



Minnesota Part C Federal Fiscal Year 2018 State Performance Plan/Annual Performance Report

Fiscal year 2020 Report to the Legislature

As required by Minnesota Statutes, section 125A.28

For more information:

Cat Tamminga, Part C Coordinator
Early Learning Services / Early Childhood Special Education
Minnesota Department of Education
1500 Highway 36 West
Roseville, MN 55113
(651) 582-8746
Cat.Tamminga@state.mn.us
education.mn.gov

As requested by Minnesota Statutes, section 3.197: This report cost approximately \$1800.00 to prepare, including staff time, printing and mailing expenses.

Upon request, this material will be made available in an alternative format such as large print, braille or audio recording. Printed on recycled paper.

Table of Contents

For more information:	2
Legislative Charge	8
Executive Summary	8
General Supervision System	8
Technical Assistance System:	10
Professional Development System:.....	11
Stakeholder Involvement:	12
Reporting to the Public:.....	13
Introduction - Prior FFY Required Actions	13
Introduction - OSEP Response.....	14
Introduction - Required Actions	14
Indicator 1: Timely Provision of Services.....	15
Historical Data	15
Targets	15
FFY 2018 SPP/APR Data	15
Correction of Findings of Noncompliance Identified in FFY 2017	17
Correction of Findings of Noncompliance Identified Prior to FFY 2017	17
Indicator 1 - Prior FFY Required Actions.....	17
Indicator 1 - OSEP Response.....	17
Indicator 1 - Required Actions	17
Indicator 2: Services in Natural Environments	18
Historical Data	18
Targets	18

Prepopulated Data	19
FFY 2018 SPP/APR Data	19
Indicator 2 - Prior FFY Required Actions.....	20
Indicator 2 - OSEP Response.....	20
Indicator 2 - Required Actions.....	20
Indicator 3: Early Childhood Outcomes.....	21
Indicator Data	21
Targets: Description of Stakeholder Input	21
Historical Data	22
Targets	23
FFY 2018 SPP/APR Data	23
Outcome A: Positive social-emotional skills (including social relationships)	24
Outcome B: Acquisition and use of knowledge and skills (including early language/communication).....	25
Outcome C: Use of appropriate behaviors to meet their needs.....	27
Indicator 3 - Prior FFY Required Actions.....	30
Indicator 3 - OSEP Response.....	30
Indicator 3 - Required Actions.....	30
Indicator 4: Family Involvement.....	31
Historical Data	31
Targets	32
FFY 2018 SPP/APR Data	33
Indicator 4 - Prior FFY Required Actions.....	35
Indicator 4 - OSEP Response.....	35
Indicator 4 - Required Actions.....	36
Indicator 5: Child Find (Birth to One)	37

Historical Data	37
Targets	37
Prepopulated Data	38
FFY 2018 SPP/APR Data	38
Indicator 5 - Prior FFY Required Actions.....	39
Indicator 5 - OSEP Response.....	39
Indicator 5 - Required Actions.....	39
Indicator 6: Child Find (Birth to Three).....	40
Historical Data	40
Prepopulated Data	41
FFY 2018 SPP/APR Data	41
Indicator 6 - Prior FFY Required Actions.....	41
Indicator 6 - OSEP Response.....	42
Indicator 6 - Required Actions.....	42
Indicator 7: 45-Day Timeline	43
Historical Data	43
Targets	43
FFY 2018 SPP/APR Data	44
Correction of Findings of Noncompliance Identified in FFY 2017	45
FFY 2017 Findings of Noncompliance Verified as Corrected.....	45
Correction of Findings of Noncompliance Identified Prior to FFY 2017.....	46
Indicator 7 - Prior FFY Required Actions.....	46
Indicator 7 - OSEP Response.....	46
Indicator 7 - Required Actions.....	47
Indicator 8A: Early Childhood Transition.....	48

Historical Data	48
Targets	48
FFY 2018 SPP/APR Data	49
Correction of Findings of Noncompliance Identified in FFY 2017	50
FFY 2017 Findings of Noncompliance Verified as Corrected.....	50
Correction of Findings of Noncompliance Identified Prior to FFY 2017	51
Indicator 8A - Prior FFY Required Actions	51
Indicator 8A - OSEP Response	51
Indicator 8A - Required Actions.....	51
Indicator 8B: Early Childhood Transition	52
Historical Data	52
Targets	52
FFY 2018 SPP/APR Data	53
Correction of Findings of Noncompliance Identified in FFY 2017	54
Correction of Findings of Noncompliance Identified Prior to FFY 2017	54
Indicator 8B - Prior FFY Required Actions	55
Indicator 8B - OSEP Response	55
Indicator 8B - Required Actions.....	55
Indicator 8C: Early Childhood Transition	56
Historical Data	56
Targets	56
FFY 2018 SPP/APR Data	57
Correction of Findings of Noncompliance Identified in FFY 2017	58
FFY 2017 Findings of Noncompliance Verified as Corrected.....	59
Correction of Findings of Noncompliance Identified Prior to FFY 2017	59

Indicator 8C - Prior FFY Required Actions	60
Indicator 8C - OSEP Response	60
Indicator 8C - Required Actions.....	60
Indicator 9: Resolution Sessions.....	61
Indicator Data	61
Prepopulated Data	61
Historical Data	62
Targets	62
FFY 2018 SPP/APR Data	63
Indicator 9 - Prior FFY Required Actions.....	63
Indicator 9 - OSEP Response.....	63
Indicator 9 - Required Actions.....	63
Indicator 10: Mediation.....	64
Indicator Data	64
Prepopulated Data	64
Historical Data	65
Targets	65
FFY 2018 SPP/APR Data	66
Indicator 10 - Prior FFY Required Actions.....	66
Indicator 10 - OSEP Response.....	66
Indicator 10 - Required Actions.....	66

Legislative Charge

Minnesota Statutes, section 125A.28:

Annually, the council must prepare and submit a report to the Governor and the Secretary of the federal Department of Education on the status of early intervention services and programs for infants and toddlers with disabilities and their families under the Individuals with Disabilities Education Act, United States Code, title 20, sections 1471 to 1485 (Part C, Public Law 102-119), as operated in Minnesota. The Minnesota Part C annual performance report may serve as the report.

Executive Summary

Overall, the FFY 2018 Annual Performance Report documents the ongoing strength of Minnesota's system of early intervention provided under Part C of the Individuals with Disabilities Education Act. The state's performance on two of five compliance measures was 100 percent. While not yet at 100 percent, the state maintained a high level of performance on meeting the 45-day timeline for Part C initial evaluations. The state's performance on two of three components of Indicator 8, Transition from Part C to Part B, increased and the third was already at full compliance. Overall, child find of infants and toddlers birth through age 2 continues to be an area of strength, and the state improved performance to 2.94 percent. The state will closely monitor the impact of efforts to effectively identify infants birth to age 1 as performance fell slightly for the second straight year. Serving children in the natural environments is also a strength of the system as the state consistently serves more than 95 percent in these setting. The state is exceptionally pleased to have met targets and improved performance on all three family outcome measures. Ongoing focus will be given to making meaningful gains across all child outcome measures.

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.

The Minnesota Department of Education (MDE) Division of Compliance and Assistance administers a comprehensive system of general supervision including special education program and fiscal compliance monitoring, and dispute resolution options for parents, and districts and other stakeholders in the special education and early intervention systems.

Each special education administrative unit (SEAU) is monitored for compliance through MDE's Continuous Improvement Monitoring Process (MNCIMP) web-based application which gathers data from early intervention records reviewed on a six-year cycle. In year one, the SEAU conducts a self-review of records. Selection of records to be reviewed is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary disability. During the record review process, the most current Individual Family Service Plan (IFSP) and corresponding due process documentation are reviewed for compliance with legal standards. In year

two, the SEAU must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements of Office of Special Education Programs (OSEP) Memo 09-02.

In year three, MDE conducts an on-site review of the SEAU including a review of early intervention records (following the same process for record selection as used in year one). Stakeholder input is gathered from early intervention service providers, parents, and administrators. Data gathered from the various stakeholders helps to determine compliance within the district as well as identify areas of needed technical assistance. In year four, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year is used to verify results of the implemented corrective action plan. In any given year, data is collected through the self-review of records for 20 percent of the state's local programs. In year six, an SEAU that has met all requirements has no formal monitoring obligations.

MDE's fiscal monitors work to ensure that Part C funds are appropriately administered and used by the SEAU to serve eligible children. Fiscal and program monitoring teams follow the same five-year schedule with the exception that there is no self-review process in fiscal monitoring. A risk assessment is completed annually to determine if an SEAU will receive an onsite or desk review. Once the SEAUs have been stratified into their appropriate risk category, the fiscal monitors utilize the Electronic Data Reporting System (EDRS) and the Minnesota Automated Reporting Student System (MARSS) to pick samples related to time and effort, procurement, and transportation. Additionally, information is requested from the SEAUs for inventory management. Each of the three levels of review request additional samples, more documentation, and monitor additional details of the data as the SEAU progresses higher in risk. Corrective action by the local program, as needed, takes place in the year following a fiscal monitoring. Corrective action may include documenting processes, changing documents so they contain appropriate data, or making corrections within the EDRS or MARSS systems so data entered is accurate. MDE also reserves the right to reclaim funds should it be deemed funds were used for ineligible purposes.

Finally, the fiscal monitoring team receives fiscally based complaints and conducts investigations as necessary. When complaints are received, the investigation is led by the fiscal supervisor and assisted by a fiscal monitor. A complaint can be filed about any entity that provides publicly funded intervention services directly to eligible children and families. Before filing a complaint, MDE encourages the complainant to first contact the district's special education director to attempt to resolve the issue. Once a fiscal investigation is opened, the entity is asked to provide documentation based on the nature of the complaint. Interviews with staff may be conducted. An on-site visit may occur. If the local educational agency is found to be in violation and corrective action is necessary, a corrective action plan is developed and the responsible educational agencies complete the corrective action within the specified timeframe. Through follow-up, MDE ensures that corrective action plans are implemented and correction occurs within one year.

As noted, MDE administers a comprehensive dispute resolution system. Minnesota Special Education Mediation Service (MNSEMS) provides conflict resolution assistance for students, schools, parents and agencies. Mediation or facilitated Individualized Family Service Plan (IFSP) meeting(s) may address issues of conflict. In 2014, MDE's

Special Education ADR Services engaged internal and external stakeholder in a continuous improvement process to examine procedures and improve ADR's efficiency and effectiveness. Changes included submission of requests online, faster scheduling, automated emails, and the development of a vision of success for parents, older students, and educators.

Parents and districts resolve disputes over identification, evaluation, education placement, or provision of a free appropriate public education to an infant, toddler or student with a disability using an impartial due process hearing system. Parents and districts may use mediation, conciliation or some other mutually agreed-upon alternative before proceeding to a hearing. Information is available on the MDE website including a Hearing Request form, information on low-cost legal resources, and Minnesota's procedural safeguards notice. While most due process hearing requests are settled without a hearing, MDE continues to work with the Office of Administrative Hearings, to educate parents and districts on their rights and responsibilities regarding due process hearing resolution sessions. Through these efforts, district participation in documenting the occurrence of the resolution sessions has increased by 100 percent. In addition, MDE is obtaining more accurate data regarding when the sessions are held and the results of the resolution sessions.

The complaint system is designed to ensure that all children with disabilities, including infants and toddlers, are provided a free appropriate public education. Before a complaint is filed, MDE encourages parents or other persons to first contact the school district's special education director, who may be able to help resolve the issue. Sample complaint forms for use by parents, other entities or private school stakeholders are available on the MDE website.

When MDE receives a complaint, an investigator is assigned who reviews the written complaint to determine the issues to be investigated. The individual or entity that filed the complaint is contacted and the issues, claims and facts are discussed. MDE has 60 calendar days to fully investigate and resolve the complaint from the date the complaint is received in writing. If the LEA is found to be in violation and a corrective action is deemed necessary, a corrective action plan is developed and the responsible education agencies must complete the corrective action within the specified timeframe. Through active follow-up, MDE ensures that corrective action plans are appropriately implemented and individual correction occurs within one year.

Compliance and Assistance staff collaborates with other departmental divisions regarding the provision of early intervention and special education services.

Technical Assistance System:

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

The Early Childhood Special Education Team at the Minnesota Department of Education believes their role is to support local programs to "do it right and do it well" so that infants, toddlers and young children with disabilities and their families experience positive outcomes. "Doing it right" refers to those aspects of the work where there is a generally agreed-upon right way and wrong way. "Doing it well" refers to efforts to achieve high levels of

quality including the use of evidence-based practices. Our technical assistance (TA) efforts are those efforts to help programs do it right.

MDE uses a variety of mechanisms to provide technical assistance to leaders and providers within early childhood special education programs, which are responsible to deliver early intervention services. Our website is a constant source of information for families, administrators, and direct service providers. MDE hosts two face-to-face opportunities annually to provide TA to local program leaders. Each fall, a three-day leadership conference is held in partnership with the Minnesota Division for Early Childhood of the Council for Exceptional Children. A one-day leadership forum is held each spring. Leaders from greater Minnesota have the option to participate in the forum virtually. A monthly call is held for program leaders focused almost exclusively on TA. The call takes place the first Wednesday of each month at 1 p.m. which coincides with our state's civil defense drills. Our local leaders know "if the siren is blowing" they should be on the call. Members of the ECSE team provide individualized TA over the phone or on-site as needed or requested by a local program. MDE has established an [Early Childhood Special Education team email box](#) to make it easier for local programs to consistently receive a timely, high quality answer to their technical questions. A designated ECSE specialist triages all messages to this mailbox, forwarding each message to the team member with the deepest knowledge in the needed subject.

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.

Strengthening our professional development system has been a team priority for the past seven years. During that time, we have benefited considerably from participation in several important federal initiatives.

1. National Professional Development Center on Inclusion (NPDCI): Minnesota was one of four states selected to work with experts from the University of North Carolina at Chapel Hill. This opportunity helped us establish a cross-sector state leadership team, create regional cross-sector professional development councils and launch regionalized professional development focused on selected evidence-based practices.
2. Technical Assistance Center on Social Emotional Intervention (TACSEI): Minnesota was one of four states selected to be supported to implement the practices of the pyramid model. We started with three demonstration sites and are now implementing in 53 local programs.
3. State Implementation and Scaling-up of Evidence-based Practices (SISEP): Minnesota was one of six states selected to participate in the initial cohort. Karen Blase has provided the ECSE team with considerable guidance and support in refining and refocusing our professional development system. The frameworks of active implementation are foundational to our enhanced professional development system.
4. Early Childhood Technical Assistance Center: Minnesota was the first state selected to receive targeted technical assistance to implement the revised Recommended Practices developed by the Division of Early Childhood of the Council for Exceptional Children. Commonly referred to as DEC's Recommended

Practices, this work is focused on those practices that support child and family engagement in intervention.

5. Early Childhood Personnel Center (ECPC): Minnesota's Part C and 619 Coordinators have been supported by ECPC related to their personal professional development. Minnesota is now receiving intensive technical support from ECPC to engage stakeholders in the development of our Comprehensive System of Personnel Development.
6. DaSY: Minnesota's ECSE team has participated in two cohorts sponsored by DaSY. The first is the Powerful 619 Data cohort, which because of our state's 0-5 system, has equally benefitted Part C. We have also participated in TA to better support local programs to use data.

Our professional development system is referred to as the Centers of Excellence for Young Children with Disabilities (CoE). The stated vision of the CoE is that early childhood professionals will have the knowledge, skills and supports necessary to be effective in their respective roles in order to increase the probability that young children with disabilities and their families achieve positive outcomes. The CoE includes these structural components:

1. Professional Development Facilitators located within each region of the state. The 10.0 FTE of individuals in this role actively partner with local program leaders to identify opportunities to improve quality and serve as the external coach to those programs implementing one of the three evidence-based usable interventions formally promoted through the CoE.
2. State Leadership Team of cross-sector state agency personnel, higher education faculty, parents, and other stakeholders in the system.
3. Consistent use of the frameworks of active implementation.
4. Three usable interventions that are evidence-informed. These include the Pyramid Model (TACSEI), Family-guided Routines-based Intervention (FGRBI), and the Classroom Engagement Model.

During FFY18 we continued to target discretionary federal funds to support local programs committing to the implementation of one of three usable interventions. The funds are available to selected programs over a five-year period to eliminate identified barriers to scaling and sustaining use of these practices. We also focused, as described in our Phase III SSIP, on developing a more integrated data system that incorporates coaching and fidelity data from the CoE with child outcome data.

Stakeholder Involvement:

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

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota's Interagency Coordinating Council (ICC) and state agency staff from the Minnesota Departments of Health, Human Services and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered the state's efforts to meet or exceed each target. The group also identified factors that

might similarly help or hinder the state's efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

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

YES

Reporting to the Public:

How and where the State reported to the public on the FFY 2017 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2017 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2017 APR in 2019, is available.

MDE makes an annual determination on the performance of each Special Education Administrative Unit (SEAU) against specific criteria. MDE reviews all SEAU performance against selected targets in the Annual Performance Report (APR) and determines whether each SEAU meets the requirements of Part C of the Individuals with Disabilities Education Act (IDEA).

MDE publicly reports the performance of each SEAU by member district in its Data Center website under the Special Education District Profiles section. Performance on Part C indicators 1-8 is displayed on a data sheet that includes the program performance, the state rate, and the state target. These district data profiles can be found at the [Data Reports and Analytics webpage](https://public.education.mn.gov/MDEAnalytics/Data.jsp). (<https://public.education.mn.gov/MDEAnalytics/Data.jsp>)

A complete copy of Minnesota's SPP and current APR are located on MDE's website on the [landing page for the Governor's Interagency Coordinating Council](https://education.mn.gov/MDE/about/adv/active/ICC/). (<https://education.mn.gov/MDE/about/adv/active/ICC/>).

Introduction – Prior FFY Required Actions

None

Introduction – OSEP Response

States were instructed to submit Phase III, Year Four of the State Systemic Improvement Plan (SSIP), indicator C-11, by April 1, 2020. The State provided the required information for Phase III, Year Four. The State did not, as required by the measurement table, provide a target for FFY 2019 for Indicator C-11.

Introduction – Required Actions

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

Indicator 1: Timely Provision of Services

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)

Historical Data

Baseline	2005	91.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
217	217	100.00%	100%	100.00%	Met Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

0

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).

At the September 2005 meeting of the State Interagency Coordinating Council, the council defined "timely" for the purpose of this State Performance Plan to mean that IFSP services begin not more than 30 calendar days following the initial IFSP team meeting. Within these 30 days, the parent provides informed written consent for the provision of services and services are formally initiated.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All programs participate in both a self-review and a review conducted by the Minnesota Department of Education within a six year monitoring cycle.

If needed, provide additional information about this indicator here.

Data for this indicator has been collected through MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based system. Compliance monitoring of Early Intervention (EI) programs occurs through the monitoring of the Local Education Agencies (LEAs) through special education administrative units (SEAs) which is scheduled on a six-year monitoring cycle. In year one of the cycle, the SEA conducts a self-review of records. In year two, the SEA must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements of OSEP Memo 09-02. In year three, MDE conducts an on-site review of the SEA including a review of student records, facilities, and the SEA's Total Special Education System (TSES). In year four of the cycle, the SEA must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. The sixth year of the cycle provides an additional year for SEAs to implement corrective action and changes to their systems prior to the start of the new monitoring cycle and self-review of records.

As part of the record review, a computer-generated sample is used to determine the early intervention records to be reviewed. Records are selected from the most recent SEA enrollment data and are chosen in order to be accurately representative of the SEA as a whole. Selection is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary disability of the child. During the record review, the most current Individual Family Service Plan (IFSP) and corresponding due process documentation are monitored to determine that legal standards are met.

Data for this indicator are gathered from examining records of children receiving Part C services and determining whether the services were provided in a timely manner. The FFY 2018 data are based on MDE reviews and SEAU self-review of 37 SEAU, comprised of 52 individual districts.

Correction of Findings of Noncompliance Identified in FFY 2017

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

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Indicator 1 - Prior FFY Required Actions

None

Indicator 1 - OSEP Response

Not applicable

Indicator 1 - Required Actions

Not Applicable

Indicator 2: Services in Natural Environments

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)

Historical Data

Baseline	2005	90.30%			
FFY	2013	2014	2015	2016	2017
Target>=	95.00%	95.00%	95.00%	95.00%	95.00%
Data	96.61%	97.27%	96.92%	97.70%	97.84%

Targets

FFY	2018	2019
Target>=	95.00%	95.00%

Targets: Description of Stakeholder Input

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota’s Interagency Coordinating Council (ICC) and state agency staff from the Minnesota Departments of Health and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered the state’s efforts to meet or exceed each target. The group also identified factors that might similarly help or hinder the state’s efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

Discussion specific to this indicator focused on the desire to maintain a robust target at 95 percent throughout the years covered by the SPP while acknowledging the need for flexibility among members of Individual Family Service Plan teams to identify times when it is justifiable to provide early intervention services in an environment that is not a natural environment.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	6,059
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Total number of infants and toddlers with IFSPs	6,179

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
6,059	6,179	97.84%	95.00%	98.06%	Met Target	No Slippage

Provide additional information about this indicator (optional)

Indicator 2 – Prior FFY Required Actions

None

Indicator 2 – OSEP Response

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

Indicator 2 – Required Actions

Not applicable

Indicator 3: Early Childhood Outcomes

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)

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

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota's Interagency Coordinating Council (ICC) and state agency staff from the Minnesota Departments of Health and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered the state's efforts to meet or exceed each target. The group also identified factors that might similarly help or hinder the state's efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A1	2018	Target>=	54.13%	54.20%	54.30%	54.40%	54.50%
A1	50.35%	Data	54.13%	51.17%	50.87%	49.15%	50.85%
A2	2018	Target>=	49.82%	50.00%	51.00%	52.00%	53.00%
A2	48.37%	Data	49.82%	47.51%	48.84%	50.18%	48.23%
B1	2018	Target>=	60.20%	60.30%	60.40%	60.50%	60.60%
B1	55.80%	Data	60.20%	57.16%	57.32%	58.78%	55.83%
B2	2018	Target>=	44.11%	44.50%	45.00%	45.50%	46.50%
B2	41.67%	Data	44.11%	41.67%	43.28%	44.41%	41.95%
C1	2018	Target>=	61.91%	62.00%	62.10%	62.20%	62.30%
C1	57.74%	Data	61.91%	59.60%	58.28%	58.02%	59.36%
C2	2018	Target>=	51.26%	51.50%	52.00%	53.00%	54.00%
C2	49.99%	Data	51.26%	49.83%	50.14%	50.83%	49.62%

Targets

FFY	2018	2019
Target A1>=	54.60%	50.50%
Target A2>=	54.00%	48.50%
Target B1>=	60.70%	55.90%
Target B2>=	47.50%	41.80%
Target C1>=	62.40%	57.80%
Target C2>=	55.00%	50.10%

FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

3,705

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

	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	10	0.27%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,321	35.65%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	582	15.71%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	768	20.73%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,024	27.64%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,350	2,681	50.85%	54.60%	50.35%	Did Not Meet Target	No Slippage

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	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	1,792	3,705	48.23%	54.00%	48.37%	Did Not Meet Target	No Slippage

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

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	15	0.40%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,344	36.28%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	802	21.65%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	914	24.67%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	630	17.00%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,716	3,075	55.83%	60.70%	55.80%	Did Not Meet Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	1,544	3,705	41.95%	47.50%	41.67%	Did Not Meet Target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	15	0.40%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,214	32.77%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	624	16.84%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,055	28.48%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	797	21.51%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,679	2,908	59.36%	62.40%	57.74%	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	1,852	3,705	49.62%	55.00%	49.99%	Did Not Meet Target	No Slippage

Provide reasons for C1 slippage, if applicable

Minnesota is making a transition to reporting of item-level data as an option to the use of the child outcome summary form. This means that developmental data collected at entry or exit from Part C using one of four approved tools can be reported to MDE using a specially formatted spreadsheet. From the item-level data, MDE auto-calculates a rating on the COS 1-7 scale and aligns the data to Minnesota early learning standards, the early childhood indicators of progress. While a limited number of teams utilized this reporting option for FFY 18 we believe that data reported through this less-subjective methodology may have had a damping effect on the state's measured level of performance.

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

The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s part C exiting 618 data	5,631
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.	1,690

	Yes / No
Was sampling used?	NO

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

YES

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

Minnesota's process allows local programs to use a variety of sources to inform the ratings on each Child Outcome Summary form. Teams may use information from norm-referenced tools administered as part of a child's initial evaluation. They may also use parent report and professional observation to complete an age-anchored criterion-referenced assessment tool. Minnesota's process requires careful use of the crosswalk documents developed by the Early Childhood Outcome Center. Minnesota requires ratings be made within a month of the actual date of entry or exit. For children exiting Part C and transitioning into early childhood special education services under Part B, the Part C exit rating automatically becomes the Part B entrance rating. In the event that two different local teams serve the child under each part, the teams must reach consensus on an accurate C exit/B entrance rating.

FFY 2018 was the first year that programs were provided an alternative to the Child Outcome Summary form and process. Developmental data collected at entry or exit from Part C using one of four approved tools can be reported to MDE using a specially formatted spreadsheet. From the item-level data, MDE auto-calculates a rating on the COS 1-7 scale and aligns the data to Minnesota early learning standards, the early childhood indicators of progress. The approved tools include the COR Advantage, Desired Results Developmental Profile, Teaching Strategies Gold and the Work Sampling System (approved for use at exit only). While only a few children had data reported using this methodology for FFY 18, the state anticipates much greater use of this

option for FFY 19 and beyond. These same tools and process have been adopted for use in preschool special education programs and across the state's school-based early learning programs.

Provide additional information about this indicator (optional)

MDE proposes to reset each of the six baselines within this indicator to match the level of performance in FFY 18 to support FFY 19 established targets at a level 0.10 percent higher. It is important to the state and to our local programs that targets be attainable. Original targets were set with a level of optimism that quickly became unreasonable and unreachable. The revised targets are attainable by many programs. MDE also believe that the addition of the item-level methodology as a reporting option will remove any remaining subjectivity within our outcome data and lower the state's reported level of performance.

Indicator 3 – Prior FFY Required Actions

None

Indicator 3 – OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

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

Indicator 3 – Required Actions

Not applicable

Indicator 4: Family Involvement

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)

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A	2013	Target>=	89.00%	90.00%	90.30%	90.60%	91.00%
A	89.22%	Data	89.22%	87.40%	88.98%	89.91%	89.24%
B	2013	Target>=	93.00%	93.20%	93.40%	93.60%	93.80%
B	92.58%	Data	92.58%	90.96%	91.31%	92.72%	91.96%
C	2013	Target>=	90.00%	90.30%	90.60%	90.90%	91.20%
C	89.80%	Data	89.80%	87.88%	89.56%	89.91%	89.51%

Targets

FFY	2018	2019
Target A>=	91.50%	92.00%
Target B>=	94.00%	94.20%
Target C>=	91.50%	91.80%

Targets: Description of Stakeholder Input

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota's Interagency Coordinating Council (ICC) and state agency staff from the Minnesota Departments of Health and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered the state's efforts to meet or exceed each target. The group also identified factors that might similarly help or hinder the state's efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

Discussion specific to this indicator focused on efforts to help parents better understand their rights and shared belief in the importance of helping parents to help their children develop and learn.

Local program leaders have shared strategies with colleagues during statewide meetings on successful ways to increase response rates and enhance the representativeness of our statewide data.

FFY 2018 SPP/APR Data

The number of families to whom surveys were distributed	3,938
Number of respondent families participating in Part C	795
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	736
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	795
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	758
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	795
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	749
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	795

	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	89.24%	91.50%	92.58%	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)	91.96%	94.00%	95.35%	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)	89.51%	91.50%	94.21%	Met Target	No Slippage

	Yes / No
Was sampling used?	NO

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

Because the state does not use sampling, our potential respondent group represents the families of all children existing Part C and so is, by default, representative of children served. The state used the Family Outcomes Representativeness Calculator made available on the Early Childhood Technical Assistance (ECTA) Center website to analyze the representativeness of data from those families who actually responded for each of the following attributes: race, ethnicity, disability category of child, home language of respondent family, and poverty level. The results of the analysis were somewhat discouraging. It is clear that our respondents do not proportionately represent all families by race and ethnicity. Because we do not use a sampling methodology our improvement strategies cannot be as clear cut as simple oversampling of specific groups. And our survey is already available in 13 languages. We will engage all local program leaders in the solution beginning with our monthly leadership call. Our hypothesis is that we may have a distribution problem and that the survey may not be distributed to all families. Our local statement of assurances includes an assurance that the district will participate appropriately in this data collection activity as designed by the state. MDE is working to implement an online survey which will provide heightened accountability around the degree to which the survey is distributed to the families of each and every existing infant or toddler. Leaders of local programs with return rates of 50% or more will be asked to share their distribution strategies with their colleagues.

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

The ECTA representativeness calculated indicated that the representation of families who are Native Hawaiian/Pacific Islander, Asian and Multi-racial among respondent families adequately matched the proportion of participation of these groups in Part C during the 2018-2019 program year. No other racial or ethnic subgroup was representative. Respondents were representative by home language and economic subgroups and the disability categories of speech/language and deaf/hard of hearing.

Provide additional information about this indicator (optional)

Minnesota has begun planning necessary to develop an online version of the family outcome survey to increase efficiency at the local and state levels and hopefully increase our overall response rate.

Indicator 4 – Prior FFY Required Actions

None

Indicator 4 – OSEP Response

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

Indicator 4 – Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline	2005	0.46%			
FFY	2013	2014	2015	2016	2017
Target >=	0.98%	1.00%	1.05%	1.10%	1.15%
Data	0.97%	1.06%	0.95%	1.03%	1.05%

Targets

FFY	2018	2019
Target >=	1.20%	1.21%

Targets: Description of Stakeholder Input

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota’s Interagency Coordinating Council (ICC) and state agency staff from the Minnesota Departments of Health and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered the state’s efforts to meet or exceed each target. The group also identified factors that might similarly help or hinder the state’s efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

Discussion specific to this indicator focused on the continued impact of Minnesota's heightened efforts to inform all primary referral sources through the Help Me Grow public awareness campaign, changes made to a state data system which mandates referrals from child protective services and enhanced convenience for primary referral sources of the automated referral conduit, implemented during June of 2014. We also discussed the limitations on eligibility imposed by our criteria. Specifically, at what point will we have reached our maximum eligibility rate? Since the launch of this system, the number of referrals have continued to increase annually.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 1 with IFSPs	641
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 1	68,566

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
641	68,566	1.05%	1.20%	0.93%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

The state has put significant effort into understanding this slippage. Year to year change was examined for each age group birth through 6 for each of Minnesota local early childhood special education programs. The slippage seemed to be equally distributed across the state. No one program appeared responsible for the dip but rather a large number of programs had one or two fewer children on their rosters for December 1, 2018. In looking at our child find effectiveness from an historical perspective, it is possible to identify performance dips in 2011,

2013 and 2015 and yet our overall performance trend line shows continuous improvement. The state will closely monitor performance on this indicator and take action as necessary.

Compare your results to the national data

Minnesota identified and served 0.93 percent of infants under age 1 on December 1, 2018, compared to the national rate of 1.25 percent. Minnesota's eligibility criteria has been determined by the Infant Toddler Coordinator Association (ITCA) to be fall into Category B which is moderately broad. Minnesota is the lowest of the five states that provide a free appropriate public education beginning at birth and ninth among the eleven states that have designated the State Educational Agency as the lead agency for Part C.

Provide additional information about this indicator (optional)

Indicator 5 – Prior FFY Required Actions

None

Indicator 5 – OSEP Response

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

Indicator 5 – Required Actions

Not applicable

Indicator 6: Child Find (Birth to Three)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 3 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline	2005	1.56%			
FFY	2013	2014	2015	2016	2017
Target >=	2.50%	2.53%	2.60%	2.68%	2.75%
Data	2.49%	2.61%	2.62%	2.71%	2.84%

Targets

FFY	2018	2019
Target >=	2.82%	3.00%

Targets: Description of Stakeholder Input

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota’s Interagency Coordinating Council (ICC) and state agency staff from the Minnesota Departments of Health and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered the state’s efforts to meet or exceed each target. The group also identified factors that might similarly help or hinder the state’s efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

Discussion specific to this indicator focused on the continued impact of Minnesota's heightened efforts to inform all primary referral sources through the Help Me Grow public awareness campaign, changes made to a state data system which mandates referrals from child protective services and enhanced convenience for primary referral sources of the automated referral conduit, implemented during June of 2014.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 3 with IFSPs	6,179
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 3	210,197

FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
6,179	210,197	2.84%	2.82%	2.94%	Met Target	No Slippage

Compare your results to the national data

Minnesota identified and served 2.94 percent of infants and toddlers birth to age 3 on December 1, 2018, compared to the national rate of 3.48 percent. Minnesota's eligibility criteria has been determined by the Infant Toddler Coordinator Association (ITCA) to be fall into Category B which is moderately broad. Minnesota is third highest among the five states that provide a free appropriate public education beginning at birth and eight among the eleven states that have designated the State Education Agency as the lead agency for Part C.

Provide additional information about this indicator (optional)

Indicator 6 – Prior FFY Required Actions

None

Indicator 6 – OSEP Response

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

Indicator 6 – Required Actions

Not applicable

Indicator 7: 45-Day Timeline

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)

Historical Data

Baseline	2005	83.40%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	97.85%	98.64%	97.70%	95.83%	96.28%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
155	185	96.28%	100%	96.22%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

23

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All programs participate in both a self-review and a review conducted by the Minnesota Department of Education within a six-year monitoring cycle.

Provide additional information about this indicator (optional)

Data for this indicator has been collected through MDE’s Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based system. Compliance monitoring of Early Intervention (EI) programs occurs through the monitoring of special education administrative units (SEAU) on a six-year cycle. In year one of the cycle, the SEAU conducts a self-review of records. In year two, the SEAU must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements of OSEP Memo 09-02. In year three, MDE conducts an on-site review of the SEAU including a review of early intervention records, facilities, and the SEAU’s Total Special Education System (TSES). In year four of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. The sixth year of the cycle provides an additional year for SEAU to implement corrective action and changes to their systems prior to the start of the new monitoring cycle and

self-review of records.

A computer-generated sample is used to determine the early intervention records to be reviewed. Records are selected from the most recent SEAU enrollment data and are chosen in order to be accurately representative of the SEAU as a whole. Selection is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary disability of the child. During the record review, the most current Individual Family Service Plan (IFSP) and corresponding due process documentation are monitored to determine that legal standards are met.

Data for this indicator are gathered from examining records of children receiving Part C services and determining whether the services were provided in a timely manner. The FFY 2018 data are based on MDE reviews and SEAU self-review of 37 SAUs, comprised of 50 individual districts.

All of the occurrences of individual student record noncompliance reported in this indicator were found to be out of compliance due to LEA issues. Some of the identified LEA issues included staffing shortages, staff absences or staff error.

Correction of Findings of Noncompliance Identified in FFY 2017

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

FFY 2017 Findings of Noncompliance Verified as Corrected

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

SAUs with identified noncompliance are required to correct all individual student noncompliance, including possible Corrective Action Plans (CAPs) and a subsequent review of student records, in order to demonstrate the SEAU is now correctly implementing 34 CFR § 303.310. As part of the CAP, the SEAU must track timelines for a minimum of three months to verify the SEAU is in 100 percent compliance with the timeline. The SAUs submit Letters of Assurance along with information on the child records that were reviewed, assuring that the SEAU is now in compliance. Each individual case of noncompliance was corrected, as described below. No CAPs were ordered to address the noncompliance in FFY 2017. MDE believes that aside from isolated incidents of noncompliance, the SAUs are correctly implementing 34 CFR § 303.310.

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

All record review data from FFY 2017 was collected through MDE’s MNCIMP web-based data system. Any identified noncompliance is tracked through the same web-based data system. For post-referral timelines, when record reviews are completed and data entered into the MNCIMP system, data is requested detailing the date of the referral, the date the evaluation and assessments were completed, and the date of the IFSP meeting. This allows MDE to verify that the evaluations and assessments and IFSP meetings have been completed, although they may have been late. If the date the evaluations and assessments were completed or the date of the IFSP meeting is missing, MDE requires the SEAU to submit the completed IFSP to demonstrate the evaluation and assessments and IFSP meeting has been completed, although late. If the child is no longer within the jurisdiction of the SEAU, the SEAU must submit to MDE the reason (moved, for example) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, MDE verified all of the evaluations and assessments and IFSP meetings had been completed and that each SEAU with noncompliance reflected in the data the State reported for this indicator had completed the evaluations and assessments and IFSP meetings, although late, for any child whose initial evaluation and assessment and IFSP meeting was not timely unless the child is no longer within the jurisdiction of the SEAU, consistent with OSEP Memo 09-02. All correction of individual child record noncompliance was completed within the one-year time frame.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Indicator 7 – Prior FFY Required Actions

None

Indicator 7 – OSEP Response

Because the State reported less than 100 percent compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or

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

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

Indicator 7 – Required Actions

Not applicable

Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline	2005	80.40%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	99.19%	99.08%	100.00%	100.00%	92.55%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
49	50	92.55%	100%	98.00%	Did Not Meet Target	No Slippage

Number of documented delays attributable to exceptional family circumstances

0

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

State monitoring

Describe the method used to select EIS programs for monitoring.

The method used to select EIS programs for monitoring: Data for this indicator has been collected through MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system. MNCIMP is used in part for gathering data from record reviews completed as part of compliance monitoring. Compliance monitoring of Early Intervention (EI) programs occurs through the monitoring of the LEAs through SEAU's which is scheduled on a six-year monitoring cycle. In year one of the cycle, the SEAU conducts a self-review of records. In year two, the SEAU must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements of OSEP Memo 09-02. In year three, MDE conducts an on-site review of the SEAU including a review of EI records, facilities, and the SEAU's Total Special Education System (TSES). In year four of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. The sixth year of the cycle provides an opportunity for SEAU's to implement corrective action and changes to their systems prior to the start of the new monitoring cycle and self-review of records. As part of the record review, a computer-generated sample is used to determine the student records to be reviewed. Records are selected from the most recent

SEAU enrollment data and are chosen in order to be accurately representative of the SEAU as a whole. Selection is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary disability of the student. During the record review, the most current Individual Family Service Plan (IFSP) and corresponding due process documentation are monitored to determine that legal standards are met.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

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

FFY 2017 Findings of Noncompliance Verified as Corrected

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

SEAU with identified noncompliance are required to correct all individual student noncompliance, including possible Corrective Action Plans (CAPs) with a subsequent review of student records, in order to demonstrate the SEAU is now correctly implementing 34 CFR § 303.344. The SEAU submit Letters of Assurance along with information on the student records that were reviewed, assuring that the SEAU is now in compliance. Each individual case of noncompliance was corrected, as described below. One CAP was ordered to address the noncompliance in FFY 2018. MDE believes that aside from isolated incidents of noncompliance, the SEAU are correctly implementing 34 CFR § 303.344.

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

All record review data from FFY 2018 was collected through MDE’s MNCIMP web-based data system. Once noncompliance is identified, it is tracked through the same web-based data system which includes a compliance tracking system. For correction of noncompliance, the SEAU must submit documentation to MDE as demonstration of correction. Re-submission is required until the SEAU can demonstrate correction. If the student is no longer within the jurisdiction of the SEAU, the SEAU must submit to MDE the reason (moved, for example) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, all findings of noncompliance identified in FFY 2017 were corrected in FFY 2018. MDE has since verified that all records with identified noncompliance in FFY 2017 were corrected and the SEAU are now in compliance or the student is no longer within the jurisdiction of the SEAU,

consistent with OSEP Memo 09-02. All correction of individual student record noncompliance was completed within the one-year time frame.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Indicator 8A – Prior FFY Required Actions

None

Indicator 8A – OSEP Response

Because the State reported less than 100 percent compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100 percent compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2018, although its FFY 2018 data reflect less than 100 percent compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

Indicator 8A – Required Actions

Not applicable

Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline	2005	100.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
33	33	100.00%	100%	100.00%	Met Target	No Slippage

Number of parents who opted out

0

Describe the method used to collect these data

The method used to select EIS programs for monitoring: Compliance monitoring of Early Intervention (EI) programs occurs by monitoring Local Educational Agencies (LEAs) through special education administrative units (SEAs) which is scheduled on a six-year cycle. In year one of the cycle, the SEAU conducts a self-review of records. In year two, the SEAU must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements of OSEP Memo 09-02. In year three, MDE conducts an on-site review of the SEAU including a review of EI records, stakeholder interviews, facilities, and the SEAU's Total Special Education System (TSES). In year four of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. The sixth year of the cycle provides an additional year for SEAUs to implement corrective action and changes to their systems prior to the start of the new monitoring cycle and self-review of records.

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.

All programs participate in both a self-review and a review conducted by the Minnesota Department of Education within a six-year monitoring cycle.

Provide additional information about this indicator (optional)

Data collection method: MDE includes the following among the "statement of assurances" required to be signed annually by local Early Intervention Program administrators prior to receipt of Part C funds. This has been accepted by OSEP as a component of Minnesota's Part C Application. The state confirms notification of LEAs by local early intervention programs as required by the annual statement of assurances. The Part C program must provide notification to the SEA and the appropriate LEA no fewer than 90 days prior to the child's third birthday, for those children who are potentially eligible for Part B services. 34 CFR §303.209(b)(1)-(2). However, per MDE policy, this notification only needs to be provided to the LEA, who is acting as an agent of the SEA for this specific purpose, to satisfy the notification requirements.

Correction of Findings of Noncompliance Identified in FFY 2017

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

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Indicator 8B – Prior FFY Required Actions

None

Indicator 8B – OSEP Response

Not applicable

Indicator 8B – Required Actions

Not applicable

Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline	2005	30.35%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	98.00%	100.00%	100.00%	100.00%	96.30%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
32	33	96.30%	100%	96.97%	Did Not Meet Target	No Slippage

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

0

Number of documented delays attributable to exceptional family circumstances

0

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All programs participate in both a self-review and a review conducted by the Minnesota Department of Education within a six-year monitoring cycle. Data for this indicator has been collected through MDE’s Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system. The MNCIMP web-based data system is used in part for gathering data from record reviews completed as part of compliance

monitoring. Compliance monitoring of Early Intervention (EI) programs occurs by monitoring Local Education Agencies (LEAs) through special education administrative units (SEAU) which is scheduled on a six-year monitoring cycle. In year one of the cycle, the SEAU conducts a self-review of records. In year two, the SEAU must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements of OSEP Memo 09-02. In year three, MDE conducts an on-site review of the SEAU including a review of student records, stakeholder interviews, facilities, and the SEAU's Total Special Education System (TSES). In year four of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. The sixth year of the cycle provides an additional year for SEAUs to implement corrective action and changes to their systems prior to the start of the new monitoring cycle and self-review of records.

As part of the record review, a computer-generated sample is used to determine the student records to be reviewed. Records are selected from the most recent SEAU enrollment data and are chosen in order to be accurately representative of the SEAU as a whole. Selection is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary disability of the student. During the record review, the most current Evaluation Report (ER), Individualized Education Program (IEP) or Individual Family Service Plan (IFSP) and corresponding due process documentation are monitored to determine that legal standards are met.

Data for this indicator are gathered from examining records of children exiting Part C services and determining whether a transition conference was held during the required timeframe for toddlers potentially eligible for Part B. The FFY 2018 data are based on MDE reviews and SEAU self-review of 37 SEAUs, comprised of 52 individual districts.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
12	12	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

SEAU with identified noncompliance are required to correct all individual student noncompliance, including possible Corrective Action Plans (CAPs) with a subsequent review of student records, in order to demonstrate the SEAU is now correctly implementing 34 CFR § 303.209. The SEAU submit Letters of Assurance along with information on the student records that were reviewed, assuring that the SEAU is now in compliance. Each individual case of noncompliance was corrected, as described below. One CAP was ordered to address the noncompliance in FFY 2018. MDE believes that aside from isolated incidents of noncompliance, the SEAU are correctly implementing 34 CFR § 303.209.

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

All record review data from FFY 2018 was collected through MDE’s MNCIMP web-based data system. Once noncompliance is identified, it is tracked through the same web-based data system which includes a compliance tracking system. For correction of noncompliance, the SEAU must submit documentation to MDE as demonstration of correction. Re-submission is required until the SEAU can demonstrate correction. If the student is no longer within the jurisdiction of the SEAU, the SEAU must submit to MDE the reason (moved, for example) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, all findings of noncompliance identified in FFY 2017 were corrected in FFY 2018. MDE has since verified that all records with identified noncompliance in FFY 2017 were corrected and the SEAU are now in compliance or the student is no longer within the jurisdiction of the SEAU, consistent with OSEP Memo 09-02. All correction of individual student record noncompliance was completed within the one-year time frame.

Correction of Findings of Noncompliance Identified Prior to FFY 2017

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

Indicator 8C – Prior FFY Required Actions

None

Indicator 8C – OSEP Response

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

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

Indicator 8C – Required Actions

Not applicable

Indicator 9: Resolution Sessions

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1 Number of resolution sessions	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota's Interagency Coordinating Council (ICC)

and state agency staff from the Minnesota Departments of Health and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered the state’s efforts to meet or exceed each target. The group also identified factors that might similarly help or hinder the state’s efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

Historical Data

Baseline					
FFY	2013	2014	2015	2016	2017
Target>=					
Data					

Targets

FFY	2018	2019
Target>=		

FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

Indicator 9 – Prior FFY Required Actions

None

Indicator 9 – OSEP Response

OSEP notes that this indicator is not applicable.

Indicator 9 – Required Actions

Not applicable

Indicator 10: Mediation

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)

Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

A workgroup was convened to review data and develop preliminary targets prior to our FFY 13 APR submission. That workgroup was comprised of volunteer members of Minnesota's Interagency Coordinating Council (ICC) and state agency staff from the Minnesota Departments of Health and Education. That group reviewed historical performance and target data for each indicator and discussed past contextual factors that helped or hindered

the state’s efforts to meet or exceed each target. The group also identified factors that might similarly help or hinder the state’s efforts to make progress from baseline for each indicator. From those discussions, preliminary targets were set for each indicator for each year included within the State Performance Plan (SPP). Preliminary targets were shared with local program leaders during a monthly Leadership Call and with the ICC during the quarterly meeting of the ICC. Each target was finalized through a vote of the ICC during its quarterly meeting on January 8, 2015.

Performance and targets have been similarly reviewed by the ICC for each of the four subsequent APR submissions; most recently on January 14, 2020. The ICC supported MDE's proposed resetting of baseline performance for child outcomes and all suggested performance targets for FFY 2019.

Historical Data

Baseline	2005				
FFY	2013	2014	2015	2016	2017
Target>=					
Data					

Targets

FFY	2018	2019
Target>=		

FFY 2018 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
		0				N/A	N/A

Provide additional information about this indicator (optional)

Indicator 10 – Prior FFY Required Actions

None

Indicator 10 – OSEP Response

The State reported fewer than 10 mediations held in FFY 2018. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

Indicator 10 – Required Actions

Not applicable