Coordinators, etc.). The final FFY 2023 APR, including APR targets, Improvement Strategies, evaluation of indicator data, and local system-specific data, will be posted on mdideareport.org no later than 120 days from submission, consistent with submission in previous years.

Reporting to the Public:

How and where the State reported to the public on the FFY 2022 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 2022 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2022 APR in 2024, is available.

As required in the IDEA of 2004, MSDE reported to the public on its FFY 2022 (July 1, 2022 - June 30, 2023) 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 2023 (July 1, 2023 - June 30, 2024). Performance data in numbers and percentages are reported for each LITP, along with the State target, State performance data, and a narrative description of the indicator. In addition, State performance data on Part C Indicators # 9, 10, and 11 is also be reported to the public. In partnership with the Johns Hopkins University Center for Technology in Education (CTE), MSDE has developed an accessible SPP/APR website for local and State performance data. The website currently includes APRs from FFY 2005 to FFY 2022 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. In addition, this site also includes OSEP's annual State determination and MSDE's annual local Infants and Toddlers Program determinations. The FFY 2023 APR will be included on this website shortly after the State's submission to the Office of Special Education Programs (OSEP) on February 1, 2025. Copies of the APR and SPP will be provided to LITPs, the SICC, and other stakeholders simultaneously immediately following the submission of the report.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

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

OSEP notes that in its description of how it makes annual determinations of EIS program performance, the State did not include all the factors that must be considered when making annual determinations, consistent with OSEP's QA 23-01. Specifically, the State did not include valid, reliable and timely data; correction of identified noncompliance; and, other data available to the State about the EIS programs compliance with IDEA, including any relevant audit findings in its description of the criteria the State uses to make annual determinations. OSEP may follow up with the State regarding how it makes annual determinations of EIS program performance outside of the SPP/APR process.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	96.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	98.07%	98.35%	99.05%	98.49%	96.70%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
12,466	15,131	96.70%	100%	97.03%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

2,216

Provide reasons for delay, if applicable.

IFSP services that were provided untimely were either due to exceptional family circumstances (e.g., family-related reasons, child unavailability, child illness/hospitalization, or IFSP team decision-making) (2,216) or noncompliance (449). Staff unavailability (staffing shortages) was the primary reason cited for noncompliance. Other reasons for noncompliance included administrative errors and staff illnesses.

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

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, 2023 to June 30, 2024.

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 with IFSPs (including 3 and 4-year-olds in the Extended IFSP Option) who received early intervention services on their IFSPs in a timely manner between 7/1/2023 and 6/30/2024, 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 newly added service 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. 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. 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 2,216 children whose service initiation date exceeded 30 days from the parental consent 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 the 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 the finalization of SPP/APR data, local programs were reminded of the requirement to ensure the submission of timely and accurate data.

On October 24, 2024, MSDE re-ran the child-level and summary of 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 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 summarized and reported above.

To monitor timely service data, 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, 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 minds 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 MSDE since MSDE no longer has to request information about why these service entry dates were not entered. MSDE also created a report to capture those services that will never start due to family-related reasons.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
13	13	0	0

FFY 2022 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 thirteen (13) findings of noncompliance in FFY 2022 for this indicator. All findings were corrected within one year of issuing the written finding of noncompliance. To verify the correction of FFY 2022 noncompliance, an updated random sample of early intervention records, using the state's data system, from a date subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those newer records were compliant. Through this review process, the MSDE, DEI/SES staff verified that all LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements (100% compliance). This was based on a review of updated data subsequently collected regarding infants and toddlers whose services were provided in a timely manner. These data demonstrated that all LITPs corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

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

For FFY 2022, there were 517 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 ultimately initiated for all 517 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 QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

The State reported on the status of correction of noncompliance identified in FFY 2022 for this indicator.

1 - OSEP Response

1 - Required Actions

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	89.70%

FFY	2018	2019	2020	2021	2022
Target>=	94.00%	94.50%	94.50%	96.00%	96.50%
Data	98.14%	98.53%	99.67%	99.19%	98.94%

Targets

FFY	2023	2024	2025
Target >=	97.00%	97.50%	97.50%

Targets: Description of Stakeholder Input

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	9,488
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Total number of infants and toddlers with IFSPs	9,574

FFY 2023 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
9,488	9,574	98.94%	97.00%	99.10%	Met target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{\# of infants and toddlers who did not improve functioning}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right] \times 100$.

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 = $\left[\frac{\text{\# of infants and toddlers reported in progress category (c) plus \# of infants and toddlers reported in category (d)}}{\text{\# of infants and toddlers reported in progress category (a) plus \# of infants and toddlers reported in progress category (b) plus \# of infants and toddlers reported in progress category (c) plus \# of infants and toddlers reported in progress category (d)}} \right] \times 100$.

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 = $\left[\frac{\text{\# of infants and toddlers reported in progress category (d) plus \# of infants and toddlers reported in progress category (e)}}{\text{total \# of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)}} \right] \times 100$.

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

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

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For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

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More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

Historical Data

Outcome	Baseline	FFY	2018	2019	2020	2021	2022
A1	2020	Target>=	62.55%	62.55%	62.48%	62.98%	63.48%
A1	62.48%	Data	56.58%	60.89%	62.48%	60.13%	61.24%
A2	2020	Target>=	60.50%	60.50%	43.58%	44.08%	44.58%
A2	43.58%	Data	46.44%	45.81%	43.58%	42.75%	40.56%
B1	2020	Target>=	66.61%	66.61%	64.94%	65.44%	65.94%
B1	64.94%	Data	60.33%	64.43%	64.94%	62.50%	64.71%
B2	2020	Target>=	55.15%	55.15%	40.38%	40.88%	41.38%
B2	40.38%	Data	43.50%	42.76%	40.38%	39.51%	38.08%

C1	2020	Target>=	73.30%	73.30%	65.56%	66.06%	66.56%
C1	65.56%	Data	62.69%	65.95%	65.56%	63.69%	64.33%
C2	2020	Target>=	50.44%	50.44%	40.40%	40.90%	41.40%
C2	40.40%	Data	43.32%	43.20%	40.40%	39.46%	39.16%

Targets

FFY	2023	2024	2025
Target A1>=	63.98%	64.48%	64.98%
Target A2>=	45.08%	45.58%	46.08%
Target B1>=	66.44%	66.94%	67.44%
Target B2>=	41.88%	42.38%	42.88%
Target C1>=	67.06%	67.56%	68.06%
Target C2>=	41.90%	42.40%	42.90%

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	34	0.57%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,992	33.40%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,544	25.89%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,686	28.27%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	708	11.87%

Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,230	5,256	61.24%	63.98%	61.45%	Did not meet target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	2,394	5,964	40.56%	45.08%	40.14%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	35	0.59%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,837	30.80%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,813	30.40%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,804	30.25%

Outcome B Progress Category	Number of Children	Percentage of Total
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	475	7.96%

Outcome B	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,617	5,489	64.71%	66.44%	65.90%	Did not meet target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	2,279	5,964	38.08%	41.88%	38.21%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	25	0.42%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2,000	33.53%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,657	27.78%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,989	33.35%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	293	4.91%

Outcome C	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,646	5,671	64.33%	67.06%	64.29%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	2,282	5,964	39.16%	41.90%	38.26%	Did not meet target	No Slippage

FFY 2023 SPP/APR Data

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	10,113
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.	2,780
Number of infants and toddlers with IFSPs assessed	5,964

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

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 were revised to require more robust child and family assessment activities as well as a more integrated COS process. My Child and Family's Story now includes three (3) 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 various 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 a consensus about the appropriate COS descriptor statement. The COS Rating Descriptors use family-friendly language to assist families in understanding their child's development in relation to same-age peers and are matched to the COS 1 through 7 scales. 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 into and exit from the program, with best practice guidance 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 require the entire Assessment Section of the IFSP to be updated and completed at every annual evaluation, along with completing a COS interim and/or exit rating. Additional guidance has been provided in the MITP IFSP Process and Document Guide and an updated version of the COS Technical Assistance Bulletin. These resources are posted on the MSDE website.

Provide additional information about this indicator (optional).

Of the 10,113 children who exited Part C during the data period, 5,964 were assessed, 2,780 children were not in the program for at least 6 months and thus, had no exit assessment. Removal of these students from the denominator to determine data completeness results in about 81.3% data completeness. However, the State would like to provide additional information about other children who didn't have exit assessments. In particular, 466 children did not have exit child outcomes completed due to exceptional family circumstances (attempts to contact unsuccessful, deceased, moved out of state, parent withdrawal). Since COS the COS process is embedded into the IFSP, exiting under those circumstances often results in no exit COS rating. If these children were also removed from the denominator, the State completion percentage would be 86.85%. The State recognizes that 903 children did not have exit COS data that should have and is working with LITPs to ensure full data completeness in the future.

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

When reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race/ethnicity in its analysis. In addition, the State's analysis must also include at least one of the following demographics: socioeconomic status, parents, or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another demographic category approved through the stakeholder input process.

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2018	2019	2020	2021	2022
A	2006	Target>=	91.00%	93.00%	93.00%	94.00%	95.00%
A	76.00 %	Data	97.52%	96.65%	96.74%	96.48%	97.22%
B	2006	Target>=	90.00%	92.50%	92.50%	94.00%	95.00%
B	74.00 %	Data	97.88%	95.93%	96.41%	96.48%	96.48%
C	2006	Target>=	91.50%	92.00%	92.00%	94.00%	95.00%
C	81.00 %	Data	98.15%	96.25%	97.06%	97.19%	96.92%

Targets

FFY	2023	2024	2025
Target A>=	96.00%	96.50%	97.00%
Target B>=	96.00%	96.50%	97.00%
Target C>=	96.00%	96.50%	97.00%

Targets: Description of Stakeholder Input

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

FFY 2023 SPP/APR Data

The number of families to whom surveys were distributed	11,686
Number of respondent families participating in Part C	3,843
Survey Response Rate	32.89%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	3,734
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	3,806

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	3,695
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	3,785
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	3,675
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	3,756

Measure	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	97.22%	96.00%	98.11%	Met target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	96.48%	96.00%	97.62%	Met target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	96.92%	96.00%	97.84%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

Question	Yes / No
Was a collection tool used?	YES
If yes, is it a new or revised collection tool?	NO

Response Rate

FFY	2022	2023
Survey Response Rate	30.05%	32.89%

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

For the purpose of determining representativeness, a demographic group is classified as being overrepresented in the respondent sample if the percentage of that group in the sample is greater than its percentage in the population by at least 3 percentage points. Similarly, a demographic group is classified as being underrepresented in the sample if the difference between the percentage of that group in the sample is less than its percentage in the population by 3 percentage points or more. Differences of 3 percentage points or more, indicates areas in which the characteristics of children of parents or guardians who responded to the survey are different from the statewide population. If the difference between the sample and the statewide estimate is less than 3 percentage points in either direction, the respondent sample is not significantly different from the statewide population.

Include the State's analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State. States must include race/ethnicity in their analysis. In addition, the State's analysis must include at least one of the following demographics: socioeconomic status, parents, or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another category approved through the stakeholder input process.

The two racial groups that account for the largest percentage of the respondent population are parents of White (38.4%) and Black or African American children (27.3%). Parents of White children were overrepresented by 5.3 percentage points. Parents of Black/African American children were underrepresented by 5.6 percentage points and parents of Hispanic/Latino children respondents were underrepresented by 3.9 percentage points.

The most common exceptionality evident in the MITP population is a developmental delay of at least 25%, with 74.5% of the respondent population reporting this disability. The second most common exceptionality or disability statewide is a physical or mental condition with likely developmental delay (19.7% of the population). The third category of exceptionalities, atypical development or behavior, constitutes 5.7% of the population. Parents of children who have at least 25% Development Delay (DD) were underrepresented by 6 percentage points. The other two exceptionality groups were neither over- nor under-represented in this year's survey.

While in most jurisdictions the percentage of survey respondents was representative of the number of active and eligible students, there are two counties where respondents were underrepresented in the sample by more than 3%: Prince George's and Montgomery counties.

The demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. (yes/no)

NO

If no, 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, including a root cause analysis and improvement strategies, for local programs with lower response rates. In addition, survey information, strategies to increase parent response rates, and State assistance is provided through State and Regional Meetings with Local Family Support Coordinators and Special Education Directors, Supervisors, and Compliance personnel.

Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

For FFY 2023, families had the opportunity to complete the survey in English or Spanish online to provide families additional methods of completing the survey. 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 so that the state could examine representativeness of survey respondents.

The State has also implemented a bilingual telephone and email help desk for parents for the duration of the survey.

In order to improve the response rates of underrepresented groups, the state will continue to require improvement plans for LITPs who demonstrate underrepresentation in survey response rates. Strategies identified in improvement plans for the next reporting period include:

- Incentives to families who complete the survey (e.g., admission to LITP's/LEA's/PA's Family Fun Fest event)
- Early Intervention Coordinators to send emails to service providers and service coordinators to remind them to communicate with families regarding the family survey
- Providing consistent, advanced, and clear communication about the family Survey. In addition to sending messages via Constant Contact and making phone call reminders, sending text messages and adding a session about the Family Survey to the Family Learning Series workshops occurring two months prior to survey distribution.
- Resuming hand-delivery of surveys; providers make an intentional effort to hand-deliver surveys to underrepresented groups.
- Bringing iPads to families' homes to enable families to complete the survey on the iPad. Providers would be available to answer questions without swaying the families in answering the questions.
- Developing a clear script available to providers delineating why it's important that families complete the survey and how completion of the survey will benefit their family and child.

Also, in an effort to increase the response rate of underrepresented populations, the State plans to translate the family survey into 22 non-English languages that are spoken by over 1% of the state.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of families that received Part C services.

Between FFY 2005-08, an average 6,699 surveys were distributed annually. During the subsequent four years, the average number of surveys increased to 8,598. From FFY 2013-15, the average number of surveys distributed increased to 9,457. One reason for the observed growth in survey distribution is Maryland's implementation of the Extended IFSP Option in FFY 2009, a programmatic change that increased the overall population of eligible children in the state. From FFY 2016-2018, the average number of surveys distributed increased again to 10,703. In FFY 2019, there was a slight dip again back to 9,769 and in FFY 2020 rose back up to 10,881. The reason for the decrease in 2019 and could have been due to COVID protocols and parents making different educational decisions for their children during that time, as we see this correcting to previous levels for FFY 2021, 2022, and 2023.

From 2005-08, the average response rate was 23.6%. In the following four years, 2009-12, the response rate grew to 43.3%. From 2013 to the present, the average response rate increased more gradually to 46.0% in 2016-17. In 2017-18 we had a decline of 9.8% in responses from the previous year, but in 2018-19 we had an increase of 3.9 percentage points. The 2019-20 response rate of 17.3% (a sharp decrease of 22.8 percentage points) was most likely due to the COVID-19 pandemic and the difference in the process for distribution and collection of surveys and how counties have had to adjust when offering services. The 2020-21 year saw a 2.4 percentage point increase and the 2021-22 year saw a more substantial 13.5 percentage point increase which is most likely due to relaxing COVID restrictions and parents receiving more services in the ways they were used to prior to the pandemic. In FFY 2023, the State achieved a response rate of 32.9%, a 2.85 percentage point increase from the previous year.

In examining nonresponse bias, the state focused on the two racial/ethnic groups who were underrepresented in this year's survey: parents of Black/African American students and parents of Hispanic/Latino students. For indicator 4A, the average level of agreement that early intervention services have helped the family know their rights was 98.11%. The level of agreement on this sub-indicator for parents of Black/African American students was 97.4% and for parents of Hispanic/Latino students was 98.0%. Chi square tests were conducted to compare the level of agreement of these racial/ethnic groups with the remaining racial/ethnic groups and no significant difference emerged, indicating a lack of nonresponse bias for this indicator. For indicator 4B, the average level of agreement that early intervention services have helped the family effectively communicate their child's needs was 97.62%. The level of agreement on this sub-indicator for parents of Black/African American students was 98.0% and for parents of Hispanic/Latino students was 98.1%. Chi square tests were conducted to compare the level of agreement of these racial/ethnic groups with the remaining racial/ethnic groups and no significant difference emerged, indicating a lack of nonresponse bias for this indicator. Finally, for indicator 4C, the average level of agreement that early intervention services have helped the family know their rights was 97.84%. The level of agreement on this sub-indicator for parents of Black/African American students was 97.4% and for parents of Hispanic/Latino students was 98.4%. Chi square tests were conducted to compare the level of agreement of these racial/ethnic groups with the remaining racial/ethnic groups and again no significant difference emerged, indicating a lack of nonresponse bias for this indicator.

In examining children's exceptionality, the response rates of parents of children who have at least 25% Development Delay (DD) were underrepresented and therefore their level of agreement with each sub-indicator was analyzed in comparison to parents of children with other exceptionalities. For indicator 4A, the average level of agreement that early intervention services have helped the family know their rights was 98.11%. The level of agreement on this

sub-indicator for parents of children with at least 25% DD was 98.1%. A chi square test confirmed that there was no significant in level of agreement across groups, suggesting a lack of nonresponse bias here. For indicator 4B, the average level of agreement that early intervention services have helped the family effectively communicate their child's needs was 97.62%. The level of agreement on this sub-indicator for parents of children with at least 25% DD was 97.4%. Again, a chi square test was used to compare levels of agreement across exceptionality groups and no significant difference was found, supporting a lack of nonresponse bias here as well. Finally, for indicator 4C, the average level of agreement that early intervention services have helped the family know their rights was 97.84%. The level of agreement on this sub-indicator for parents of children with at least 25% DD was 97.6%. Again, a chi square test was used to compare levels of agreement across exceptionality groups and no nonresponse bias was identified.

The State continues to focus on increasing response rates to minimize nonresponse bias, overrepresentation, and underrepresentation by analyzing response rates over time. For example, the State analyzed the response rate by demographic variables, jurisdictional response rates (LITPs), and response rates depending on method of completion (paper vs. online survey). In examining whether nonresponse bias was present for groups over- or under-represented in this year's survey, a series of chi square tests were conducted to detect whether these groups' level of agreement across indicators 4a, 4b, and 4c varied significantly from those of other racial groups; this analysis revealed no statistically significant differences supporting a lack of nonresponse bias in this year's results.

The State has identified several strategies to increase response rates and to minimize nonresponse bias, overrepresentation, and underrepresentation. This include:

- Providing the survey in English and in Spanish;
- Providing multiple methods to complete the survey (paper and online);
- Providing multiple options to deliver the survey (mail, hand delivery, email);
- Providing Family Survey Dashboards to each LITP with response rate information and data;
- Implementing a bilingual telephone and email help desk for parents; and
- Requiring Improvement Plans for LITPs with response rates lower than the state mean.

Improvement Plans require a Root Cause Analysis to determine which groups are underrepresented, why they are underrepresented, and strategies to increase the responsiveness amongst underrepresented groups. Improvement Plans for FFY 2022 Family Survey data will be due in early Spring 2024 so that additional strategies will be in place for the FFY 2023 Family Survey data collection in the fall of 2024.

Provide additional information about this indicator (optional).

4 - Prior FFY Required Actions

None

4 - OSEP Response

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs.

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

The State should conduct a root cause analysis of child find identification rates, including reviewing data (if available) on the number of children referred, evaluated, and identified. This analysis may include examining not only demographic data but also other child-find related data available to the State (e.g., geographic location, family income, primary language, etc.). The State should report the results of this analysis under the "Additional Information" section of this indicator. If the State is required to report on the reasons for slippage, the State must include the results of its analyses under the "Additional Information" section of this indicator.

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	1.24%

FFY	2018	2019	2020	2021	2022
Target >=	1.55%	1.56%	1.56%	1.58%	1.59%
Data	1.68%	1.60%	1.14%	1.31%	1.44%

Targets

FFY	2023	2024	2025
Target >=	1.60%	1.61%	1.62%

Targets: Description of Stakeholder Input

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received

through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 1 with IFSPs	1,015
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 1	68,060

FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1,015	68,060	1.44%	1.60%	1.49%	Did not meet target	No Slippage

Provide results of the root cause analysis of child find identification rates.

Provide additional information about this indicator (optional)

The COVID-19 Pandemic resulted in a significant decrease in the number of infants and toddlers enrolled in the Maryland Infants and Toddlers Program. To remediate this trend, the State has increased its child find efforts, including the development of new public awareness announcements and has since seen the number and percentage of infants and toddlers enrolled to increase from FFY 2020 to FFY2023.

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

The State should conduct a root cause analysis of child find identification rates, including reviewing data (if available) on the number of children referred, evaluated, and identified. This analysis may include examining not only demographic data but also other child-find related data available to the State (e.g. geographic location, family income, primary language, etc.). The State should report the results of this analysis under the "Additional Information" section of this indicator. If the State is required to report on the reasons for slippage, the State must include the results of its analysis under the "Additional Information" section of this indicator.

6 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	2.88%

FFY	2018	2019	2020	2021	2022
Target >=	3.25%	3.30%	3.30%	3.50%	3.75%
Data	3.99%	4.24%	3.40%	4.10%	4.63%

Targets

FFY	2023	2024	2025
Target >=	4.00%	4.25%	4.30%

Targets: Description of Stakeholder Input

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 3 with IFSPs	9,574
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 3	205,242

FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
9,574	205,242	4.63%	4.00%	4.66%	Met target	No Slippage

Provide results of the root cause analysis of child find identification rates

Provide additional information about this indicator (optional).

The COVID-19 Pandemic resulted in a significant decrease in the number of infants and toddlers enrolled in the Maryland Infants and Toddlers Program. To remediate this trend, the State has increased its child find efforts, including the development of new public awareness announcements and has since seen the number and percentage of infants and toddlers enrolled to increase from FFY 2020 to FFY2023.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	92.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	95.94%	97.60%	98.46%	96.93%	89.91%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
6,909	10,327	89.91%	100%	93.30%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

2,726

Provide reasons for delay, if applicable.

Reasons for delay included exceptional family circumstances, including parent/child unavailability and parent request (2,726), and noncompliance, including staff unavailability, staff illnesses, and administrative errors (692).

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

State database

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

Data for Indicator 7 include all eligible children that were referred between July 1, 2023 and June 30, 2024.

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

MSDE generated state and local reports throughout the reporting period from the statewide Part C database to report the target data for this indicator. The reports are based on the calculation of the number of days between the date of referral and the date of the initial IFSP meeting for each child referred in a selected period. The number/percent of meetings held within the timelines and why IFSPs were not held within timelines are provided. For this calculation, the referral date is considered Day #1, and an untimely IFSP meeting would be any meeting held on Day #46 or later. When the date of an untimely IFSP meeting (46 days or later from the referral date) is entered into the database, a prompt appears requesting that the reason for the late meeting be entered. Summary and individual child record data generated by the 45-day Timeline report are validated by State and LITP staff. In particular, questionable and missing/not entered reasons for late meetings are confirmed by LITPs and included in the reported data.

Compliance on the 45-day timeline indicator was tracked by MSDE and LITPs throughout the reporting period. Reasons for untimely meetings were identified, and strategies for correction and improvement were implemented. Reasons for meetings not being held within timelines were tracked in the database.

In FFY 2009, 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 Maryland 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 the usability of the online tool to support 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 various ways. This dashboard is dynamic and displays elements and information based on the user's role.

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 the ability to drill through to the child's record)
- List of children and their 30-day timelines (with the ability to drill through to the child's record)
- Number of upcoming IFSP meetings, with the 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 the 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).

Correction of Findings of Noncompliance Identified in FFY 2022

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

FFY 2022 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, MSDE, DEI/SES identified fourteen (14) findings of noncompliance in FFY 2022 for this indicator. All fourteen (14) findings were corrected within one year of issuing the written finding of noncompliance (achieved 100%). To verify the correction of FFY 2022 noncompliance, an updated random sample of early intervention records, using the state's data system, from data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, MSDE, DEI/SES staff verified that all LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements. (i.e., achieved 100% compliance). This was based on a review of new data subsequently reviewed regarding additional 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 each LITP corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

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

For FFY 2022, there were 1,129 individual-level incidences of noncompliance. MSDE, DEI/SES reviewed the records of each individual child that did not have an initial evaluation, initial assessment, and an initial IFSP meeting conducted within Part C's 45-day timeline. Although late, MSDE, DEI/SES verified that initial evaluations, assessments, and IFSP meetings were provided for all 1,129 children. As mentioned above, a subsequent data set was also reviewed to determine if those records of additional children were compliant. Through the review process, MSDE verified through its online database that each individual child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

7 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

The State reported on the status of correction of noncompliance identified in FFY 2022 for this indicator.

7 - OSEP Response

7 - Required Actions

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C at age 3 who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{(\# of toddlers with disabilities exiting Part C at age 3)}} \right] \text{ times } 100.$
- B. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \text{ times } 100.$
- C. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \text{ times } 100.$

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 8A: The measurement is intended to capture those children exiting at age 3 for whom an IFSP must be developed with transition steps and services within the required timeline consistent with 34 CFR §303.209(d) and, as such, only children between 2 years 3 months and 2 years 9 months should be included in the denominator.

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

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline consistent with 34 CFR §303.209(e) and, as such, only children between 2 years 3 months and 2 years 9 months should be included in the denominator.

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	97.60%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	99.77%	99.14%	97.26%	99.54%	98.00%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Data include only those toddlers with disabilities exiting Part C at age 3 for whom the Lead Agency was required to develop an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday. (yes/no)

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
4,601	5,431	98.00%	100%	98.55%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

751

Provide reasons for delay, if applicable.

There were seventy-nine (79) total incidences of noncompliance: Sixty-seven (67) children have IFSPs transition steps and services added after the required timeline due to staff errors and administrative delays and twelve (12) additional children should have had transition steps and services added to their IFSP but did not due to noncompliance (staff errors and administrative delays). Those twelve (12) children were no longer in the program when noncompliance was identified, so correction of noncompliance at the individual level could not occur.

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

State database

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

Data reported for Indicator 8A were based on a database review of Early Intervention records of all children who transitioned between July 1, 2022 and June 30, 2023.

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

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, MSDE began requiring transition outcomes to be entered directly into the IFSP database. This enabled MSDE to obtain these data through electronic record review beginning in FFY 2011, whereas in prior years 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 MSDE to report on all children who transitioned in the reporting year for the first time in FFY 2013 and continue to present.

In FFY 2023, 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 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	9	0	0

FFY 2022 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, MSDE, DEI/SES identified nine (9) findings of noncompliance in FFY 2022 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 2022 noncompliance, an updated random sample of early intervention records, using the state's data system, from data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, MSDE, DEI/SES staff verified that all LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements (100% compliance achieved). This was based on a review of updated data subsequently collected on whether additional infants and toddlers 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 all LITPs corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

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

For FFY 2022, there were fifty-five (55) individual-level incidences of noncompliance. 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 (9) months, prior to the toddler's third birthday. Although late, MSDE, DEI/SES verified that transition steps and services were added to the IFSP for thirty (30) children. Twenty-five (25) children's records were unable to be corrected because the children were no longer in the program when noncompliance was identified.

As mentioned above, a subsequent data set was also reviewed to determine if those records on new children were compliant. Through the review process, MSDE verified through its online database that each individual child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

The State reported on the status of correction of noncompliance identified in FFY 2022 for this indicator.

8A - OSEP Response

The State did not provide valid and reliable data for this indicator. These data are not valid and reliable because the State reported, "IFSP transition services that were provided untimely were either due to exceptional family circumstances (751), including parent request or late referrals, or noncompliance (67), including staff errors and administrative delays." However, the State's FFY 2023 SPP/APR data reflect 89 instances of noncompliance. Therefore, OSEP could not determine whether the State met its target. Additionally, the State reported "no" to the prompt, "Data include only those toddlers with disabilities exiting Part C at age 3 for whom the Lead Agency was required to develop 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." However, in its explanation, the State reported that its data only included that population. Therefore, OSEP is unclear which data were included in the calculation.

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C at age 3 who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{(\# of toddlers with disabilities exiting Part C at age 3)}} \right] \times 100$.
- B. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.
- C. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.

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

Instructions

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

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

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

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

Indicator 8A: The measurement is intended to capture those children exiting at age 3 for whom an IFSP must be developed with transition steps and services within the required timeline consistent with 34 CFR §303.209(d) and, as such, only children between 2 years 3 months and 2 years 9 months should be included in the denominator.

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

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline consistent with 34 CFR §303.209(e) and, as such, only children between 2 years 3 months and 2 years 9 months should be included in the denominator.

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	98.90%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
4,965	4,965	100.00%	100%	100.00%	Met target	No Slippage

Number of parents who opted out

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

0

Provide reasons for delay, if applicable.

The state achieved 100% compliance with this indicator. There were no delays to report.

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, MSDE generated monthly reports 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 MSDE is the lead agency and the DEI/SES structure is birth to kindergarten in nature.

Between 7/1/23 and 6/30/24, local education agencies and the SEA were notified of all 4,965 children potentially eligible for preschool services, at least 90 days prior to their third birthday (4,965/4,965).

Another 476 children were found eligible for Part C less than 90 days prior to their third birthday due to later referrals to the program. These children were not included in the State's results per the APR measurement table, but the State wants to note that notification still occurred for all 5,441 children who turned 3 from 7/1/23 and 6/30/24.

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

NO

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

State database

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

Data include all children who transitioned in the reporting year, from July 1, 2023 - June 30, 2024.

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. MSDE ensures accurate data through data validation monitoring and the assignment of Improvement Plans for untimely and/or inaccurate data. Since MSDE provides these data to the LEA and SEA on a monthly basis, 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 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8B - Prior FFY Required Actions

None

8B - OSEP Response

The State did not provide valid and reliable data for this indicator. These data are not valid and reliable because the State reported, "The only delays were due to exceptional family circumstances related to children referred to Part C later." However, this indicator does not permit States 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 C.F.R. §303.310(b). Additionally, the State reported, "In FFY 2022, 476 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." However, only 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, should be included in the numerator of this calculation. Further, the reporting period for this SPP/APR submission is FFY 2023. Therefore, OSEP could not determine whether the State met its target.

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C at age 3 who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{(\# of toddlers with disabilities exiting Part C at age 3)}} \right] \text{ times } 100.$
- B. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \text{ times } 100.$
- C. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \text{ times } 100.$

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 8A: The measurement is intended to capture those children exiting at age 3 for whom an IFSP must be developed with transition steps and services within the required timeline consistent with 34 CFR §303.209(d) and, as such, only children between 2 years 3 months and 2 years 9 months should be included in the denominator.

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

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline consistent with 34 CFR §303.209(e) and, as such, only children between 2 years 3 months and 2 years 9 months should be included in the denominator.

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	92.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	99.38%	99.11%	96.85%	99.50%	98.84%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Data reflect only those toddlers for whom the Lead Agency was required to conduct the transition conference, held with the approval of the family, at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. (yes/no)

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
4,594	5,441	98.84%	100%	98.53%	Did not meet target	No Slippage

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

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

16

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.

751

Provide reasons for delay, if applicable.

There were eighty (80) total incidences of noncompliance. Sixty-seven (67) transition conferences were provided untimely due to noncompliance (administrative errors). In addition, there were thirteen (13) additional children who did not have a transition conference due to noncompliance. Those thirteen (13) children were no longer in the program when noncompliance was identified, so correction for those children could not occur.

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

State database

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

Data include all children who transitioned in the reporting year, from July 1, 2023 - June 30, 2024.

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 MSDE and LITPs throughout the reporting period. To report on Indicator 8C, 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 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 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	9	0	0

FFY 2022 Findings of Noncompliance Verified as Corrected

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

MSDE, DEI/SES identified nine (9) findings of noncompliance in FFY 2022 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 2022 noncompliance, an updated random sample of early intervention

records, using the state's data system, from data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those new records were compliant. Through this review process, MSDE, DEI/SES staff verified that the LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements. This was based on a review of updated data subsequently collected regarding additional 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 LITPs corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

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

For FFY 2022, there were sixty-one (61) individual-level incidences of noncompliance. 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 (9) months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. Although late, MSDE, DEI/SES verified that transition conferences were held for thirty-one (31) children. As mentioned above, a subsequent data set was also reviewed to determine if those additional records were compliant. An additional thirty (30) children who did not have a TPM due to administrative error were no longer within the jurisdiction once noncompliance was identified, so transition conferences could not be held. Through the review process, MSDE verified through its online database that each child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8C - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

The State reported on the status of correction of noncompliance identified in FFY 2022 for this indicator.

8C - OSEP Response

OSEP notes that the State reported "no" to the prompt, "Data reflect only those toddlers for whom the Lead Agency was required to conduct 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." However, in its explanation, the State reported that its data only included that population. Therefore, OSEP is unclear which data were included in the calculation.

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 under section 615 of the IDEA are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

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

Measurement

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

Instructions

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

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

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

States are not required to establish baselines 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 baselines 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

Select yes to use target ranges.

Target Range not used

Select yes if the data reported in this indicator are not the same as the State's data reported under Section 618 of the IDEA.

NO

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1 Number of resolution sessions	0
SY 2023-24 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets

were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

Historical Data

Baseline Year	Baseline Data

FFY	2018	2019	2020	2021	2022
Target>=					
Data					

Targets

FFY	2023	2024	2025
Target>=			

FFY 2023 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

There were no resolution sessions in FFY 2023.

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2023. 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 ED Facts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

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

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

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

The consensus among mediation practitioners is that 75-85% is a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data. States may express their targets in a range (e.g., 75-85%).

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

Select yes if the data reported in this indicator are not the same as the State's data reported under Section 618 of the IDEA.

NO

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1 Mediations held	2
SY 2023-24 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1.a.i Mediations agreements related to due process complaints	1
SY 2023-24 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline

(however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2018	2019	2020	2021	2022
Target>=					
Data					100.00%

Targets

FFY	2023	2024	2025
Target>=			

FFY 2023 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1	0	2	100.00%		50.00%	N/A	N/A

Provide additional information about this indicator (optional)

The State reported fewer than ten mediations held in FFY 2023. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2023. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Measurement

The State's SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for infants and toddlers with disabilities and their families. The SSIP includes each of the components described below.

Instructions

Baseline Data: The State must provide baseline data expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2024). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2023 APR, report on anticipated outcomes to be obtained during FFY 2024, i.e., July 1, 2024-June 30, 2025).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (e.g., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2023 APR, report on activities it intends to implement in FFY 2024, i.e., July 1, 2024-June 30, 2025) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

11 - Indicator Data

Section A: Data Analysis

What is the State-identified Measurable Result (SiMR)?

The MITP will substantially increase the rate of growth of positive social-emotional skills in infants, toddlers, and preschool-age children (Indicator 3A, Summary Statement #1).

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

NO

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

YES

Provide a description of the subset of the population from the indicator.

Four Maryland counties (Cecil, Howard, Frederick, and Montgomery) participated in the first implementation cohort from the beginning of the project through December 2024. A new cohort of five counties (Anne Arundel, Carroll, Harford, Kent, and Prince George's) began participation in March 2024; their data will be reported in the next reporting period.

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

NO

Please provide a link to the current theory of action.

https://mdideareport.org/SupportingDocuments/SSIP_Part_C_MITP_Theory_of_Action_MD_2-28-19.pdf

Progress toward the SiMR

Please provide the data for the specific FFY listed below (expressed as actual number and percentages).

Select yes if the State uses two targets for measurement. (yes/no)

NO

Historical Data

Baseline Year	Baseline Data
2016	47.23%

Targets

FFY	Current Relationship	2023	2024	2025
Target	Data must be greater than or equal to the target	61.00%	62.00%	63.00%

FFY 2023 SPP/APR Data

Weighted Numerator from 4 SSIP LITPS	Child Count from 4 SSIP LITPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1,360	2,445	54.14%	61.00%	55.62%	Did not meet target	No Slippage

Provide the data source for the FFY 2023 data.

The data is drawn from the Statewide online IFSP system, which is used to collect data for the SPP/APR. This data is a subset of that data.

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

The SiMR data are the weighted mean (by number of children served) of the four SSIP counties Indicator 3a Summary Statement 1 data. NOTE: Because the new cohort of five counties began participation in the project in March of 2024, and the data reflects children who exited Early Intervention between July of 2023 and March of 2024, data from the original four jurisdictions was used. Baselines and targets will be reset for the new SSIP cohort for the coming reporting period.

Optional: Has the State collected additional data (i.e., benchmark, CQI, survey) that demonstrates progress toward the SiMR? (yes/no)

NO

Did the State identify any general data quality concerns, unrelated to COVID-19, which affected progress toward the SiMR during the reporting period? (yes/no)

NO

Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)

NO

Section B: Implementation, Analysis and Evaluation

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

http://mdideareport.org/SupportingDocuments/Part_C_SSSIP_Evaluation_Plan.pdf

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

NO

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

During the reporting period (calendar year 2024), MSDE reviewed applications and selected five jurisdictions for the new SSIP Implementation Cohort. A collaborative session between the first cohort jurisdictions and the new participants was held in which lessons learned and strategies were shared and participants made connections for future support and mentoring. The new cohort of jurisdictions began the process of action plan development and implementation.

Leadership Development/Systems Coaching:

The primary focus of activities in this reporting period has been the identification and development of State and Local Implementation Teams. The State Implementation Team consists of the leaders from each jurisdiction, MSDE DEI/SES Early Childhood regional liaisons, family partnership representatives (from MSDE and our PTIC, Parents Place of Maryland), SICC representation, and experts/coaches in each of the evidence-based practices. Each participating jurisdiction created a Local Implementation Team (LIT). Both the SIT and the LITs received training and coaching in Dynamic Impact (a team-based -cycles of improvement process informed by implementation science) through a contract with JHU-CTE. Teams met monthly at the state and local levels.

Professional Learning

- Ongoing professional learning and coaching support in evidence-based practices was provided to LITPs across the state, with a focus on the original and continuing SSIP jurisdictions. The DEI/SES engages contractual support from the University of Connecticut School of Social Work (Pyramid Model) and Johns Hopkins University, Center for Technology in Education (Routine Based Interview and Reflective Coaching). They provide coaching and consultation to the SSIP jurisdictions (and others). A "coaching collaborative" provided opportunities for coaches in RBI and Reflective Coaching to receive ongoing feedback and support. Trainings in Routines Based Interview (RBI) and the Pyramid Model were help for the new SSIP cohort jurisdictions.

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

Leadership Development/Systems Coaching

Systems Framework: Professional Development, Technical Assistance, Governance, Quality Standards

Approximately 20 SIT members and approximately 30 additional LIT members (with 10 local leaders who are part of both groups) received training in the Dynamic Impact process of team-based cycles of improvement informed by implementation science. The SIT held monthly meetings beginning in March and the LITs held monthly meetings beginning in September. All received coaching and support for each meeting (agenda development, data preparation, etc.) from an expert trainer/coach from JHU-CTE. Each team completed a cycle of data analysis, goal setting, data collection, and evaluation. Each team developed team performance goals as well as implementation goals and data collection goals. With support from the Pyramid Model consultants from UConn, each jurisdiction completed the Pyramid Model Benchmarks of Quality self-assessment and several jurisdictions focusing on Pyramid Model implementation at this time also formed. The process to data lays the foundation for effective, sustainable installation and implementation of the EBPs in each jurisdiction, including creating the infrastructure required for fidelity measurement and tracking and building the capacity of the LITs for data analysis. These structures will allow the jurisdictions to implement and scale the EBPs, which will lead to improved outcomes for children and the achievement of the SiMR.

Professional Learning:

Systems Framework: Professional Development, Quality Standards

Staff from four of the five jurisdictions participated in a 2-day institute on Routines-Based Interviewing. Participants in this training are currently in the process of receiving coaching and achieving fidelity in the practice. A four-session Coaches Institute was also held to provide ongoing support for previously trained RBI coaches in other jurisdictions, to support sustained implementation with fidelity in those settings. Four of the five jurisdictions also participated in initial Pyramid Model Training. Additional reflective coaching training is planned for the next reporting period. Coaches from the original SSIP jurisdictions participated in a coaching cohort to refine their skills in mentoring and supporting the implementation of RBI and reflective coaching with fidelity. Building the capacity of providers in the participating LITPs is critical to implementing the identified EBPs with fidelity to improve child outcomes and achieve the SiMR. Planning from the start for sustainability by and supporting local coaches is another critical element.

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

NO

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

The focus in this initial year has been establishing the LITs for each jurisdiction, creating a sustainable process for team-based improvement cycles, analyzing data (both outcome and implementation data) to determine priorities, and creating action plans. The upcoming reporting period will focus on building on this foundation by continuing to expand and enhance the implementation of the EBPs in each participating LITP, guided by data-informed action planning by the LITs, which also creating resources and tools for Statewide work through the SIT. Because MSDE has promoted and supported the use of the EBPs since 2016, several of the new cohort jurisdictions had some practices in place before becoming part of the SSIP work. Therefore, the process of implementation and scale-up looks different in each of the participating systems. Based on the lessons learned from the previous cohort, the SIT and MSDE team and partners are focusing on strategies and resources to support the integration of the practices, which will support practitioner buy-in and sustainability.

Leadership Development and Systems Coaching

The SIT and the LITs will continue to engage in the Dynamic Impact process with support from JHU-CTE and the MSDE liaisons/systems coaches. Teams will develop individualized action plans based on local data, needs, and priorities. The Dynamic Impact coach supports each time in developing an agenda for each meeting and implementing the DI process with fidelity. The System Coaches will provide responsive technical assistance to support the local leaders and LITs in developing, implementing, and evaluating these plans. The EBP experts are available as needed to support each time in determining appropriate action steps related to the practice.

The State Implementation Team will work to create resources (professional learning materials, documents, etc) on the value and integration of the three selected EBPs for a variety of stakeholders. One purpose of such materials is to increase understanding and buy-in on the value and interrelationship of the practices for providers. Another goal is to create family-focused resources that reinforce the guiding principles and goals of Early Intervention

Professional Learning

The focus of professional learning activities will be two-fold: providing initial training to enable providers to begin implementing the EBPs with a continued focus on long-term sustainability by building local capacity. We will provide an introductory training in Reflective Coaching for new caregiver coaches. In addition, in consultation with national experts, MSDE and our JHU-CTE partners will design and implement a Mentor Coach Institute which will enable individuals trained in Reflective Coaching as caregiver coaches to develop the skills and abilities to become mentor coaches who are able to help new caregiver coaches achieve fidelity. Long-term, our intention is to offer initial training in Reflective Coaching and RBI in alternating years, which continue to develop the coaching cohort of individuals able to support others to fidelity in both practices. Pyramid Model training will continue to be offered based on individual LITP needs, as identified through the Benchmarks of Quality and the action planning partnership, in collaboration with UConn.

Quality Standards

The State Implementation Team (local leaders, MSDE staff, and EBP Expert Partners) will continue to work on an effective and efficient process for monitoring implementation fidelity at both the systems and individual practitioner levels. The team is in the process of creating a systems framework self-assessment, similar to the Pyramid Model BOQ, for the other practices. The team is also in the process, in consultation with the national experts in the practices, of developing guidance on processes for assessing and support practitioner-level fidelity of implementation of RBI and reflective coaching that can be implemented within the existing workflow of coaches and supervisors who have multiple responsibilities.

List the selected evidence-based practices implemented in the reporting period:

Reflective Coaching

Routines-Based Interview (RBI)

The Pyramid Model for Supporting Social-Emotional Competence in Infants and Young Children

Provide a summary of each evidence-based practice.

Reflective Coaching is an evidence-based practice that, when used in early childhood programs, fosters a provider's ability to set appropriate goals, process, and integrate feedback. It also builds the capacity of the family and caregivers, providing them the skill and knowledge to foster the child's growth and development.

Routines-Based Interview is a structured interview process that provides a rich depth of understanding of the child and family's functioning, leading to a positive relationship between the provider, family, and child. Functional and realistic child and family outcomes result from this interview process.

The Pyramid Model is a research-based practice that has shown evidence for promoting young children's social and emotional skills and decreasing a child's challenging behavior.

Provide a summary of how each evidence-based practices and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g., behaviors), parent/caregiver outcomes, and/or child/outcomes.

The Part C State Implementation Team and the participating LITPs from both cohorts continue full implementation of the targeted evidence-based practices, including Reflective Coaching, Routines-Based Interview, and the Pyramid Model to support the social-emotional and mental health of Maryland's Infants and Toddlers. Systemically, the use of Implementation Science and Dynamic Impact I will continue to provide the foundation to support the adoption, integration, and sustainability of the identified evidence-based practices. As the new SSIP cohort jurisdictions install, implement, and scale the practices, their experiences, and learnings will support efforts across the State, including in jurisdictions not currently participating in SSIP. Providers will utilize effective strategies to support parents and other caregivers in supporting their children's development by embedding intervention into their everyday activities. Improved practices in the targeted LITPs and others will support the growth and development of infants and toddlers with delays and disabilities, enhancing their developmental trajectories. Children who receive these effective practices will be better equipped to enter preschool and eventually kindergarten and to engage fully and successfully in their families and communities.

Describe the data collected to monitor fidelity of implementation and to assess practice change.

During this reporting period, the primary activities have focused on establishing and training the new LITs, including reflecting on their current practices around implementation data collection and planning for future activities. Data collection planning and implementation is part of each Dynamic Impact Cycle.

To measure fidelity of implementation of the Dynamic Impact Process, the teams engage in self-evaluation as a part of each cycle. The SIT and LITs all reported growth on their team performance goals during the first cycle. The DI coach reviews the teams' action plans and other documents to monitor fidelity of implementation.

The LITs each completed the Pyramid Model Benchmarks of Quality (BOQ) tool to establish a baseline and inform action planning in the fall of 2024. These results are currently being analyzed.

Baseline data on the number and percentage of providers in each SSIP jurisdiction participating and trained to fidelity in each of the EBPs was collected and will continue to be monitored, as will the number of IFSPs conducted using the Routines Based Interview. Analysis of the percentage of IFSPs that contain outcomes related to positive social-emotional relationships will also be continued.

Since 2017, MSDE has worked with an external evaluator to gather and analyze data on implementation and outcomes. Because of challenges with the procurement process, that resource was not available in the current reporting period. However, a new contract has been developed, and the external evaluator will provide support during the upcoming reporting period.

Describe any additional data (e.g., progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.

N/A

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

Based on the lessons learned from the experience of the first SSIP cohort, during which each LITP attempted to implement all three practices simultaneously, each new SSIP jurisdiction is developing an individualized plan to build on existing work with the practices and set prioritized goals based on individual needs. Therefore, implementation targets and timelines for each jurisdiction. To support these individual processes and Statewide utilization of the practices including by non-SSIP jurisdictions, planned activities for 2025 include:

Pyramid Model –

Continued coaching for the SSIP jurisdictions, including support for local implementation teams.

Additional training in pyramid model practices, including use of the fidelity monitoring tool.

Support for implementation of the Positive Solutions for Families, a family engagement and training series, in the SSIP jurisdictions and possibly other LITPs.

Potential implementation of a "Train the Trainers" course to support scaling and sustainability of Pyramid practices.

Reflective Coaching –

Development and implementation of a "mentor coach" training for caregiver coaches who have reached fidelity to develop skills to mentor colleagues to fidelity. To be designed and implemented by EBP partners from JHU-CTE and existing "fidelity coaches" in previous SSIP jurisdictions

Provision of a two-day "caregiver coach" training for new providers, with first priority to the SSIP jurisdictions and additional spaces made available statewide if applicable.

Coaching of new caregiver coaches to fidelity by existing and new mentor coaches

Ongoing "coaches chat" Professional Learning Community to support mentor and fidelity coaches

Routines Based Interview

Continuing support providers trained in Fall 2024 to fidelity

Ongoing "coaches chat" Professional Learning Community to support fidelity coaches

Planning for an introductory institute for new interviewers in Spring 2026.

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

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

The initial SSIP cohort jurisdictions showed steady progress (with some disruptions caused by the pandemic) in both implementation and child outcomes. All four jurisdictions have trained and coached their staff in the practices and developed sustainable infrastructures for implementation with fidelity. MSDE is committed to expanding the sustained and integrated implementation of the practices to the new jurisdictions while also promoting their use to benefit children and families in the non-SSIP LITPs. We anticipate that the data gathered from and experiences of the new cohort jurisdictions may lead to some refinements in the process but are unlikely to lead to major shifts in the practices and goals of the SSIP. However, we remain committed to data-informed and dynamic decision-making and are prepared to make adjustments as needed.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The IDEA requires each State to establish a State Interagency Coordinating Council (SICC). The Maryland SICC is a Governor-appointed council that advises and assists the Maryland Infants and Toddlers Program to ensure that a comprehensive delivery system of integrated Early Intervention services is available to all eligible infants, toddlers, and preschool-age children and their families. The composition of the SICC is made up of stakeholders from across the state and the demographic representation is aligned with state demographics. The SICC advises the State on unmet needs of students with disabilities, including the development of evaluations, reports, and/or corrective action plans in response to federal monitoring, and implementing policies and procedures to coordinate services for infants, toddlers, and preschool-age children with disabilities.

DEI/SES staff updated members of the SICC during all five meetings in FFY 2023. SICC members were informed of the DEI/SES' priorities, including but not limited to the State's APR and SSIP. Throughout FFY 2023, 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, LITP Directors, preschool coordinators/directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at LICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. After the January 9, 2025 SICC Meeting, the SICC Chair disseminated a survey to SICC Members so that they could provide feedback on suggested improvement strategies for Part C process to impact indicator data.

Stakeholder engagement in Target Setting:

In preparation for submission of the FFY 2020 APR cycle, MSDE began discussions about new targets with stakeholders at numerous state-facilitated meetings. These meetings include, but are not limited to, the Maryland Chapter of the American Academy of Pediatrics (MDAAP) Monthly Meeting (October 5, 2021), the SICC Meetings (October 7, 2021 and December 2, 2021), the State Implementation Team Meeting (October 8, 2021), the Local Directors Hot Topics Webinar (November 10, 2021), the Special Education State Advisory Committee (SESAC) Meetings (November 17, 2021 and January 28, 2022), and the Early Childhood Hot Topics and Funding Webinar (December 1, 2021). The December 2, 2021 SICC and January 28, 2022, SESAC included full presentations of APR data as well as information on setting new targets for the FFY 2020 – FFY 2025 APRs.

In addition to these meetings, MSDE created two SPP/APR Stakeholder Surveys (one for Part B and one for Part C) to obtain stakeholder feedback regarding proposed SPP/APR targets. Target Surveys were provided broadly to stakeholders of the early intervention and special education system in Maryland, including the Local Infants and Toddlers Program Directors, Local Preschool Coordinators, Local Special Education Directors, Parents Place of Maryland, SICC, SESAC, and Education Advocacy Coalition (EAC). Each individual/agency was asked to disseminate the surveys to their stakeholders as well, thus ensuring the State obtained as much feedback from stakeholders as possible. Feedback from stakeholders was received through January 10, 2022. After surveys were collected and analyzed, revisions to MSDE-proposed targets were made, and the final proposed targets were provided/presented to the SICC, SESAC, and other stakeholders. These targets were ultimately included in the FFY 2020 APR.

For FFY 2023, the State is not proposing any revisions to baselines or targets, aside from Indicator 12 since Indicator 12 requires a new baseline (however, targets for Indicator 12 are 100%, as required for compliance indicators).

Throughout FFY 2023, MSDE provided information and preliminary data on the Part C APR indicators, including the State's SSIP, and multiple opportunities for questions, comments, and recommendations from a broad range of stakeholders including, the SICC, LITP directors, and local special education directors. During the reporting period, updates on SPP/APR federal reporting requirements and State and local performance data were provided at SICC meetings. On January 9, 2025, the draft FFY 2023 APR and data were presented to the SICC. SICC meetings are held virtually and are open meetings to all stakeholders. Data on and related to APR indicators were also presented during Leadership Meetings throughout the year. Leadership meetings included diverse stakeholders, including early intervention leaders, preschool special education leaders, directors of special education, general education leaders, secondary transition specialists, and service providers.

Beginning in FFY 2023, Maryland developed a Special Education Workgroup (SEW), a series of meetings resulting from the Blueprint for Maryland's Future intended to reshape special education services in Maryland. The State Superintendent of Schools is a Co-Chair of the SEW and members include State legislators, a State Board member, MSDE Leadership, local Directors of Special Education, local Directors of Infants and Toddlers Programs, child care providers, related service providers, school administrators, teachers, nonpublic representatives, institutes of higher education representatives, physicians, multilingual learning representatives, family advocates, employment and transition specialists, overidentification experts, parents, and members of the Accountability Implementation Board.

More information about the SEW can be found here: <https://blueprint.marylandpublicschools.org/special-education-workgroup/>

Describe the specific strategies implemented to engage stakeholders in key improvement efforts.

As part of the SICC's ongoing focus on ensuring that all communities and families are benefitting appropriately and equitably from the work of the Maryland Infants and Toddlers Program, the SICC (and local ICC representatives participating in the annual joint meeting) delved in the EBPs and generated a series of recommendations related to implementation of the EBPs and Early Intervention services in general with an eye to supporting engagement and positive outcomes in traditionally underserved communities. It is anticipated that these recommendations will be finalized and shared with the Department in early 2025.

Were there any concerns expressed by stakeholders during engagement activities? (yes/no)

NO

Additional Implementation Activities

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

With the help of external evaluators, a new Evaluation Plan will be developed, which will outline the data that are to be collected, and the outcomes and impact anticipated.

Engage stakeholders in a process to determine new baselines and targets for the SiMR based on data that includes the new SSIP cohort jurisdictions.

Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.

January – March – Engage external evaluator (contracting process completed in January). Review the existing evaluation plan and determine if changes are needed. Gather and analyze baseline data from new SSIP jurisdictions. Collect implementation data (ongoing)

March – June – Develop a new evaluation plan and propose new targets (based on baseline data). Collect implementation data (ongoing)

June – September – Gather stakeholder feedback on new targets and finalize. Collect implementation data (ongoing).

September – December – Collect and analyze outcome data aligned to new targets. Collect and analyze implementation data.

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

Staffing levels and staff turnover, though they have stabilized somewhat since the height of the pandemic, remain a challenge at both the State and local levels. We continue to work with the SIT and our expert partners to identify opportunities to implement key processes, especially fidelity coaching in a manner that maximizes efficiency without sacrificing the quality of the process.

In addition, the State of Maryland is currently facing a significant budget shortfall, and some local programs face resource challenges as well. We do not anticipate a cut in State funds for the Part C program at this time, but we are attuned to these issues, as well as to uncertainty on the national level, and prepared to provide technical assistance to the LITPs as needed.

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Indicator 12: General Supervision

Instructions and Measurement

Monitoring Priority: General Supervision

Compliance indicator: This SPP/APR indicator focuses on the State lead agency's exercise of its general supervision responsibility to monitor its Early Intervention Service (EIS) Providers and EIS Programs for requirements under Part C of the Individuals with Disabilities Act (IDEA) through the State's reporting on timely correction of noncompliance (20 U.S.C. 1416(a) and 1435(a)(10); 34 C.F.R. §§ 303.120 and 303.700). In reporting on findings under this indicator, the State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State.

Data Source

The State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system, dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State. Provide the actual numbers used in the calculation. Include all findings of noncompliance regardless of the specific type and extent of noncompliance.

Measurement

This SPP/APR indicator requires the reporting on the percent of findings of noncompliance corrected within one year of identification:

- # of findings of noncompliance issued the prior Federal fiscal year (FFY) (e.g., for the FFY 2023 submission, use FFY 2022, July 1, 2022 – June 30, 2023)
- # of findings of noncompliance the State verified were corrected no later than one year after the State's written notification of findings of noncompliance

Percent = [(b) divided by (a)] times 100

States are required to complete the General Supervision Data Table within the online reporting tool.

Instructions

Baseline Data: The State must provide baseline data expressed as a percentage. OSEP assumes that the State's FFY 2023 data for this indicator is the State's baseline data unless the State provides an explanation for using other baseline data.

Targets must be 100%.

Report in Column A the total number of findings of noncompliance made in FFY 2022 (July 1, 2022 – June 30, 2023) and report in Column B the number of those findings which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance.

Starting with the FFY 2023 SPP/APR, States are required to report on the correction of noncompliance related to compliance indicators 1, 7, 8a, 8b, and 8c based on findings issued in FFY 2022. Under each compliance indicator, States report on the correction of noncompliance for that specific indicator. However, in this general supervision Indicator 12, States report on both those findings as well as any additional findings that the State issued related to that compliance indicator.

In the last row of this General Supervision Data Table, States may also provide additional information related to other findings of noncompliance that are not specific to the compliance indicators. This row would include reporting on all other findings of noncompliance that were not reported by the State under the compliance indicators (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.). In future years (e.g., with the FFY 2026 SPP/APR), States may be required to further disaggregate findings by results indicators (2, 3, 4, 5, 6, 9, 10, and 11), fiscal and other areas.

If the State did not ensure timely correction of previous findings of noncompliance, provide information on the nature of any continuing noncompliance and the actions that have been taken, or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

12 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	100.00%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

Indicator 1. 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)

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
13	1	13	1	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 1 due to various factors (e.g., additional findings related to other IDEA requirements).

During FFY 2022, there was one (1) additional finding related to Indicator 1 identified through the comprehensive monitoring process.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on updated data:

At the systemic level, the MSDE, DEI/SES identified fourteen (14) total findings of noncompliance in FFY 2022 for this indicator. All findings were corrected within one year of issuing the written finding of noncompliance. To verify the correction of FFY 2022 noncompliance, an updated random sample of early intervention records, using the state's data system, from a date subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those newer records were compliant. Through this review process, the MSDE, DEI/SES staff verified that all LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements (100% compliance). This was based on a review of updated data subsequently collected regarding infants and toddlers whose services were provided in a timely manner. These data demonstrated that all LITPs corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

Please describe, consistent with OSEP QA 23-01, how the State verified that each individual case of noncompliance was corrected:

The MSDE, DEI/SES reviewed the records of each individual child that did not have IFSP services provided in a timely manner, and verified that although late, services were ultimately initiated for all 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 QA 23-01.

Indicator 7. Percent of eligible infants and toddlers with IFSPs for whom initial evaluation, initial assessment, and the initial IFSP meeting were conducted within Part C's 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
14	2	14	2	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 7 due to various factors (e.g., additional findings related to other IDEA requirements).

During FFY 2022, there was one (1) additional finding related to Indicator 7 identified through the comprehensive monitoring process and one (1) additional finding identified through the dispute resolution process.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on updated data:

At the systemic level, MSDE, DEI/SES identified sixteen (16) findings of noncompliance in FFY 2022 related to Indicator 7. All sixteen (16) findings were corrected within one year of issuing the written finding of noncompliance (achieved 100%). To verify the correction of FFY 2022 noncompliance, an updated random sample of early intervention records, using the state's data system, from data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, MSDE, DEI/SES staff verified that all LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements. (i.e., achieved 100% compliance). This was based on a review of new data subsequently reviewed regarding additional 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 each LITP corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

Please describe, consistent with OSEP QA 23-01, how the State verified that each individual case of noncompliance was corrected:

MSDE, DEI/SES reviewed the records of each individual child that did not have an initial evaluation, initial assessment, and an initial IFSP meeting conducted within Part C's 45-day timeline and verified that although late, initial evaluations, assessments, and IFSP meetings were provided for all children. As mentioned above, a subsequent data set was also reviewed to determine if those records of additional children were compliant. Through the review process, MSDE verified through its online database that each individual child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP QA 23-01.

Indicator 8A. 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. (20 U.S.C. 1416(a)(3)(B) and 1442).

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
9	2	9	2	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 8A due to various factors (e.g., additional findings related to other IDEA requirements).

During FFY 2022, there were (2) additional findings related to Indicator 8a identified through the comprehensive monitoring process.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

At the systemic level, MSDE, DEI/SES identified eleven (11) total findings of noncompliance in FFY 2022 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 2022 noncompliance, an updated random sample of early intervention records, using the state's data system, from data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those records were compliant. Through this review process, MSDE, DEI/SES staff verified that all LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements (100% compliance achieved). This was based on a review of updated data subsequently collected on whether additional infants and toddlers 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 all LITPs corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

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 (9) months, prior to the toddler's third birthday. Although late, MSDE, DEI/SES verified that transition steps and services were added to the IFSP for all children except those who were no longer in the program when noncompliance was identified. Through the review process, MSDE verified through its online database that each child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP QA 23-01.

Indicator 8B. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

B. Notified (consistent with any opt-out policy) the SEA and 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. (20 U.S.C. 1416(a)(3)(B) and 1442)

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 8B due to various factors (e.g., additional findings related to other IDEA requirements).

There were no incidences of noncompliance identified for Indicator 8b in FFY 2022.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

There were no incidences of noncompliance identified for Indicator 8b in FFY 2022.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

There were no incidences of noncompliance identified for Indicator 8b in FFY 2022.

Indicator 8C. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

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)

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
9	1	9	1	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 8C due to various factors (e.g., additional findings related to other IDEA requirements).

During FFY 2022, there was one (1) additional finding related to Indicator 8c identified through the dispute resolution process.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on updated data:

MSDE, DEI/SES identified ten (10) findings of noncompliance in FFY 2022 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 2022 noncompliance, an updated random sample of early intervention records, using the state's data system, from data subsequent to the issuance of the written finding of noncompliance was reviewed to determine if those new records were compliant. Through this review process, MSDE, DEI/SES staff verified that the LITPs identified with noncompliance in FFY 2022 were correctly implementing the specific regulatory requirements. This was based on a review of updated data subsequently collected regarding additional 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 LITPs corrected noncompliance for the system by achieving 100% compliance, consistent with OSEP QA 23-01.

Please describe, consistent with OSEP QA 23-01, how the State verified that each individual case of noncompliance was corrected:

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 (9) months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. Although late, MSDE, DEI/SES verified that transition conferences were held for all children except those who were no longer within the jurisdiction once noncompliance was identified, so transition conferences could not be held. Through the review process, MSDE verified through its online database that each child identified with noncompliance was corrected consistent with the regulatory requirements and OSEP QA 23-01.

Optional for FFY 2023, 2024, and 2025:

Other Areas - All other findings: States may report here on all other findings of noncompliance that were not reported under the compliance indicators listed above (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.).

Column B: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Column B for which correction was not completed or timely corrected
149	149	0

Explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any findings reported in this section:

For FFY 2022, there were 149 additional findings of noncompliance identified through the comprehensive monitoring process.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on updated data:

For FFY 2022, the MSDE, DEI/SES identified 149 new findings of noncompliance through the comprehensive monitoring process. All 149 findings of noncompliance were corrected within one year of issuing the written finding of noncompliance.

To ensure correction, the MSDE, DEI/SES verified that LITPs with noncompliance identified in FFY 2022 were correctly implementing the regulatory requirements for each specific area of noncompliance identified. First, correction was verified in the records of the children where the noncompliance was identified. The state verified that each EIS program or provider with noncompliance identified in FFY 2022 corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the EIS program or provider. Second, using updated data, subsequent to the issuance of the written finding, records were reviewed to determine if those records were compliant, specific to the original areas of noncompliance (e.g., IFSP development, service delivery, etc.). The MSDE, DEI/SES verified that each LITP achieved 100% compliance, consistent with OSEP QA 23-01.

Please describe, consistent with OSEP QA 23-01, how the State verified that each individual case of noncompliance was corrected:

The MSDE, DEI/SES reviewed the IFSPs and records for each of the individual children identified with noncompliance in each LITP where noncompliance occurred. The MSDE, DEI/SES verified that all individual instances of noncompliance were corrected and all children and families received required services and compliant IFSPs that were originally determined to be noncompliant, unless the children was no longer within the jurisdiction of the EIS program or provider. Therefore, each individual case of noncompliance was considered corrected, consistent with OSEP QA 23-01.

Total for All Noncompliance Identified (Indicators 1, 7, 8A, 8B, 8C, and Optional Areas):

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
45	155	45	155	0

FFY 2023 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified in FFY 2022	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
200	200		100%	100.00%	N/A	N/A

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	0.00%
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Provide additional information about this indicator (optional)

Summary of Findings of Noncompliance identified in FFY 2022 Corrected in FFY 2023 (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified during FFY 2022 (the period from July 1, 2022 through June 30, 2023).	200
2. Number of findings the State verified as timely corrected (corrected within one year from the date of written notification to the EIS program/provider of the finding)	200
3. Number of findings <u>not</u> verified as corrected within one year	0

Subsequent Correction: Summary of All Outstanding Findings of Noncompliance identified in FFY 2022 Not Timely Corrected in FFY 2023 (corrected more than one year from identification of the noncompliance):

4. Number of findings of noncompliance not timely corrected	0
5. Number of written findings of noncompliance (Col. A) the State has verified as corrected beyond the one-year timeline ("subsequent correction") - as reported in Indicator 1, 7, 8A, 8B, 8C	0
6a. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 1	0
6b. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 7	0
6c. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 8A	0
6d. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 8B	0
6e. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 8C	0
6f. (optional) Number of written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Other Areas - <u>All other findings</u>	0
7. Number of findings <u>not</u> yet verified as corrected	0

Subsequent correction: If the State did not ensure timely correction of previous findings of noncompliance, provide information on the nature of any continuing noncompliance and the actions that have been taken, or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

LITPs must correct noncompliance within one (1) year of notification, as required by OSEP QA 23-01. When LITPs fail to fully correct noncompliance within one (1) year of notification, they are required to complete a Corrective Action Plan. Corrective Action Plans require the LITP to conduct a root cause analysis of the noncompliance and to develop and implement strategies to correct noncompliance. LITPs that fail to correct noncompliance within one (1) year as required may receive impacted determinations. Timely correction of noncompliance is one factor that the State uses to make determinations. As noted in the APR's introduction, the LITP's determination impacts its Tier of General Supervision, as well as additional enforcement actions (.eg., withholding or directing the use of funds).

12 - OSEP Response

OSEP cannot determine whether the data are valid and reliable. The State reported 100% of its findings of noncompliance were corrected within one year of identification. However, the State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2022 related to the 45-Day timeline because it did not report that it verified correction of those findings, consistent with the requirements in OSEP QA 23-01. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2022: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and, (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider. Additionally, the State referenced incorrect requirements for the 45 day timeline. The State

reported, "During FFY 2022, there was one (1) additional finding related to Indicator 1 identified through the comprehensive monitoring process and one (1) additional finding identified through the dispute resolution process."

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in the Optional Other Areas section because it did not report that it verified correction of those findings, consistent with the requirements in OSEP QA 23-01. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2022 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider.

The State has established baseline for this indicator using data from FFY 2023, but OSEP cannot accept that baseline data because it cannot determine whether the State's FFY 2023 data are valid and reliable, as noted above.

12 - 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 by the Lead Agency Director to Certify

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:

Brian Morrison

Title:

Branch Chief, Policy and Accountability

Email:

brian.morrison@maryland.gov

Phone:

410-767-0863

Submitted on:

04/22/25 7:49:03 AM

Determination Enclosures

Data Rubric

Maryland

FFY 2023 APR (1)

Part C Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	0	0
8B	0	0
8C	1	1
9	1	1
10	1	1
11	1	1
12	1	1

APR Score Calculation

Subtotal	12
Timely Submission Points - If the FFY 2023 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	17

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

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/Settings Due Date: 7/31/24	1	1	1	3
Exiting Due Date: 2/19/25	1	1	1	3
Dispute Resolution Due Date: 11/13/24	1	1	1	3

618 Score Calculation

Subtotal	9
Grand Total (Subtotal X 2.11111111) =	19.00

Indicator Calculation

A. APR Grand Total	17
B. 618 Grand Total	19.00
C. APR Grand Total (A) + 618 Grand Total (B) =	36.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	38.00
D. Subtotal (C divided by Denominator) (3) =	0.9474
E. Indicator Score (Subtotal D x 100) =	94.74

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 2.11111111 points are subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.11111111.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2025 Submission

SPP/APR Data

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

Part C 618 Data

1) Timely – A State will receive one point if it submits all *EDFacts* files or the entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described in the table below).

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	7/31/2024
Part C Exiting	FS901	2/19/2025
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	11/13/2024

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

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection.

Dispute Resolution
IDEA Part C
Maryland
Year 2023-24

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

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	8
(1.1) Complaints with reports issued.	6
(1.1) (a) Reports with findings of noncompliance.	6
(1.1) (b) Reports within timelines.	6
(1.1) (c) Reports within extended timelines.	0
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	2

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	3
(2.1) Mediations held.	2
(2.1) (a) Mediations held related to due process complaints.	1
(2.1) (a) (i) Mediation agreements related to due process complaints.	1
(2.1) (b) Mediations held not related to due process complaints.	1
(2.1) (b) (i) Mediation agreements not related to due process complaints.	0
(2.2) Mediations pending.	1
(2.3) Mediations not held.	0

Section C: Due Process Complaints

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

State Comments:

Errors:

Please note that the data entered result in the following relationships which violate edit checks:

PartC-DR-013: (2.2/2) > 25%, PartC-DR-014: (3.3 / 3) > 25%

State error comments:

A total of two mediations have been conducted, with one mediation currently pending (50%) caused an edit check greater than 25% percent of all mediations requests. Additionally, three due process complaints have been filed, with one due process complaint still pending (33%) caused an edit check greater than 25% of all Due Process Complaints.

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

Maryland

These data were extracted on the close date:
11/13/2024