

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2021

Nebraska



PART C DUE
February 1, 2023

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary

Additional information related to data collection and reporting

General Supervision System

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

General Supervision System

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

Monitoring:

The Individuals with Disabilities Education Act (IDEA) Part C system in Nebraska, known as the Early Development Network (EDN), is co-administered by the Nebraska Department of Education (NDE), Office of Special Education and the Nebraska Department of Health and Human Services (NDHHS), Division of Medicaid and Long-term Care (aka "Co-Lead Agencies" or "the Co-Leads"). Per the Nebraska Early Intervention Act, these 2 agencies are responsible for the planning, implementation, and administration of the federal Early Intervention Services System and the Nebraska Early Intervention Act. Additionally, the Nebraska Early Intervention Act requires interagency Planning Region Teams (PRTs) to be responsible for assisting in the planning and implementation of the Early Intervention Act in each local community or region. The IDEA Part C regulations require the Nebraska Part C Co-Lead Agencies to monitor local Early Intervention Programs on the implementation of early intervention regulations outlined in NDE 92 NAC 52 (Rule 52) and NDHHS 480 NAC 1. Each of the PRTs is an interagency coordinating council made up of local schools, health and human service agencies, community agencies, Head Start, families, and others who provide early intervention services. Each PRT covers a specific geographic area of the state and is responsible for implementation of an interagency system of services in the region. The EDN Services Coordination agency within the PRT assumes the responsibility for delivery of the entitlement of services coordination in the region. The EDN Services Coordination agency may be the same agency selected by the PRT as the lead agency, but in many cases, these are two separate agencies working collaboratively to provide early intervention services in the region. The Nebraska Part C Co-Lead Monitoring process gathers data from multiple sources, analyzes results, identifies gaps with Part C services, rates PRT performance, and stimulates the development of improvement activities for the PRT. The monitoring process relies on multiple sources of data to gauge the effectiveness of early intervention supports and services for infants and toddlers with disabilities and their families. Nebraska has developed monitoring procedures which require PRT's to be reviewed at least once every three (3) years for implementation of the requirements under Part C of IDEA. The Nebraska Part C Co-Lead Agencies review a variety of data sources to document each PRT's compliance with NDE 92 NAC 52 (Rule 52) and NDHHS 480 NAC 1, including:

1. IFSP File Review
2. Completion of prior Corrective Action Plans;
3. Policies and Procedures Review;
4. Forms Review;
5. Review of results from mediations, complaint and due process reports; and
6. Review of supporting data from sources such as PRT child count, Referral vs. Verification Data, Referral Sources, CAPTA, and Performance Reports for the last 3 years.

The steps in the monitoring process include:

Step One: The Part C Co-Leads schedule the monitoring plan for the upcoming year. The monitoring team is composed of the Part C Co-Coordinators and additional NDE and NDHHS staff to assist in the Monitoring process. The PRT Lead Agency receives the Notification letter informing the PRT of the scheduled date of the upcoming Part C Monitoring. The Part C Monitoring Team meets with the PRT members to discuss the various components of the monitoring process, including IFSP file reviews, correction of noncompliance, verification of correction of noncompliance, how information generated from the monitoring activities will be incorporated into the Corrective Action Plan (CAP) and PRT Improvement planning process to improve results for infants/toddlers with disabilities and their families.

Step Two: The Part C Monitoring Team reviews the PRT's early intervention process, including the following components:

- Forms used by the PRT to document the implementation of 92 NAC 52 and 480 NAC 1
- IFSP Files
- PRT Policies, Procedures and Practices
- Review of any complaints filed and investigated by the Co-Lead Agencies pursuant to 92 NAC 52 and 480 NAC 1
- Review of any due process findings issued pursuant to 92 NAC 55
- Review of the timely correction of any noncompliance identified during the previous monitoring cycle
- Issues identified as part of previous fiscal review or sub-recipient fiscal reviews

Step Three: The Part C Monitoring Team conducts the Focused PRT Exit Conference. The result of the PRT monitoring is shared with the PRT members. This visit allows an opportunity for clarification or submission of evidence to determine whether or not compliance was met.

Step Four: The Part C Co-Leads provide written notification of Findings to the PRT. The PRT must submit a CAP within 45 days to the Part C Co-Leads. Upon submission of the PRT's CAP, the Part C Co-Leads will give approval in writing.

Step Five: Verification of Correction of Noncompliance and Closeout of Monitoring Process. Pursuant to 92 NAC 52-004.02E, all noncompliance must be corrected as soon as possible, and in no case later than one year from the date on which the PRT is notified of a finding of noncompliance. For all individual instances of noncompliance that can be corrected, the PRT must immediately correct and submit evidence of correction to the Part C Co-Leads, who will document the receipt of evidence of the individual correction. The Closeout Letter will be completed by Part C Co-Leads following the completion of the verification activities and the final report. This Closeout Letter is a clear statement by the Part C Co-Leads that the PRT has corrected the areas of noncompliance previously identified, has successfully completed the CAP, and the PRT is now in full compliance with IDEA Part C Regulations, NDE 92 NAC 52, and NDHHS 480 NAC 1.

Dispute Resolution:

Complaints

The NDE Complaint Investigator will complete the complaint process as identified in 92 NAC 51-009.11, meeting the appropriate timelines. All correspondence to the complainants is completed by the Complaint Investigator. If any noncompliance is identified, the agency will be contacted and

required to complete a CAP, and the Complaint Investigator will send the Closeout Letter.

Due Process Hearings-

The NDE Legal Office provides guidance to Parents, etc., on completing the Dispute Resolution element of the due process hearing in accordance with 92 NAC 51-009.13. Other mediation requests are handled through the regional Mediation Centers, in accordance with 92 NAC 51-009.12.

Mediation-

Mediation is an integral part of the complaint and due process procedures. There are six (6) Mediation Centers located regionally throughout the State of Nebraska to provide services to parents, families and school districts.

Provision of a Free Appropriate Public Education (FAPE)

Since Nebraska is a Birth-mandate state, the Nebraska Department of Education, Office of Special Education works with PRTs, school districts and service agencies to ensure that all infants and toddlers with disabilities in the State of Nebraska are receiving a free, appropriate public education (FAPE) in their natural environment to the maximum extent appropriate.

Timely and Accurate Reporting of Data:

The Nebraska Department of Education, Office of Special Education works with PRTs, school districts, and service agencies to ensure that all data requirements are met in reporting the data. "Deadlines are Deadlines" is the rule for reporting data on time, and ensuring that the data is accurate and not needing to be returned for further review and revision.

Technical Assistance System:

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

Nebraska has spent considerable energy building an "internal" support structure—necessary if we are to move innovative practices and programs from initial training to full implementation. This effort began sincerely in 2009 when two Nebraska practitioners attended the Siskin National Routines-Based Interview (RBI) training institute in Chattanooga, TN to become nationally certified interviewers. Building infrastructure from the top down, the Part C Co-Lead Coordinators and the Part B 619 Coordinator, along with the two newly certified RBI trainers formed a State level implementation team. Using the RBI as the first of Nebraska's "usable interventions", the state began to pilot a statewide implementation plan of training and TA for the RBI as well as additional evidence-based practices. An additional sixteen service providers and services coordinators attended the RBI Siskin Institute with the intent of strategically placing certified RBI trainers geographically across the state. Additional training opportunities provided by the Co-Leads addressed evidence-based practices directly impacted by use of the RBI, e.g. Quality Home Visits, Integrated Service Delivery, and Collaborative Consultation with Childcare. Professional development opportunities and TA have been facilitated using the Nebraska Team Self-Assessment. The tool, "Implementing Evidence-Based Practices in Natural and Inclusive Environments for Children Birth to 3," was adapted from the original work of Robin McWilliam. The statewide coordinators provide TA to support the work of these teams through biannual conference calls and assistance. Because use of the RBI impacts the overall EI process, the focus of the stakeholder groups and our professional development/TA expanded to include evidence-based practices beyond child and family assessment. Using the implementation science research, the state leadership team developed an implementation plan aimed at implementing all three RDA improvement strategies statewide and creating sustainability. The statewide coordinators biannual conference calls and provision of additional TA opportunities has allowed for the development of an RBI statewide fidelity process, monitoring of functional child and family IFSP outcomes, and implementation of routines-based home visits, as well as PRT specific planning for ongoing training and TA. Webinars have been developed to provide an overview of the RDA/SSIP, strengthen the use of the RBI, provide functional outcome guidance, and introduce routines-based home visits using the Getting Ready approach. The Regional RBEI TA implements data-driven professional development and TA within each assigned PRT. Evaluation procedures for the implementation of the RBI, functional child and family IFSP outcomes and routines-based quality home visits are continuously implemented. The results are used to adjust training and TA for the cohort PRT's, as well as statewide.

Nebraska utilizes Teaching Strategies GOLD to collect federal child outcome data. Currently, multiple levels of training on the TS Gold system for early intervention providers and administrators are offered virtually and in multiple locations across the state to provide access for staff. The Early Development Network website provides on-demand TA access for service providers, administrators, services coordinators, planning region teams and families related to regulations, guidelines, RDA/SSIP, evidence-based practices, examples and samples from local PRTs, and training announcements. The site also connects to on-line training modules addressing foundational EI topics, including "Orientation to the Early Development Network in Nebraska," "Home Visitation Core Principles and Practices", and a web-based IFSP development training. In addition, the Co-Leads provide TA by request through meetings, trainings, conference calls, and webinars. The Co-leads conduct a conference every other year which provides a forum for training on the Part C regulations and offers technical assistance guidance on various topics. Also, the Co-Leads continue to provide targeted training/TA as a result of needs identified via the monitoring process.

Professional Development System:

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

For several years, the Nebraska Part C Co-Leads -- Department of Education (NDE) and the Department of Health and Human Services (NDHHS), have provided significant professional development and technical assistance (TA) consistent with evidence-based research in early intervention and the mission, beliefs, and principles promoted by the Early Childhood Technical Assistance Center (ECTAC). Intensive statewide training has focused on the provision of services in natural environments, use of the Primary Service Provider service delivery model, and coaching and teaming practices. The Co-Leads added training and implementation in the use of the Routines Based Interview (RBI) as a child and family assessment process; writing functional and meaningful child and family outcomes; and, provision of quality home visits through the Getting Ready Approach in order to meet RDA/SSIP requirements. The RBI is an assessment tool that uses the research about how young children learn, i.e. through natural learning opportunities within their family, to facilitate family engagement toward improving child and family outcomes. These training initiatives were provided by Dr. Robin McWilliam of the Siskin Institute in TN, Dathan Rush and M'Lisa Shelden of the Family Infant Preschool Program in NC, and Dr. Lisa Knoche of the Center for Research on Children, Youth, Families and Schools at the University of Nebraska-Lincoln -- national researchers and presenters on evidence-based practices in early intervention. Although many of our state's efforts are now primarily related to the RDA work, Nebraska has additional ongoing training efforts that peripherally impact the State Identified Measurable Result (SIMR). These training efforts include: Special Care which focuses on child care providers who care for children with disabilities; Early Learning Guidelines trainings which provide information about developmentally appropriate practices across domains in inclusive settings; Early Childhood Multi-tiered Systems of Support and Pyramid; CAPTA-related trainings to child welfare, court, and EI personnel; and Circle of Security training -- all of which are supported through collaboration with multiple state and private agencies - Nebraska Children and Families Foundation, Nebraska Department of Health and Human Services, Nebraska Head Start State Collaboration Office, University of Nebraska's Center for Children, Families and the Law, University of Nebraska's Munroe Meyer Institute, Higher Education partners at the University of Nebraska Lincoln and Omaha, and the Nebraska Infant Mental Health Association. The Parent Training & Information Center (PTI) is a family partner to the EDN Co-Leads and provides numerous training activities for families, services coordinators and service providers. Family representatives have the opportunity to influence training and TA activities both at the state and local levels by participating in planning sessions and through the provision of feedback. Several trainings are offered to families via PTI and partner agencies, funded by the EDN Co-Leads.

Broad Stakeholder Input:

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

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field. This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP. In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR. Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents. Please see the Parent Members Engagement section for additional information.

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

YES

Number of Parent Members:

15

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.

In October and November of 2022, the Co-Leads engaged in two virtual stakeholder meetings due to the COVID 19 pandemic as well as to accommodate families' schedules. In advance of these meetings, we engaged in several activities to ensure the parent voice was appropriately captured. The EDN co-leads participated in active parent recruitment with all 27 local early intervention programs. We additionally targeted local programs with higher numbers of historically underserved populations to ensure a diverse parent stakeholder make up. Personal contacts and invitations were made with all new parent recruits including ICC parent members. Parents were offered stipends to assist with lost wages and child care to ensure participation. The co-leads also engaged with PTI Nebraska and the University of Nebraska Monroe Meyer Institute, a disability advocacy center, to cohost and facilitate an orientation meeting with the stakeholder parents one week prior to the meeting to provide an overview of the SSIP and SPP-APR to ensure the parents had the appropriate context and information needed to actively participate. All stakeholders were provided copies of the meeting materials in advance of the meeting to give them time to review the data, evaluation progress, proposed targets, and improvement strategies. During the stakeholder meetings engagement strategies included participants' ability to share their input via audio or chat box. Additionally, input was solicited via open discussion.

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.

The Early Development Network (EDN) values family input and families sharing their experiences to improve and prioritize activities in our state. As partners to the EDN, the UNMC Munroe-Meyer Institute and PTI-Nebraska conducted two meetings where stakeholder parents could learn more about the stakeholder process, network with other families, and receive additional information in order to fully participate in the stakeholder meetings. PTI and advocacy center staff supported parents during and after the meetings to answer questions and provide assistance around the stakeholder process in order to improve parent capacity and boost parent engagement in the development of activities designed to improve outcomes for infants and toddlers with disabilities and their families.

Soliciting Public Input:

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

In 2022, the co-leads engaged in multiple forums to solicit public input for analyzing data and developing improvement strategies. The co-leads performed these activities with Nebraska's Part C ICC and Part C RDA stakeholder members. Additionally, monthly Special Education/Early Intervention webinars were held in which information was provided and input was solicited around this activity. The co-leads also engaged in Nebraska's Results Matter Taskforce which consisted of EI administrators, practitioners, and collaborative partners to solicit input for the development of improvement strategies and evaluating progress. We continually recruit and solicit public input. The public is invited to join the RDA stakeholder process via this link on our EDN website: <https://edn.ne.gov/cms/rda-stakeholders-group>

Making Results Available to the Public:

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

The stakeholder meeting materials are posted annually in the fall and archived on the EDN website. These materials can be viewed at the following link: <https://edn.ne.gov/cms/rda-stakeholder-meetings>. Additionally our SSIP is annually reported on the EDN website at this link: <https://edn.ne.gov/cms/state-systemic-improvement-plans-SSIP>

Reporting to the Public:

How and where the State reported to the public on the FFY 2020 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 2020 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

Planning Region Team performance on each of the APR indicators is reported each spring on the Early Development Network website. The report can be found at, <http://edn.ne.gov/spp/regional-data.html>. The Early Development Network website is a site that provides information to the public, families, service providers and the Planning Region Teams on the Early Intervention program in Nebraska. A copy of the state's SPP is located on the EDN site: <http://edn.ne.gov/cms/public-reporting-0>

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

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

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	99.43%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	97.16%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
99	99	100.00%	100%	100.00%	Met target	No Slippage

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of 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.

0

Provide reasons for delay, if applicable.

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).

Nebraska's criteria for timely receipt of early intervention services is as soon as possible after the parent consents in writing to the service but not later than 30 days of receipt of parental consent.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

The Nebraska Department of Education (NDE) and Nebraska Department of Health and Human Services (NDHHS), acting as co-lead agencies (the CoLeads), are responsible for ensuring Part C of the Individuals with Disabilities Education Act (IDEA) is fully implemented for all infants and toddlers with disabilities and their families through the Early Development Network (EDN). The Part C Co-leads monitor the state's Planning Region Teams (PRTs) on a three year cycle. IFSP files and other records maintained by Services Coordinators are reviewed for compliance with IDEA and Medicaid. The Individualized Family Service Plan (IFSP) checklist file review for Improving Learning for Children with Disabilities (ILCD) gathers data regarding the receipt of early intervention services on IFSPs in a timely manner. In FFY 2021, 9 of the Planning Regions participated in an IFSP file review for a total of 99 files. All 99 files (100%) were in compliance with the IFSP services provided in a timely manner.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	91.03%

FFY	2016	2017	2018	2019	2020
Target>=	97.50%	98.00%	98.20%	98.20%	93.00%
Data	98.98%	99.49%	99.24%	99.15%	96.20%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	93.50%	94.00%	94.50%	95.00%	95.50%

Targets: Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field.

This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP.

In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR.

Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents.

Please see the Parent Members Engagement section for additional information.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,201
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey;	07/06/2022	Total number of infants and toddlers with IFSPs	2,222

Source	Date	Description	Data
Section A: Child Count and Settings by Age			

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,201	2,222	96.20%	93.50%	99.05%	Met target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

- a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

Summary Statement 1: Of those infants and toddlers who entered early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 1:

Percent = [(# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d)) divided by ((# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d))] times 100.

Summary Statement 2: The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 2:

Percent = [(# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e)) divided by the (total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field. This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP. In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR. Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents. Please see the Parent Members Engagement section for additional information.

Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2020	Target>=	40.50%	41.00%	41.50%	41.50%	57.80%
A1	59.30%	Data	55.68%	44.28%	39.34%	57.51%	59.30%
A2	2020	Target>=	45.50%	46.00%	47.00%	47.00%	49.84%
A2	51.34%	Data	29.45%	29.51%	25.15%	50.14%	51.34%
B1	2020	Target>=	41.00%	41.50%	42.50%	42.50%	57.08%
B1	58.58%	Data	45.22%	39.41%	33.55%	56.73%	58.58%
B2	2020	Target>=	34.50%	35.00%	36.00%	36.00%	40.10%
B2	41.60%	Data	23.10%	29.31%	23.77%	48.80%	41.60%
C1	2020	Target>=	57.00%	58.50%	60.00%	60.00%	56.39%
C1	57.89%	Data	64.71%	87.32%	80.99%	55.33%	57.89%
C2	2020	Target>=	73.00%	74.00%	75.00%	75.00%	49.74%
C2	51.24%	Data	63.37%	90.20%	91.81%	55.64%	51.24%

Targets

FFY	2021	2022	2023	2024	2025
Target A1>=	58.30%	58.80%	59.30%	59.80%	60.30%
Target A2>=	50.34%	50.84%	51.34%	51.84%	52.34%
Target B1>=	57.58%	58.08%	58.58%	59.08%	59.58%
Target B2>=	40.60%	41.10%	41.60%	42.10%	42.60%
Target C1>=	56.89%	57.39%	57.89%	58.39%	58.89%
Target C2>=	50.24%	50.74%	51.24%	51.74%	52.24%

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

1,281

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	18	1.41%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	414	32.32%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	255	19.91%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	374	29.20%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	220	17.17%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	629	1,061	59.30%	58.30%	59.28%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	594	1,281	51.34%	50.34%	46.37%	Did not meet target	Slippage

Provide reasons for A2 slippage, if applicable

This year Nebraska's Part C OSEP data demonstrated a decline in Summary Statements 2 for Outcomes A and B and Summary Statements 1 and 2 for Outcome C. In 2020, the TSG Research Team determined the GOLD thresholds for establishing age-expected functioning were too high for measuring progress in Part C and disproportionately higher than thresholds applied in other assessment tools that Part C providers in other states may choose to use. The discrepancy was attributed to a need for better guidance from OSEP and for a revised methodology from TSG. To update the scoring algorithm, TSG convened a council of stakeholders from multiple states who use Teaching Strategies GOLD for OSEP reporting, and Nebraska was highly represented on the stakeholder team. The team collaborated to determine the appropriate cut scores used for converting from scores on GOLD to a 7-point scale. The process included reviewing numerous simulations of impacts to data based on different thresholds for age-expected functioning and discussions of the potential impact to comparisons of historical and future data. After multiple reviews, the council came to consensus on the new thresholds. These new cut scores were applied to Nebraska's data, and targets were reset last year for all Outcomes based on the new calculations. While the new scoring algorithm yielded improved alignment with national data trends, the targets were set based on only two years of data, including one year during the COVID 19 public health emergency (PHE). The validity of data collected during the COVID 19 PHE were likely influenced by virtual service delivery, sporadic services due to illness and isolation protocols, and increased dependence on parent report of child skill level due to these factors. Many of the children for whom data are reported this year entered services during the COVID 19 PHE; therefore, the reliability of their progress data must be viewed with caution. These data, paired with the limited data utilized to set targets, are believed to contribute to the decline in Nebraska's submitted Summary Statement data.

To ensure data collected are reliable and valid, TS GOLD data and data collection practices are continuously reviewed and areas in need of improvement are addressed at the local level. Data trends will continue to be evaluated to determine continuous improvements needs in Nebraska. Statewide training was provided including "Using the RBI to inform GOLD scoring" and "GOLD OSEP Administrator training." We also provide multiple various TA opportunities to assist Gold Administrators with valid and reliable OSEP outcome reporting. The Results Driven Accountability (RDA) strategy implementation has demonstrated high quality home visitation practices.

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	9	0.70%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	445	34.74%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	316	24.67%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	365	28.49%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	146	11.40%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	681	1,135	58.58%	57.58%	60.00%	Met target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	511	1,281	41.60%	40.60%	39.89%	Did not meet target	Slippage

Provide reasons for B2 slippage, if applicable

This year Nebraska's Part C OSEP data demonstrated a decline in Summary Statements 2 for Outcomes A and B and Summary Statements 1 and 2 for Outcome C. In 2020, the TSG Research Team determined the GOLD thresholds for establishing age-expected functioning were too high for measuring progress in Part C and disproportionately higher than thresholds applied in other assessment tools that Part C providers in other states may choose to use. The discrepancy was attributed to a need for better guidance from OSEP and for a revised methodology from TSG. To update the scoring algorithm, TSG convened a council of stakeholders from multiple states who use Teaching Strategies GOLD for OSEP reporting, and Nebraska was highly represented on the stakeholder team. The team collaborated to determine the appropriate cut scores used for converting from scores on GOLD to a 7-point scale. The process included reviewing numerous simulations of impacts to data based on different thresholds for age-expected functioning and discussions of the potential impact to comparisons of historical and future data. After multiple reviews, the council came to consensus on the new thresholds. These new cut scores were applied to Nebraska's data, and targets were reset last year for all Outcomes based on the new calculations. While the new scoring algorithm yielded improved alignment with national data trends, the targets were set based on only two years of data, including one year during the COVID 19 public health emergency (PHE). The validity of data collected during the COVID 19 PHE were likely influenced by virtual service delivery, sporadic services due to illness and isolation protocols, and increased dependence on parent report of child skill level due to these factors. Many of the children for whom data are reported this year entered services during the COVID 19 PHE; therefore, the reliability of their progress data must be viewed with caution. These data, paired with the limited data utilized to set targets, are believed to contribute to the decline in Nebraska's submitted Summary Statement data.

To ensure data collected are reliable and valid, TS GOLD data and data collection practices are continuously reviewed and areas in need of improvement are addressed at the local level. Data trends will continue to be evaluated to determine continuous improvements needs in Nebraska. Statewide training was provided including "Using the RBI to inform GOLD scoring" and "GOLD OSEP Administrator training." We also provide multiple various TA opportunities to assist Gold Administrators with valid and reliable OSEP outcome reporting. The Results Driven Accountability (RDA) strategy implementation has demonstrated high quality home visitation practices.

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	20	1.56%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	448	34.97%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	216	16.86%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	326	25.45%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	271	21.16%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	542	1,010	57.89%	56.89%	53.66%	Did not meet target	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	597	1,281	51.24%	50.24%	46.60%	Did not meet target	Slippage

Provide reasons for C1 slippage, if applicable

This year Nebraska's Part C OSEP data demonstrated a decline in Summary Statements 2 for Outcomes A and B and Summary Statements 1 and 2 for Outcome C. In 2020, the TSG Research Team determined the GOLD thresholds for establishing age-expected functioning were too high for measuring progress in Part C and disproportionately higher than thresholds applied in other assessment tools that Part C providers in other states may choose to use. The discrepancy was attributed to a need for better guidance from OSEP and for a revised methodology from TSG. To update the scoring algorithm, TSG convened a council of stakeholders from multiple states who use Teaching Strategies GOLD for OSEP reporting, and Nebraska was highly represented on the stakeholder team. The team collaborated to determine the appropriate cut scores used for converting from scores on GOLD to a 7-point scale. The process included reviewing numerous simulations of impacts to data based on different thresholds for age-expected functioning and discussions of the potential impact to comparisons of historical and future data. After multiple reviews, the council came to consensus on the new thresholds. These new cut scores were applied to Nebraska's data, and targets were reset last year for all Outcomes based on the new calculations. While the new scoring algorithm yielded improved alignment with national data trends, the targets were set based on only two years of data, including one year during the COVID 19 public health emergency (PHE). The validity of data collected during the COVID 19 PHE were likely influenced by virtual service delivery, sporadic services due to illness and isolation protocols, and increased dependence on parent report of child skill level due to these factors. Many of the children for whom data are reported this year entered services during the COVID 19 PHE; therefore, the reliability of their progress data must be viewed with caution. These data, paired with the limited data utilized to set targets, are believed to contribute to the decline in Nebraska's submitted Summary Statement data.

To ensure data collected are reliable and valid, TS GOLD data and data collection practices are continuously reviewed and areas in need of improvement are addressed at the local level. Data trends will continue to be evaluated to determine continuous improvements needs in Nebraska. Statewide training was provided including "Using the RBI to inform GOLD scoring" and "GOLD OSEP Administrator training." We also provide multiple various TA opportunities to assist Gold Administrators with valid and reliable OSEP outcome reporting. The Results Driven Accountability (RDA) strategy implementation has demonstrated high quality home visitation practices.

Provide reasons for C2 slippage, if applicable

This year Nebraska's Part C OSEP data demonstrated a decline in Summary Statements 2 for Outcomes A and B and Summary Statements 1 and 2 for Outcome C. In 2020, the TSG Research Team determined the GOLD thresholds for establishing age-expected functioning were too high for measuring progress in Part C and disproportionately higher than thresholds applied in other assessment tools that Part C providers in other states may choose to use. The discrepancy was attributed to a need for better guidance from OSEP and for a revised methodology from TSG. To update the scoring algorithm, TSG convened a council of stakeholders from multiple states who use Teaching Strategies GOLD for OSEP reporting, and Nebraska was highly represented on the stakeholder team. The team collaborated to determine the appropriate cut scores used for converting from scores on GOLD to a 7-point scale. The process included reviewing numerous simulations of impacts to data based on different thresholds for age-expected functioning and discussions of the potential impact to comparisons of historical and future data. After multiple reviews, the council came to consensus on the new thresholds. These new cut scores were applied to Nebraska's data, and targets were reset last year for all Outcomes based on the new calculations. While the new scoring algorithm yielded improved alignment with national data trends, the targets were set based on only two years of data, including one year during the COVID 19 public health emergency (PHE). The validity of data collected during the COVID 19 PHE were likely influenced by virtual service delivery, sporadic services due to illness and isolation protocols, and increased dependence on parent report of child skill level due to these factors. Many of the children for whom data are reported this year entered services during the COVID 19 PHE; therefore, the reliability of their progress data must be viewed with caution. These data, paired with the limited data utilized to set targets, are believed to contribute to the decline in Nebraska's submitted Summary Statement data.

To ensure data collected are reliable and valid, TS GOLD data and data collection practices are continuously reviewed and areas in need of improvement are addressed at the local level. Data trends will continue to be evaluated to determine continuous improvements needs in Nebraska. Statewide training was provided including "Using the RBI to inform GOLD scoring" and "GOLD OSEP Administrator training." We also provide multiple various TA opportunities to assist Gold Administrators with valid and reliable OSEP outcome reporting. The Results Driven Accountability (RDA) strategy implementation has demonstrated high quality home visitation practices.

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	1,908
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.	225

Sampling Question	Yes / No
Was sampling used?	NO

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

NO

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

Teaching Strategies (TS) GOLD is a scientifically-based authentic, observational assessment system designed for children from birth through third grade. In Nebraska, it is used for children from birth to kindergarten to evaluate their development and learning across the three functional outcomes. At a child's entry and exit, teachers/providers gather and document observations in the GOLD online system, which form the basis of their scoring across four areas of development (social emotional, physical, language, and cognitive) and two areas of content learning (literacy and mathematics). Objectives and dimensions that comprise each of the functional outcomes are based on a crosswalk recommended by the national Early Childhood Outcomes (ECO) Center. Criteria for defining "comparable to same-aged peers" was determined through Item Response Theory (IRT) analyses by Teaching Strategies, based on a national sample. The algorithms result in a 7-point rating system that parallels the ECO Child Outcome Summary (COS) ratings. These ratings by age are programmed into the GOLD online system which generates a rating based on TS GOLD scores. Research studies examining the reliability and validity of TS GOLD may be found at <http://teachingstrategies.com/assessment/research/>.

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

Teaching Strategies (TS) GOLD, an authentic, observational assessment designed for children birth through 3rd grade, is the assessment used to gather data for Indicator C3. At the child's entry or at six months of age and at the time of exit from Part C or at age 3, teachers/providers gather and document information from observations of the child or from an interview (e.g., Routine Based Interview) with the parent(s). This data forms the basis of the scoring across four areas of development (social emotional, physical, language, and cognitive) and two areas of content learning (literacy and mathematics). TS GOLD objectives and dimensions that comprise each of the functional outcomes that are reported are based on a crosswalk recommended by the national Early Child Outcomes (ECO) Center. Criteria for defining "comparable to same-aged peers" was determined through Item

Response Theory (IRT) analyses by Teaching Strategies, based on a national sample. The algorithms result in a 7-point rating system that parallels the Child Outcomes Summary (COS) ratings. These ratings by age are programmed into the TS GOLD online system which generates a rating based on TS GOLD scores for each functional outcomes. Research studies examining the reliability and validity of the TS GOLD may be found at: <https://teachingstrategies.com/our-approach/research/>.

Provide additional information about this indicator (optional).

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

Beginning with the FFY 2022 SPP/APR, due February 1, 2024, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race and 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	2016	2017	2018	2019	2020
A	2006	Target>= =	85.00%	86.00%	87.00%	87.00%	85.92%
A	73.80 %	Data	85.92%	87.37%	89.00%	92.54%	92.12%
B	2006	Target>= =	82.00%	82.30%	82.60%	82.60%	84.62%
B	###C0 4BBA SEDA TA###	Data	84.62%	86.39%	88.04%	92.08%	89.88%
C	2006	Target>= =	91.50%	91.60%	91.70%	91.70%	88.74%

C	84.00 %	Data	88.74%	89.84%	96.07%	96.11%	95.22%
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Targets

FFY	2021	2022	2023	2024	2025
Target A>=	86.92%	87.92%	88.92%	89.92%	90.92%
Target B>=	85.62%	86.62%	87.62%	88.62%	89.62%
Target C>=	89.74%	90.74%	91.74%	92.74%	93.74%

Targets: Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field. This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP. In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR. Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents. Please see the Parent Members Engagement section for additional information.

FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	2,388
Number of respondent families participating in Part C	1,936
Survey Response Rate	81.07%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,850
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,936
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	1,845
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,936
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,853
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,936

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 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)	92.12%	86.92%	95.56%	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)	89.88%	85.62%	95.30%	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)	95.22%	89.74%	95.71%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

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

To increase response rates for groups that are underrepresented, we plan to continue to explore providing surveys in additional languages . Additionally, we plan to promote that the EDN services coordinators remind families to complete their surveys more frequently during the survey submission period to ensure we increase our return rate each year.

Survey Response Rate

FFY	2020	2021
Survey Response Rate	79.20%	81.07%

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

Nebraska is very satisfied with the FFY21 family survey response rate given the global COVID 19 pandemic. We increased our return rate compared to FFY2020. This is evidence that our in-person survey delivery method is an effective strategy that we will continue to implement in the upcoming year. Currently, Nebraska provides the family survey in English and Spanish. To increase response rates for groups that are underrepresented, we plan to continue to explore providing surveys in additional languages . Additionally, we plan to promote that the EDN services coordinators remind families to complete their surveys more frequently during the survey submission period to ensure we increase our return rate each year.

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.

To analyze the response rate, Nebraska compared the number of surveys sent to families with the number of surveys received. The categories we analyzed were race/ethnicity and geographic area.

For race/ethnicity we used the race/ethnicity category from NDE data for all surveys sent and compared to the race/ethnicity recorded on returned surveys. Our overall response rate was 81.07%. Of the respondents, 4.20% were African-American or Black families (compared to 5.40% total enrolled in Part C); 2.01% were American Indian or Alaska Native families (compared to 1.84% total enrolled in Part C); 2.89% were Asian families (compared to 2.93% total enrolled in Part C); 14.00% were Hispanic or Latino families (compared to 15.45% total enrolled in Part C); 63.84% were White families (compared to 62.84% total enrolled in Part C); and 12.96% were families of two or more races (compared to 11.47% total enrolled in Part C). We determined that our data had a nonresponse bias for African American or Black families and an overresponse rate by families of two or more races. In addition to the race/ethnicity category, we analyzed response rate data by geographic areas. We categorized each Planning Region Team (PRT) into one of the following geographic areas, Core Metropolitan, Outlying Metropolitan, Micropolitan Core, and Rural with Urban Cluster. No significant nonresponse bias was found regarding geographic areas within the state.

Steps taken to reduce identified bias and promote responses from a broad cross section of families included promoting EDN service coordinators to remind all families to complete their surveys more frequently during the submission period to ensure we increase our return rate each year. We plan to offer the survey in additional languages in the future. We are also in the process of having materials for families translated into more languages than just Spanish and English to provide more equitable access to information about early intervention services in Nebraska.

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.

Nebraska used the ECTA Representativeness Calculator (<https://ectacenter.org/eco/pages/familyoutcomes-calc.asp>) to evaluate the representativeness of respondents by race/ethnicity and geographic area. As noted above, no significant nonresponse bias was identified for any geographic subgroup. With regard to race-ethnicity, Black or African American families were found to be underrepresented. An explanation for this may be that families categorized as Black or African American self-reported their race-ethnicity as "two or more races" rather than as "black or African American".

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy, age of the infant or toddler, and geographic location in the proportion of responders compared to target group).

As mentioned above, Nebraska used the ECTA Representativeness Calculator to determine representativeness. The ECTA Calculator applies a test of proportional difference to each subgroup in a category. This test compares the representation (proportion) of the subgroup in the population to the representation of the subgroup in the sample. The subgroup comparisons are detailed in a preceding paragraph. The difference in proportions is compared to a distribution of possible differences. For SPP/APR reporting, if the difference exceeded the bounds of the 90% confidence interval, that difference was interpreted as indicating disproportionate representation of that subgroup.

Provide additional information about this indicator (optional).

4 - Prior FFY Required Actions

None

4 - OSEP Response

4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

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.

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.64%

FFY	2016	2017	2018	2019	2020
Target >=	0.63%	0.66%	0.70%	0.70%	0.90%
Data	1.01%	1.03%	1.09%	1.12%	0.95%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	0.90%	0.95%	1.00%	1.05%	1.10%

Targets: Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field.

This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP.

In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR.

Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents.

Please see the Parent Members Engagement section for additional information.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	241
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	23,444

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
241	23,444	0.95%	0.90%	1.03%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	1.67%

FFY	2016	2017	2018	2019	2020
Target >=	1.88%	1.90%	1.92%	1.92%	2.32%
Data	2.32%	2.46%	2.69%	2.75%	2.50%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	2.32%	2.35%	2.38%	2.41%	2.44%

Targets: Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field. This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP. In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR. Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents. Please see the Parent Members Engagement section for additional information.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	2,222
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 3	73,542

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,222	73,542	2.50%	2.32%	3.02%	Met target	No Slippage

Provide additional information about this indicator (optional).

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	79.80%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	93.66%	97.22%	84.87%	90.78%	99.12%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
86	99	99.12%	100%	86.87%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

Slippage can be attributed to 13 individual files which were found to be out of compliance in meeting the 45 day timeline due to provider scheduling causing a delay in meeting the 45 day timeline. The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle, therefore 1/3 of the PRTs are monitored each year. In FFY 2021, 9 of the Planning Regions participated in an IFSP file review for a total of 99 files. In FFY 2020, 9 different Planning Regions participated in an IFSP file review for a total of 113 files. Because the Co-Leads monitor a different cohort of PRTs each year, we are unable to provide a year to year comparison and unable to identify specific factors for slippage that would provide a valid reason for

slippage from year to year. Because the requirements for this indicator have a significant impact on the provision of services to infants and toddlers, the Co-Leads will provide training to ensure that all EIS programs correctly implement the specific regulatory requirements and have strategies in place to ensure compliance. The Co-Leads will continue to conduct additional professional development/technical assistance activities as outlined under the Professional Development and Technical Assistance section of the APR.

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.

0

Provide reasons for delay, if applicable.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

The Nebraska Department of Education (NDE) and Nebraska Department of Health and Human Services (NDHHS), acting as co-lead agencies (the CoLeads), are responsible for ensuring Part C of the Individuals with Disabilities Education Act (IDEA) is fully implemented for all infants and toddlers with disabilities and their families through the Early Development Network (EDN). The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle. IFSP files and other records maintained by Services Coordinators are reviewed for compliance with IDEA and Medicaid. The Individualized Family Service Plan (IFSP) checklist file review for Improving Learning or Children with Disabilities (ILCD) gathers data regarding the receipt of early intervention services on IFSPs in a timely manner. In FFY 2021, 9 of the Planning Regions participated in an IFSP file review for a total of 99 files. In 13 of the 99 files the 45 day timeline was not met. The Co-Leads notified the three programs in writing concerning the findings of noncompliance and the requirement that the noncompliance be corrected as soon as possible. The state has verified that each EIS program is correctly implementing the specific regulatory requirements and have ensured that each child received an initial evaluation, assessment and IFSP meeting, although late, and the services listed on the IFSP within a timely manner from the IFSP meeting.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

The Co-Leads notified the EIS program in writing concerning the finding of noncompliance and the requirement that the noncompliance be corrected as soon as possible, but in no case more than one year from identification. The State verified that the EIS program not in compliance, correctly implemented the specific regulatory requirement and ensured that the child received an evaluation, assessment, and IFSP meeting, although late, and the services listed on the IFSP in a timely manner as noted in the FFY 2020 APR. The EIS program was required to develop and implement a Corrective Action Plan to ensure correction of noncompliance within one year. The Co-Leads monitored the implementation of the Corrective Action Plan. In addition, the Co-Leads reviewed files of newly-referred children for assurance that compliance was met and the CAP-related processes, as well as specific regulatory requirements, were implemented. Within one year of identification the EIS program was found to be in 100% compliance in meeting the 45-day timeline.

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

The EIS program was required to develop and implement a Corrective Action Plan to ensure correction of noncompliance within one year. The Co-Leads monitored the implementation of the Corrective Action Plan. In addition, the Co-Leads reviewed files of newly-referred children for assurance that compliance was met and the CAP-related processes, as well as specific regulatory requirements, were implemented. Within one year of identification the EIS program was found to be in 100% compliance in meeting the 45-day timeline.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 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 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

FFY 2020 findings of noncompliance verified as corrected is addressed within Indicator 7 as required by the template. Please reference Indicator 7.

7 - OSEP Response

7 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	86.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	69.23%	93.06%	51.85%	89.06%	82.35%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
41	53	82.35%	100%	77.36%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Slippage can be attributed to 12 transition plans which were found to be out of compliance due to the lack of the individual family step or lack of a specific, individualized step/service necessary to meet the child's/family's needs contained within the transition plan. The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle, therefore 1/3 of the PRTs are monitored each year. In FFY 2021, nine (9) of the Planning Regions participated in an IFSP file review for a total of 99 files, of which 53 files had transition plans reviewed for compliance. In FFY 2020, nine (9) different Planning Regions participated in an IFSP file review for a total of 113 files, of which 51 files had transition plans reviewed for compliance. Because the Co-Leads monitor a different cohort of PRTs each year, we are unable to provide a year to year comparison and unable to identify specific factors for slippage that would provide a valid reason for slippage from year to year. Because the requirements and appropriate documentation of transition plans and timeline for children exiting Part C has a significant impact on the provision of services to infants and toddlers, the Co-Leads believe that it is important to continue training to ensure that all EIS programs correctly implement the specific regulatory requirements and have strategies in place to ensure compliance. The Co-Leads will continue to conduct additional professional development/technical assistance activities as outlined under the Professional Development and Technical Assistance section of the APR.

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.

0

Provide reasons for delay, if applicable.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

The Nebraska Department of Education (NDE) and Nebraska Department of Health and Human Services (NDHHS), acting as co-lead agencies (the Co-Leads), are responsible for ensuring Part C of the Individuals with Disabilities Education Act (IDEA) is fully implemented for all infants and toddlers with disabilities and their families through the Early Development Network (EDN). The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle. IFSP files and other records maintained by Services Coordinators are reviewed for compliance with IDEA and Medicaid. In FFY 2021, nine (9) of the Planning Regions participated in an IFSP file review for a total of 99 files, of which 53 files had transition plans reviewed for compliance. The Co-Leads determined that all 53 files contained complete transition plans prior to the child exiting Part C. However, 12 transition plans were found to be out of compliance due to the lack of the individual family steps and a specific step/service individualized to the child's/family's needs. The Co-Leads notified the 5 EIS programs in writing concerning the findings of noncompliance and the requirement that the noncompliance be corrected as soon as possible but in no case more than one year from identification.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

In each case of noncompliance, the Co-Leads notified the EIS program in writing concerning the finding of noncompliance and the requirement that the noncompliance be corrected as soon as possible, but in no case more than one year from identification. The State verified that each EIS program not in compliance correctly implemented the specific regulatory requirement and ensured that all children exiting Part C received an IFSP with transition steps and services prior to exiting Part C. Each EIS program was required to develop and implement a Corrective Action Plan. In addition, the Co-Leads reviewed different files of children exiting Part C for assurance that compliance was met and the CAP-related processes, as well as specific regulatory requirements were implemented. Within one year of identification each EIS program was found to be in 100% compliance.

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

Each EIS program was required to develop and implement a Corrective Action Plan to ensure correction of noncompliance within one year. The Co-Leads monitored the implementation of the Corrective Action Plan. In addition, the Co-Leads reviewed additional files of children exiting Part C for assurance that compliance was met and the CAP-related processes, as well as specific regulatory requirements, were implemented. Within one year of identification each EIS program was found to be in 100% compliance. The requirements and appropriate documentation of transition plans for children

exiting Part C will continue to be a training topic to ensure that all EIS programs correctly implement the specific regulatory requirements and have strategies in plan to ensure compliance. The state has verified that each EIS program was correctly implementing the specific regulatory requirements and ensured that all children, who had not yet exited Part C, were provided with appropriate transition plans documenting all necessary transition steps and services prior to the children exiting Part C.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 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 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

FFY 2020 findings of noncompliance verified as corrected is addressed within Indicator 8a as required by the template. Please reference Indicator 8a.

8A - OSEP Response

8A - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	86.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
53	53	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.

Describe the method used to collect these data.

Nebraska uses State Monitoring. The Nebraska Department of Education (NDE) and Nebraska Department of Health and Human Services (NDHHS), acting as co-lead agencies (a.k.a. the Co-Leads), are responsible for ensuring Part C of the Individuals with Disabilities Education Act (IDEA) is fully implemented for all infants and toddlers with disabilities and their families through the Early Development Network (EDN). The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle. In FFY 2021, nine (9) of the Planning Regions participated in an IFSP file review for a total of 99 files, of which 53 files had children exiting Part C who received proper Notification to LEA and SEA as the child was potentially eligible for Part B.

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

NO

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

State monitoring

Describe the method used to select EIS programs for monitoring.

The Nebraska Department of Education (NDE) and Nebraska Department of Health and Human Services (NDHHS), acting as co-lead agencies (the Co-Leads), are responsible for ensuring Part C of the Individuals with Disabilities Education Act (IDEA) is fully implemented for all infants and toddlers with disabilities and their families through the Early Development Network (EDN). The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle. IFSP files and other records maintained by Services Coordinators are reviewed for compliance with IDEA and Medicaid. In FFY 2021, nine (9) of the Planning Regions participated in an IFSP file review for a total of 99 files, of which 53 files had children exiting Part C who received proper Notification to LEA and SEA as the child was potentially eligible for Part B.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8B - Prior FFY Required Actions

None

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	76.92%	95.83%	87.04%	87.50%	96.08%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
48	53	96.08%	100%	90.57%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Slippage can be attributed to 5 transition plans which were found to be out of compliance due to the transition conference occurring late due to provider scheduling causing a delay. The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle, therefore 1/3 of the PRTs are monitored each year. In FFY 2021, nine (9) of the Planning Regions participated in an IFSP file review for a total of 99 files, of which 53 files had transition plans reviewed for compliance. In FFY 2020, nine (9) different Planning Regions participated in an IFSP file review for a total of 113 files, of which 51 files had transition plans reviewed for compliance. Because the Co-Leads monitor a different cohort of PRTs each year, we are unable to provide a year to year comparison and unable to identify specific factors for slippage that would provide a valid reason for slippage from year to year. Because the requirements and appropriate documentation of transition plans and timeline for children exiting Part C has a significant impact on the provision of services to infants and toddlers, the Co-Leads believe that it is important to continue training to ensure that all EIS programs correctly implement the specific regulatory requirements and have strategies in place to ensure compliance. The Co-Leads will continue to conduct additional professional development/technical assistance activities as outlined under the Professional Development and Technical Assistance section of the APR.

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.

0

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.

0

Provide reasons for delay, if applicable.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

The Nebraska Department of Education (NDE) and Nebraska Department of Health and Human Services (NDHHS), acting as co-lead agencies (the Co-Leads), are responsible for ensuring Part C of the Individuals with Disabilities Education Act (IDEA) is fully implemented for all infants and toddlers with disabilities and their families through the Early Development Network (EDN). The Part C Co-Leads monitor the state's Planning Region Teams (PRTs) on a three year cycle. IFSP files and other records maintained by Services Coordinators are reviewed for compliance with IDEA and Medicaid. In FFY 2021, nine (9) of the Planning Regions participated in an IFSP file review for a total of 99 files, of which 53 files had children exiting Part C in which it was required to conduct a transition conference by the third birthday. The Co-Leads notified the 4 EIS programs in writing concerning the findings of noncompliance and the requirement that the noncompliance be corrected as soon as possible but in no case more than one year from identification. The State has verified that the EIS programs are correctly implementing the specific regulatory requirements and have ensured that each child/family received a transition conference and plan, although late, and the services listed on the IFSP within a timely manner from the IFSP meeting.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

In each case of noncompliance, the Co-Leads notified the EIS program in writing concerning the finding of noncompliance and the requirement that the noncompliance be corrected as soon as possible, but in no case more than one year from identification. The State verified that each EIS program not in

compliance correctly implemented the specific regulatory requirement and ensured that all children exiting Part C received a transition conference prior to exiting Part C. Each EIS program was required to develop and implement a Corrective Action Plan. In addition, the Co-Leads reviewed different files of children exiting Part C for assurance that compliance was met and the CAP-related processes, as well as specific regulatory requirements were implemented. Within one year of identification each EIS program was found to be in 100% compliance.

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

Each EIS program was required to develop and implement a Corrective Action Plan to ensure correction of noncompliance within one year. The Co-Leads monitored the implementation of the Corrective Action Plan. In addition, the Co-Leads reviewed additional files of children exiting Part C for assurance that compliance was met and the CAP-related processes, as well as specific regulatory requirements, were implemented. Within one year of identification each EIS program was found to be in 100% compliance. The transition conference/planning requirements for children exiting Part C will continue to be a training topic to ensure that all EIS programs correctly implement the specific regulatory requirements and have strategies in plan to ensure compliance. The state has verified that each EIS program was correctly implementing the specific regulatory requirements and ensured that all children, who had not yet exited Part C, received a transition conference prior to exiting Part C.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 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 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

FFY 2020 findings of noncompliance verified as corrected is addressed within Indicator 8c as required by the template. Please reference Indicator 8c.

8C - OSEP Response

8C - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field.

This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP.

In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR.

Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents.

Please see the Parent Members Engagement section for additional information.

Historical Data

Baseline Year	Baseline Data

FFY	2016	2017	2018	2019	2020

Target>=					
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2021. 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)) divided by 2.1] times 100.

Instructions

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

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

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

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	0

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field. This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP. In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR. Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents. Please see the Parent Members Engagement section for additional information.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data				100.00%	

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2021. 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 that must be 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 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 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 2021 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 2021 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, 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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 (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., 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 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) 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)?

Increase the number and percentage of infants and toddlers who demonstrate progress in the acquisition and use of knowledge and skills (including early language/communication) – Indicator C3B, Summary Statement 1. Additionally, Nebraska identified Indicator C4B: Effectively Communicate Child’s Needs as a benchmark.

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.

Nebraska is utilizing a cohort approach to scale-up the three coherent improvement strategies through the state’s Planning Region Team system. Cohort 1, composed of PRTs 7, 22 and 27, began RBI and functional IFSP outcome training in January 2015. Cohort 2, composed of PRTs 4, 18, 19, and 21, began RBI and functional IFSP outcome training a year later (January 2016). Cohort 1 received training on strategy 3, routines-based home visits, in June 2017. Cohort 2 received this training in June 2018.

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://edn.ne.gov/cms/introduction-to-results-driven-accountability>

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
2020	58.58%

Targets

FFY	2021	2022	2023	2024	2025
Target>=	57.58%	58.08%	58.58%	59.08%	59.58%

FFY 2021 SPP/APR Data

3B Summary Statement 1 Numerator	3B Summary Statement 1 Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
681	1,135	58.58%	57.58%	60.00%	Met target	No Slippage

Provide the data source for the FFY 2021 data.

Teaching Strategies GOLD

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

Teaching Strategies (TS) GOLD, an authentic, observational assessment designed for children birth through 3rd grade, is the assessment used to gather data for Indicator C3. At the child’s entry or at six months of age and at the time of exit from Part C or at age 3, teachers/providers gather and

document information from observations of the child or from an interview (e.g., Routine Based Interview) with the parent(s). This data forms the basis of the scoring across four areas of development (social emotional, physical, language, and cognitive) and two areas of content learning (literacy and mathematics). TS GOLD objectives and dimensions that comprise each of the functional outcomes that are reported are based on a crosswalk recommended by the national Early Child Outcomes (ECO) Center. Criteria for defining "comparable to same-aged peers" was determined through Item Response Theory (IRT) analyses by Teaching Strategies, based on a national sample. The algorithms result in a 7-point rating system that parallels the Child Outcomes Summary (COS) ratings. These ratings by age are programmed into the TS GOLD online system which generates a rating based on TS GOLD scores for each functional outcome. Research studies examining the reliability and validity of the TS GOLD may be found at: <https://teachingstrategies.com/our-approach/research/>.

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

YES

Describe any additional data collected by the State to assess progress toward the SiMR.

Nebraska identified Indicator C4B: Effectively Communicate Child's Needs as a benchmark. The percent of families reporting that they are effectively able to communicate their children's needs continues to trend upwards, as noted in our annual Part C family survey data.

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

NO

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

YES

If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.

This year Nebraska's Part C OSEP data demonstrated a decline in Summary Statements 2 for Outcomes A and B and Summary Statements 1 and 2 for Outcome C. In 2020, the TSG Research Team determined the GOLD thresholds for establishing age-expected functioning were too high for measuring progress in Part C and disproportionately higher than thresholds applied in other assessment tools that Part C providers in other states may choose to use. The discrepancy was attributed to a need for better guidance from OSEP and for a revised methodology from TSG. To update the scoring algorithm, TSG convened a council of stakeholders from multiple states who use Teaching Strategies GOLD for OSEP reporting, and Nebraska was highly represented on the stakeholder team. The team collaborated to determine the appropriate cut scores used for converting from scores on GOLD to a 7-point scale. The process included reviewing numerous simulations of impacts to data based on different thresholds for age-expected functioning and discussions of the potential impact to comparisons of historical and future data. After multiple reviews, the council came to consensus on the new thresholds. These new cut scores were applied to Nebraska's data, and targets were reset last year for all Outcomes based on the new calculations. While the new scoring algorithm yielded improved alignment with national data trends, the targets were set based on only two years of data, including one year during the COVID 19 public health emergency (PHE). The validity of data collected during the COVID 19 PHE were likely influenced by virtual service delivery, sporadic services due to illness and isolation protocols, and increased dependence on parent report of child skill level due to these factors. Many of the children for whom data are reported this year entered services during the COVID 19 PHE; therefore, the reliability of their progress data must be viewed with caution. These data, paired with the limited data utilized to set targets, are believed to contribute to the decline in Nebraska's submitted Summary Statement data.

The State fully returned to in-person service delivery towards the end of this reporting cycle. This resulted in decreased reliance on parent report of child skill levels. The state also did data validation checks prior to finalizing Indicator 3 data, in order to target districts that were missing child outcome data and ensure they entered the child outcome data timely.

Section B: Implementation, Analysis and Evaluation

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

Here is the link to the current evaluation plan: <https://edn.ne.gov/cms/sites/default/files/u26/FFY19-SSIP.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.

The Part C SSIP Leadership team currently consists of Amy Bunnell (NDE Part C Co-Coordinator), Cole Johnson (Part C Data Manager/PRT Coordinator), Jessica Anthony (Department of Health and Human Services (DHHS) Part C Co-Coordinator), Sue Bainter, Jeanne Fielder, and Janice Lee, RBEI state coordinators.

Nebraska's (TA) system consists of:

(a) State Leadership Team - Meets for a day long meeting monthly; has weekly calls, utilizes access to a database of PRT activities which allows for oversight of all training and new initiatives, while monitoring and working with the local planning region teams (PRT) to improve early intervention (EI) services;

(b) 3 State Coordinators - Provide RBEI training, follow up and supports to 7 cohort PRT's and leadership teams; trains and supports regional TA Providers; and develops training presentations and materials;

(c) Regional TA Providers - geographically located to support PRTs; assist with individual PRT training plans; provides RBEI training, coaching, and TA to PRT's;

(d) TA Provider dedicated to supporting PRTs to develop strong leadership to facilitate the implementation of the RDA Strategies. Our experience with the PRTs the last few years has led us to the clear understanding that the strategies cannot be successfully implemented without strong leadership teams. Deliverables from this infrastructure strategy have included: creating a clear understanding of the role and function of the leadership team, developing a sustainable data review process at the local level in order to contribute to a continuous improvement plan, assisting with building an infrastructure for ongoing implementation with fidelity, and creating and carrying out an evaluation plan to measure progress.

(e) Local PRT Leadership teams - 3-5 people (administrators, service coordination, providers) responsible for implementation of EB practices, evaluation efforts, fidelity in their region;

- (f) Local PRT coaches - trained as coaches for the evidence based practices (EBP) to provide fidelity, implementation support, and training of new staff to EI providers and services coordinators in their region.
- (g) UNL received an OSEP-funded grant, Coaching in Early Intervention: Promoting Outcomes for Infants/Toddlers with disabilities using Evidence-Based Practices (CEI). The CEI project has continued into Year 2 with activities focused on training, coach support, data collection, feedback, and refinement of the coaching model. We implemented CEI with our first cohort in two demonstration sites. The CEI team developed recruitment materials for state coaches, site coaches, EI personnel, and families. Several trainings were held to introduce participating coaches to the CEI model and evidence-based coaching practices, facilitate coaching practice, and review procedural aspects of the project. The CEI team also developed a virtual training module, training manual, and documentation for using the Goal Attainment Scale (GAS) measure with families. In February 2022, the CEI team held the first Professional Learning Community session, which included state coaches as facilitators and site coaches as participants. The team provided in-depth training on aspects of the coaching model and opportunities for site coaches to practice via role play. EI personnel and family demographic data, coach and EI coaching relationship satisfaction, and family satisfaction data is currently being collected and video data from coaching interactions is being coded to understand coaching practices in action. The team regularly solicited feedback from PRT leadership, state coaches, and site coaches to inform implementation. The team continued to meet with the Part C SSIP Leadership Team for feedback at the state level. The team used feedback from all project stakeholders to explore and implement changes as appropriate. Examples include adjusting training approaches, streamlining communication, and altering coaching tools and forms.
- (h) The co-leads contracted with Johanna Higgins, PhD, Independent Consultant, to create informative webinars to expand on the Getting Ready Approach partnership component of "between visit communication". Dr. Higgins collaborated with EI providers and services coordinators from the field and the RBEI Coordinators to ensure that the content had social utility and was in sync with the Getting Ready Approach training and implementation. Communication between home visits potentially extends the interventions that are addressed during home visits by building family capacity through these between visit contacts.

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.

- The following professional development and TA strategies support system improvement and change, and are necessary for statewide scale up:
1. The Co-Leads have continued to offer and utilize virtual training in addition to face to face training in order to effectively reach the far west side of Nebraska which, because of geography, is more likely to utilize professional development in this format as their preferred method of conducting business. Using both face to face and virtual options allows the state leadership team to complete the scale-up of the evidence based practices as well as making it more convenient for sustaining the practices through ongoing offering of training, ongoing requests for individualized coaching and TA, and approval/fidelity requirements.
 2. A new training was developed: "Using the RBI and Quality Home Visits to Develop a Quality IFSP." This training was designed to support participants utilizing information from Routines Based Interviews, Quality Home Visits, and Ongoing Assessment to collaborate with families in developing functional, family-centered IFSPs. The training content includes the process of turning Routines Based Interview priorities into measurable outcomes and improving quality related to the outcome structures of "child and family strengths and resources" and "what will be done by whom" so as to better guide routines-based home visits.. EI professionals were encouraged to attend in teams and the training included video clips and hands-on activity with IFSPs. The training was first piloted in two cohort regions to seek feedback and any need for revisions. Enhanced effectiveness of professional roles as a result of the training content was rated at an average level of 4.1-5.0 by participants at both sites. Open-ended questions were used to gather feedback about possible changes that might be needed, and in particular, participants asked for more clarification about what is appropriate for the "what will be done by whom" section of the outcomes, and what fits better in the actual home visit. Adjustments and additional examples were drafted, based on this feedback, and it was determined that the training was best offered after a PRT had completed training and implementation of the 3 EBPs. Thus far it has been delivered in 1 region and 2 additional sites have it scheduled.
 3. The RBEI "refresher" training is a professional development opportunity offered by the TA providers within their geographic regions and based upon the unique and individual training and TA needs of the PRT. The TA provider collaborates with the PRT to review their data, and determine the practices to be addressed, with follow up as needed.
 4. Coaching in Early Intervention (CEI) - The first two demonstration sites completed involvement in CEI in Fall 2022. For the current cohort, we have developed three tracks of training based on participant response. One track is for returning coaches, one is for new coaches, and a third is aligned with the approval process for the evidence-based practices. Participants will progress through training, coaching and feedback activities during the next reporting period. Evidence-based coaching practices will be enacted in peer-to-peer coaching interactions. Data collection and use will be embedded within the model to support and improve the coaching system.
 5. The Getting Ready Approach component of "between visit communication" has, to date, provided support from providers and services coordinators to extend the interventions practiced and planned for during home visits. The informative webinars were provided so as to supplement content from the original training. Feedback from the field to the state leadership team indicated that this particular component was not being implemented in a way that would truly contribute to achievement of the SiMR and therefore additional professional development was needed. The webinars are posted at: <https://edn.ne.gov/cms/enhancing-communication-with-caregivers-in-early-intervention-ecc-ei-project>

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

YES

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

A new TA provider was added to the statewide cadre in order to provide targeted support to a small number of PRTs needing more intense and focused TA in order to implement the evidence-based improvement strategies. Thus far, the TA provider has facilitated the approval of EI providers and services coordinators in the RBI, as the first evidence-based practice in the RBEI approach.

The RBEI Coordinators collaborated with Dr. Lisa Knoche, from the University of Nebraska Lincoln, to create two technical assistance documents to: 1) address Frequently Asked Questions about the Getting Ready Approach <https://edn.ne.gov/cms/sites/default/files/GR%20FAQ%202022.pdf>; and 2) support implementation of the RBI and the Getting Ready Approach with diverse families <https://edn.ne.gov/cms/sites/default/files/GR%20RBI%20Implementing%20with%20Diverse%20Families.pdf> and provide guidance as to more sensitive implementation for all families.

The co-leads contracted with Johanna Higgins, PhD, Independent Consultant, to create informative webinars to expand on the Getting Ready Approach partnership component of "between visit communication". Dr. Higgins collaborated with EI providers and services coordinators from the field and the RBEI Coordinators to ensure that the content had social utility and was in sync with the Getting Ready Approach training and implementation. Communication between home visits potentially extends the interventions that are addressed during home visits by building family capacity through these between visit contacts. Dr. Higgins facilitated two webinars based on the "between visit communication" content of the GR Approach. The webinars are posted at: <https://edn.ne.gov/cms/enhancing-communication-with-caregivers-in-early-intervention-ecc-ei-project>

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

Next steps for the targeted TA support related to individual infrastructure strategies include: complete RBI approval for the remaining providers and services coordinators, establish an annual RBI fidelity process, and assist with an EI team meeting structure. The anticipated outcome is that providers and SCs receiving the targeted support will use the RBI as the evidence based child and family assessment, with fidelity and be supported by their EI team.

Next steps and anticipated outcomes for the TA guidance documents: TA documents will be used by the field to enhance communication with families between visits; and providers and services coordinators will adopt strategies which link to individual family backgrounds. Providers and SCs will implement culturally sensitive RBIs and home visits using the Getting Ready Approach.

Next steps and anticipated outcomes for the “between visit communication” component of the Getting Ready Approach: Next steps for the information will be to use the content from Dr. Higgins’ work in this area to provide TA guides which address relevant examples, criteria for EI teams to use when reviewing potential technology, and evidence-based supporting literature. The TA guides will be posted with the webinars as supplemental information. The expected outcomes of these TA guides will allow practical application of effective communication strategies, with families, by providers and SCs.

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

1. The Routines-Based Interview (RBI);- Child and Family Assessment
2. Functional child and family Individualized Family Service Plan (IFSP) outcomes; and
3. Routines-based home visits (Getting Ready Approach)

Provide a summary of each evidence-based practice.

The RBI is a semi-structured interview (McWilliam, 2010) during which the family describes their day to day life in terms of their child and family’s function, what’s going well and what’s not, DEC Recommended Practice - A7. Practitioners obtain information about the child’s skills in daily activities, routines, and environments such as home, center, and community.

Functional IFSP outcomes (Boavida et al., 2014) are based on child participation within everyday routines (child outcomes), and family perceived needs – housing, education, medical resources, etc. (family outcomes). DEC Recommended Practice - F4. Practitioners and the family work together to create outcomes or goals, develop individualized plans, and implement practices that address the family’s priorities and concerns and the child’s strengths and needs.

Routines-based home visits are accomplished via the Getting Ready Approach which is a relationally based parent engagement intervention promoting school and social readiness for young children from birth to age 5 (Sheridan et al., 2008; Sheridan et al., 2010). It has been implemented effectively in the context of home visitation services. Grounded in ecological theory, it focuses on strengthening collaborative partnerships between early childhood professionals and parents. DEC Recommended Practices - INS13. Practitioners use coaching or consultation strategies with primary caregivers or other adults to facilitate positive adult-child interactions and instruction intentionally designed to promote child learning and development.

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 improvement strategies, as a unified set, are referred to as a “routines-based early intervention” (RBEI) approach. Nebraska expects to see a positive effect on the SiMR when EI teams (1) fully implement an evidence-based child and family assessment (RBI); (2) use the priorities identified during the RBI to develop functional child and family IFSP outcomes based on everyday routines; and (3) implement routines-based home visits focused on meeting the child and family IFSP outcomes. Child outcomes will improve because all 3 strategies are based on evidence about how young children learn - from everyday learning opportunities and with the people/materials/environment that are most familiar to them. EI personnel are trained and approved in the 3 practices through a standardized process including trained facilitators, coaching for approval according to a checklist which is also used to determine annual fidelity. Therefore, once training and approval has occurred, improvements in child outcomes can be attributed to the practices which are implemented in a consistent way. Nebraska also chose to use Indicator C4B as a benchmark for the SiMR. The Co-leads believe that taken together, the three improvement strategies of the SSIP will increase families’ perceptions of their ability to effectively communicate their children’s needs.

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

For the 7 cohort PRTs: RBI - RBI Implementation Checklists documenting 85% accuracy or better are completed by RBI approved coaches at both initial approval and annually for fidelity; functional IFSP child and family outcomes - annual analysis of the quality and quantity of IFSPs using the state’s IFSP Quality Outcome Checklist; Quality routines-based home visits - Home Visit Implementation Checklist documenting state determined 80% are completed by Home Visit approved coaches at both initial approval level and annually for fidelity.

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.

Data from the IFSP Outcome Analysis conducted annually demonstrates growth across cohorts since baseline in both quantity and quality indicators.

Following RBI Boot Camp training providers, services coordinators, and families are asked to complete an evaluation. Data from the evaluations are overall favorable and support the continuation of the practice. Specifically, data from the RBI Boot Camp evaluations indicate that as a result of the training, participants feel prepared to complete Routines Based Interviews. When providers and services coordinators were asked the question “Are you confident that you can successfully complete an RBI?” 88% of the participants answered “yes”. 98% would recommend the boot camp to others. When asked if the interactivity of the boot camp (face-to-face and virtual format) was appropriate for the content, 97% of participants said that it was. One participant stated, “I thought receiving the overall info as a large group worked well but I really loved breaking out into the same small groups each day. I feel this really helped me to feel safe to make mistakes and ask questions. After participating in the interview, families were asked if they thought the interview helped them to identify their priorities for their child, 89% of families said that it did. Additionally, 97% of families said they would recommend the RBI to others. One possible concern from EI providers and services coordinators about the RBI process is that the interview questions can be too personal. Family participants were asked if they thought the questions were too personal, 74% of families said the questions were not too personal; 19% said that some questions were personal, but that it was not a problem. One family shared “I think in order to get adequate services & a clear picture, you have to get pretty personal. I thought they handled delicate topics very well.”

Following the Getting Ready Approach training, providers and services coordinators are asked to complete an evaluation. Using retrospective ratings, the providers who participated in the trainings offered in July 2022-July 2023, scored their knowledge of practices to support quality home visitation at an average of 5.32 on a scale of 1-6. Services Coordinators from the same trainings scored their knowledge of practices to support quality home visitation at an average of 5.33 on the 1-6 scale. Further, providers and services coordinators noted that the effect of Getting Ready implementation would be that children would meet their outcomes more rapidly, and summarized: “better outcomes, better relationships, more effective home visits”.

Four new questions were added to the Annual Part C Family Survey in 2020 related to the implementation of the 3 coherent improvement strategies. Analysis of these additional questions for the second year provided evaluation data for RBEI statewide practices.

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

Next steps for the:

RBI: (a) continue with annual fidelity checks for RBI; (b) development of an RBI 101 training for EI providers who do not need to be approved in the RBI but will be trained and approved in quality routines-based home visits; Nebraska's quality routines-based home visits are guided by child and family IFSP outcomes using the context of the family's daily life which comes from the RBI. Therefore, all EI providers must understand the purpose and structure of the RBI. The training will include the same information as the RBI training for approval including representative clips of an RBI being conducted. The RBI 101 will be a required prerequisite for quality routines-based home visit training and approval. Anticipated outcomes: cohorts will continue to meet RBI fidelity; providers participating in the routines-based home visits will understand the RBI and how it interfaces with routines-based home visits. Functional IFSP Outcomes: an annual analysis of cohort IFSP outcomes will be continued, using the Quality Outcomes Checklist and determining the mean number of outcomes per PRT. Anticipated outcome: cohorts will improve or maintain the level of quality and quantity as measured by the analysis.

Quality Routines-Based Home Visits: (a) continue with annual fidelity checks for a routines-based home visit using the Getting Ready Approach; (b) review of quality routines-based home visit plans which provide documentation of the collaboration between the provider or services coordinator and the family of the home visit; the home visit plan includes the IFSP outcome addressed, progress toward IFSP outcomes, and next steps for families/professionals between home visits; anticipated outcomes: cohorts will continue to meet Getting Ready home visit fidelity; state coordinators will provide guidance to the field as to quality documentation of the Getting Ready Approach.

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.

Outcome data analysis. In the annual IFSP outcome analysis from the cohort PRTs, the Co-Leads look at both "quality" and "quantity." Regarding quality, the state uses a Quality Outcome Checklist to score child and family outcomes, looking for an increase in quality scores over time. Regarding quantity, the state looks for a mean number of outcomes within the range of 6-12 outcomes per IFSP, with a mix of child and family outcomes as appropriate. The state conducted the seventh annual IFSP outcome analysis for cohort 1, and the sixth annual IFSP outcome analysis for cohort 2. Regarding outcome quality, results indicated that both cohorts continue to demonstrate strong quality scores. Cohort 1 showed an average score of 4.6/5 (94%) for child outcomes and 2.4/3(81%) for family outcomes. Average scores for cohort 2 were 4.5/5 (90%) for child outcomes and 2.6 (86%) for family outcomes.

Regarding quantity, results for both cohorts indicated that all but one region demonstrated significant improvement in the mean number of IFSP child and family outcomes when compared to baseline. In cohort 1, all regions had a mean number within the expected range with a mean number of 6.9. In cohort 2, all but one region had a mean number of outcomes in the expected range. The mean number of outcomes for the cohort was 5.8. The state RBEI coordinators continue to provide targeted technical assistance (TA) and training to the cohorts to ensure continued improvement in quality and quantity of IFSP outcomes.

Fidelity: Annual fidelity evaluation data for each cohort remains stable.

Annual Part C Family Survey: Four new questions were added to the family survey in 2020 related to the implementation of the 3 coherent improvement strategies. The four questions will continue to be included within the annual family survey and will continue to provide evaluation data for RBEI statewide practices.

This data supports the decision not to make revisions to the SSIP.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Stakeholder Involvement: Nebraska regularly seeks input from stakeholders when establishing policy, regulation or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report, Nebraska has established a broad based stakeholder group. The group includes representatives of parents, school district Directors of Special Education, special education staff, early childhood programs, Routines Based Early Intervention (RBEI) technical assistants, higher education, services coordination, Head Start, Health and Human Services, community agencies, early intervention service providers, court system, psychologists, early childhood special education, and the medical field.

This group has met periodically throughout the past year and will continue meeting to establish/review targets and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the Stakeholders have reviewed historical data around each of the indicators and established targets for each of the indicators. Additionally, the Stakeholders assisted the Co-leads in establishing the State Identified Measurable Result (SIMR). Stakeholders provided guidance and input on activities and evaluation measures of the SSIP.

In addition to the Stakeholder group established specifically for the purpose of gathering input on the SSIP and SPP/APR, Nebraska also obtains input from the Special Education Advisory Council (SEAC) and the Early Childhood Interagency Coordinating Council (ECICC). These Councils are established pursuant to 34 CFR 300.167 and 34 CFR 303.600 and as such provide for input from a diverse group of stakeholders. The Councils regularly discuss the SPP/APR and provide input on the targets and strategies contained therein. SEAC and ECICC will continue to be utilized for input on the development of the SSIP and the SIMR.

Recently, the EDN co-leads engaged in several activities to recruit new and diverse parents to our stakeholder groups. We solicited local early intervention programs with historically underserved populations to find diverse parents.

Please see the Parent Members Engagement section for additional information.

The stakeholders were asked to provide input on the following topics which were presented as part of the meeting:

Data has been collected using the Quality Outcome Checklist. This data has been collected for the past 7 years and generally, all PRTs have continued to maintain high levels of quality. The stakeholders were asked if we should continue to collect this data. The stakeholders recommended that because of staff turnover in recent years, as well as individual PRTs being at different levels of implementation across the state, that the current data collection be continued.

Dr. Lisa Knoche presented on the status of her 5 year project, Coaching in Early Intervention, and asked for input about coaching needs at the local

level. Stakeholders expressed agreement with the activities being supported by the project to build coaching infrastructure at the local level. Additional comments included viewing the role of the local coach as a leadership opportunity within the PRT.

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

In October and November of 2022, we engaged in a hybrid and two additional virtual stakeholder meetings due to the COVID 19 pandemic as well as to accommodate families' schedules. In advance of these meetings, we engaged in several activities to ensure the parent voice was appropriately captured. The EDN co-leads participated in active parent recruitment with all local early intervention programs. We additionally targeted local programs with higher numbers of historically underserved populations to ensure a diverse parent stakeholder make up. Personal contacts and invitations were made with all new parent recruits including ICC parent members. We additionally offered parents stipends to assist with any lost wages and child care to ensure participation. The co-leads also engaged with PTI Nebraska and the University of Nebraska Monroe Meyer Institute, a disability advocacy center, to cohost and facilitate an orientation meeting with the stakeholder parents one week prior to the meeting to provide an overview of the SSIP and SPP-APR to ensure the parents had the appropriate context and information needed to actively participate. All stakeholders were provided copies of the meeting materials in advance of the meeting to give them time to review the data, evaluation progress, proposed targets, and improvement strategies. During the stakeholder meetings engagement strategies included participants' ability to share their input via audio or chat box. Additionally, input was solicited via open discussion.

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.

Not applicable

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

Not applicable

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

Provide additional information about this indicator (optional).

Based on the findings from the Kuhn-Higgins 2019 study on Quality Home Visit Practices in Nebraska, and the recommendation of the 2020 RDA stakeholder group, the research partners from the University of Nebraska-Omaha designed a mixed method study to better understand and provide guidance regarding (1) how the Getting Ready framework supports Nebraska Services Coordinators (SCs) in fulfilling their identified roles and responsibilities in Early Intervention (EI), (2) barriers to using the GR framework for home visits experienced by trained SCs, and (3) the frequency and purpose of Services Coordinator- EI Provider co-visits as part of service delivery.

The study investigators conducted a Qualtrics survey of 3 populations: services coordinators trained and approved in all 3 improvement strategies; their services coordinator supervisors, and early intervention providers trained and approved in all 3 improvement strategies. The results of the survey were used to inform qualitative questions used in focus groups, made up of the same populations as the survey. At the time of writing this report, only preliminary findings were available. Final findings will be presented in the next SSIP reporting period.

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Certification

Instructions

Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

Certify

I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role

Lead Agency Director

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.

Name:

Amy Rhone

Title:

Administrator/State Director

Email:

amy.rhone@nebraska.gov

Phone:

531-207-9978

Submitted on:

04/25/23 12:42:11 PM

Determination Enclosures

RDA Matrix

2023 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination¹

Percentage (%)	Determination
80.36%	Meets Requirements

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	8	6	75.00%
Compliance	14	12	85.71%

2023 Part C Results Matrix

I. Data Quality

(a) Data Completeness: The percent of children included in your State's 2021 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e., outcome data)	1,281
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	1,908
Percentage of Children Exiting who are Included in Outcome Data (%)	67.14
Data Completeness Score²	2

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

Data Anomalies Score³	2
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II. Child Performance

(a) Data Comparison: Comparing your State's 2021 Outcomes Data to other States' 2021 Outcomes Data

Data Comparison Score⁴	1
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(b) Performance Change Over Time: Comparing your State's FFY 2021 data to your State's FFY 2020 data

Performance Change Score⁵	1
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Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2021	59.28%	46.37%	60.00%	39.89%	53.66%	46.60%
FFY 2020	59.30%	51.34%	58.58%	41.60%	57.89%	51.24%

¹ For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part C."

² Please see Appendix A for a detailed description of this calculation.

³ Please see Appendix B for a detailed description of this calculation.

⁴ Please see Appendix C for a detailed description of this calculation.

⁵ Please see Appendix D for a detailed description of this calculation.

2023 Part C Compliance Matrix

Part C Compliance Indicator ⁶	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 1: Timely service provision	100.00%	N/A	2
Indicator 7: 45-day timeline	86.87%	YES	1
Indicator 8A: Timely transition plan	77.36%	YES	1
Indicator 8B: Transition notification	100.00%	N/A	2
Indicator 8C: Timely transition conference	90.57%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

⁶ The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf

Appendix A

I. (a) Data Completeness:

The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State's Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State's FFY 2021 IDEA Section 618 Exit Data.

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

Appendix B

I. (b) Data Quality:

Anomalies in Your State's FFY 2021 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e⁷⁸. In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State's data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

Outcome A	Positive Social Relationships
Outcome B	Knowledge and Skills
Outcome C	Actions to Meet Needs

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

⁷ Numbers shown as rounded for display purposes.

⁸ Values based on data for States with summary statement denominator greater than 199 exits.

Expected Range of Responses for Each Outcome and Category, FFY 2021

Outcome\Category	Mean	StDev	-1SD	+1SD
Outcome A\Category a	1.43	1.62	-0.19	3.05
Outcome B\Category a	1.26	2.27	-1.01	3.53
Outcome C\Category a	1.14	1.59	-0.45	2.73

Outcome\Category	Mean	StDev	-2SD	+2SD
Outcome A\ Category b	23.62	8.94	5.75	41.49
Outcome A\ Category c	20.32	12.69	-5.05	45.69
Outcome A\ Category d	27.33	9.46	8.42	46.24
Outcome A\ Category e	27.3	15.11	-2.92	57.52
Outcome B\ Category b	25.16	9.76	5.65	44.68
Outcome B\ Category c	28.73	12.11	4.5	52.95
Outcome B\ Category d	31.76	8.06	15.64	47.87
Outcome B\ Category e	13.09	8.56	-4.02	30.21
Outcome C\ Category b	20.27	8.49	3.29	37.26
Outcome C\ Category c	23.01	13.08	-3.16	49.17
Outcome C\ Category d	34.09	8.09	17.9	50.28
Outcome C\ Category e	21.49	15.06	-8.62	51.6

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

Anomalies in Your State's Outcomes Data FFY 2021

Number of Infants and Toddlers with IFSP's Assessed in your State	1,281
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	18	414	255	374	220
Performance (%)	1.41%	32.32%	19.91%	29.20%	17.17%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	9	445	316	365	146
Performance (%)	0.70%	34.74%	24.67%	28.49%	11.40%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	20	448	216	326	271
Performance (%)	1.56%	34.97%	16.86%	25.45%	21.16%
Scores	1	1	1	1	1

	Total Score
Outcome A	5
Outcome B	5
Outcome C	5
Outcomes A-C	15

Data Anomalies Score	2
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Appendix C

II. (a) Data Comparison:

Comparing Your State's 2021 Outcomes Data to Other States' 2021 Outcome Data

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement⁹. Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

Summary Statement 1: Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

Summary Statement 2: The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	43.42%	36.60%	54.62%	29.02%	55.14%	36.15%
90	82.74%	69.30%	79.34%	55.52%	85.72%	76.15%

Data Comparison Score	Total Points Received Across SS1 and SS2
0	0 through 4 points
1	5 through 8 points
2	9 through 12 points

Your State's Summary Statement Performance FFY 2021

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	59.28%	46.37%	60.00%	39.89%	53.66%	46.60%
Points	1	1	1	1	0	1

Total Points Across SS1 and SS2(*)	5
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Your State's Data Comparison Score	1
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⁹ Values based on data for States with summary statement denominator greater than 199 exiters.

Appendix D

II. (b) Performance Change Over Time:

Comparing your State's FFY 2021 data to your State's FFY 2020 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of $p \leq .05$. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of '0', '1', or '2' for each State is based on the total points awarded. Where OSEP has approved a State's reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of 'N/A' for this element.

Test of Proportional Difference Calculation Overview

The summary statement percentages from the previous year's reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of $p \leq .05$. The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

e.g., C3A FFY2021% - C3A FFY2020% = Difference in proportions

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on¹⁰

$$\text{Sqrt}[(\text{FFY2021\%} * (1-\text{FFY2021\%}) / \text{FFY2021N}) + ((\text{FFY2022\%} * (1-\text{FFY2022\%}) / \text{FFY2022N})] = \text{Standard Error of Difference in Proportions}$$

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

Difference in proportions / standard error of the difference in proportions = z score

Step 4: The statistical significance of the z score is located within a table and the p value is determined.

Step 5: The difference in proportions is coded as statistically significant if the p value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

Indicator 3 Overall Performance Change Score	Cut Points for Change Over Time in Summary Statements Total Score
0	Lowest score through 3
1	4 through 7
2	8 through highest

¹⁰Numbers shown as rounded for display purposes.

Summary Statement/ Child Outcome	FFY 2020 N	FFY 2020 Summary Statement (%)	FFY 2021 N	FFY 2021 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	823	59.30%	1,061	59.28%	-0.01	0.0228	-0.0051	0.996	NO	1
SS1/Outcome B: Knowledge and Skills	915	58.58%	1,135	60.00%	1.42	0.0218	0.6508	0.5152	NO	1
SS1/Outcome C: Actions to meet needs	767	57.89%	1,010	53.66%	-4.22	0.0237	-1.7788	0.0753	NO	1
SS2/Outcome A: Positive Social Relationships	1,048	51.34%	1,281	46.37%	-4.97	0.0208	-2.3878	0.017	YES	0
SS2/Outcome B: Knowledge and Skills	1,048	41.60%	1,281	39.89%	-1.71	0.0205	-0.8365	0.4029	NO	1
SS2/Outcome C: Actions to meet needs	1,048	51.24%	1,281	46.60%	-4.64	0.0208	-2.2289	0.0258	YES	0

Total Points Across SS1 and SS2	4
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Your State's Performance Change Score	1
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Data Rubric

FFY 2021 APR¹¹

Part C Timely and Accurate Data -- SPP/APR Data		
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	1	1
10	1	1
11	1	1
	Subtotal	13
APR Score Calculation	Timely Submission Points - If the FFY 2021 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) =	18

¹¹ 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.

Table	618 Data ¹²			Total
	Timely	Complete Data	Passed Edit Check	
Child Count/Settings Due Date: 4/6/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
			Subtotal	9
618 Score Calculation			Grand Total (Subtotal X 2) =	18.00

Indicator Calculation	
A. APR Grand Total	18
B. 618 Grand Total	18.00
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	36.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

***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.**

¹² In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 2 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

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

Part C 618 Data

1) Timely – A State will receive one point if it submits counts/ responses for an entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	1 st Wednesday in April
Part C Exiting	Part C Exiting Collection in EMAPS	1 st Wednesday in November
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	1 st Wednesday in November

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

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

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