

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2023**

Minnesota



**PART C DUE
February 3, 2025**

**U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202**

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The Minnesota Department of Education (MDE) and the Department of Children, Youth, and Families (DCYF) are working together as co-lead agencies to oversee and support implementation of Part C programs through diligence with equitable opportunities for each and every child and family in Minnesota and 11 Tribal Nations who share land with us. This includes data collection and analysis; professional development; high-quality, equitable, individualized plans and programming; family-and-caregiver-centered services and assessment; and increased family/caregiver, partner, and Tribal Nations engagement in systems' change and development. FFY 2023 data demonstrates Minnesota meeting Indicators 2, 3A1, 4C, 6, 8B, and 12. Indicators 1, 3A2, 4A, 4B, 5, 8A, 8C, and 11B were not met but did not have slippage. Indicators 3B1, 3B2, 3C1, 3C2, 7, and 11A were not met and had slippage. Indicators 4, 7, 8A, 8C, and also the Introduction had required actions in the SPP/APR for FFY 2022 and are addressed in the appropriate sections. Minnesota does not meet criteria for Indicators 9 and 10. Every Indicator is a top priority as we work to meet the needs of each and every child and family and the workforce that support them in a co-lead partnership for the first time in Minnesota's Part C story. Minnesota's Part C families continue being served through local public districts and cooperatives, and Minnesota maintains its birth mandate status. Providers are employees of the local programs, and many districts implement a primary service provider model. The primary provider is often a family's service coordinator. In FFY 2023, every school district and cooperative served Part C families independently or collaboratively. Minnesota's Bureau of Indian Education (BIE) schools and charter schools do not provide Part C services – these are provided through the Minnesota school district in which the family resides.

Equitable access, process, policy, and action remain the focus of Minnesota's early childhood special education programs. Partnerships and collaboration support the whole-child and family/caregiver system. MDE and DCYF continue building partnerships with our parent information and training center, departments of health, commerce, corrections, and human services, and our leadership and practitioners. The Part C Coordinator meets on a regular basis with the lead of our Special Education Advisory Panel (SEAP) for alignment between the SEAP and the Governor's Interagency Coordinating Council on Early Childhood Intervention (ICC). We also continue building partnerships with Native communities and individuals, family-trusted diverse community organizations, university programs, and national partners. At MDE, the newly formed Early Education Team collaborates with department partners to support the requirements of general supervision for Parts C and B/619. Within the DCYF, Part C is on the same team as Early Childhood Screening and in the same division as Child Care Services. These horizontal and vertical alignments afford continued consistent support to the field. Inclusion in July 2024 of Part C in DCYF allows streamlining into new collaborations, processes, and systems development at the ground level. DCYF combines a large number of early childhood care and education programs from the current Minnesota Departments of Human Services, Health, Education, and Public Safety (<https://mn.gov/mmb/dcyf-implementation/>). We developed a Part C Frequently Asked Questions (FAQ) document for supporting providers and families during the transition in lead agency and continue this education through in-reach and sharing opportunities on a regular basis.

Continuing into FFY 2023, Federal Part C American Rescue Plan (ARP) Act projects continue impact at both state and local levels through sustainable improvements and implementation of extensive in-reach that occurred throughout funding expenditure. This past year, we utilized in-reach impact to continue strengthening interagency collaborations through continued bi-weekly collaboration with early childhood at the Minnesota Department of Health (MDH) and a new partnership with the team leading work in Neonatal Abstinence Syndrome (NAS). We also increased new relationships as a co-lead system in two aligned agencies. We completed a 20-month training series through The Center of Equity and Excellence (CEE) supporting our internal state team, regional early childhood special education professional development facilitators, and public awareness and outreach leaders for trauma healing and culturally supportive early intervention systems development. We also continue relationship-building with the 11 Tribal Nations who share land with us and American Indian families and caregivers living on and off Tribal Nation lands as supported by Minnesota codified law through active participation of Part C in the Dream Catcher Project (<https://education.mn.gov/MDE/dse/MDE086456>). Another major project that continues from ARP funds is the complete revision of our Family Outcomes Survey with the help of significant technical assistance (TA) support from both DaSy and ECTA and a local community organization. Also, as of February 3, 2025, two asynchronous learning courses have been launched for statewide use by early childhood special education professionals. Of the 106 evaluation survey responses so far, 92.6% report working in a public school district, 4.3% in Head Start, and 3.2% in a service cooperative and special education administrative unit (SEAU). Both courses provide hours for teacher licensing and administrative license renewal through the Minnesota Board of School Administrators (BOSA). Pre-existing courses were converted and approved through Develop, a system for tracking professional development for Parent Aware ratings for childcare in Minnesota and 11 Tribal Nations.

Minnesota remains committed to continuous monitoring and improvement through equitable services and systems for each and every eligible infant and toddler and their families and caregivers. When Minnesota investigated a co-lead model, continuing our birth mandate status through Free and Appropriate Education (FAPE) overwhelmingly led as a top priority for families and communities, local program leaders and providers, and state agency staff to ensure wealth inequities and immigration status are never barriers for families to Part C supports and services, thus ensuring equitable access in Minnesota and 11 Tribal Nations who share land with us into the educational system which many communities experience through historical and current trauma and marginalization.

Please note that "caregiver" is used throughout Minnesota's SPP/APR and SSIP where there is flexibility to include additional people who surround infants and toddlers eligible for Part C services. This is intentional to honor the critical role that many caregivers play in a young child's life, which may include and is not limited to parents, grandparents, kinship, guardians, childcare and education providers. The use of "parent" is often still used, especially as it pertains to rights afforded via federal regulations that have defined parent specifically. In addition, please note that Minnesota often uses "partner" in place of "stakeholder" to honor extensive family and community in-reach suggestions for this specific word change. Many shared they feel "stakeholder" can create distance rather than feel collaborative as MDE, DCYF, and OSEP intend. Minnesota also uses "in-reach" instead of "engagement", at the specific suggestion of family and community partners to meet families where they are instead of placing this burden on them. Part C as referenced in this document are the Part C requirements found in the Individuals with Disabilities Education Act (IDEA) of 2004, revised in 2011.

Additional information related to data collection and reporting

As we moved through another year, our commitment to children, caregivers, and the providers remained steadfast. We recognized the continuing effects of COVID-19, especially on our youngest served and their families, and began a new stage of "recovery," exploring the long-term consequences for development, social determinants of health, and the early childhood workforce. We also became acutely aware of the increase in mental health needs across family and provider spaces. Minnesota's COVID-19 affected data continues to demonstrate an impact in FFY 2023 in some real ways, including another year of record number referrals through both our online Help Me Grow Minnesota (HMG) system

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

(<https://www.helpmegrowmn.org/HMG/index.html>) and through direct local connections for children and families. The HMG referral system demonstrated an over 4.1% increase in referrals during FFY 2023 with a total of 28,465 children. Of the 12 calendar months for SFY 2024, nine months were the highest for each month respectively on record, with October marking another all-time high online referral count in Minnesota for a single month at 3031 referrals. Note this number does not include referrals made directly to school and cooperative programs.

As a comparison, the difference in referrals in total from FFY 2022 to FFY 2023 was 1165 more children referred through our Help Me Grow referral system – a decrease rate of 3.9% as compared to the difference between FFY 2021 and FFY 2022 of 2187 children. As we reviewed child count data, we saw an 8% increase in the percentage growth of children identified as having two or more races receiving services in Part C Early Intervention. This is in contrast to the percentage decrease in all other demographic categories for children receiving Part C Early Intervention during the 2023-2024 school year.

General Supervision System

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

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

Program monitoring of both Part B and Part C is completed together by MDE, and Part C monitoring remains through the MDE co-lead partnership of MDE and DCYF. In developing MDE's revised monitoring process, the decision was made to move from a six-year cycle down to a five-year cycle. With the transition of indicator data collection to an annual, random statewide sample, MDE also moved away from the process in which districts completed both a self-review and MDE review over the course of the six years, to focus on the comprehensive review during the five-year cycle. In FFY 2021 MDE reassigned all districts, including charter schools and districts that do not provide EIS, from one of the previous six monitoring groups into one of five cohorts. In reassigning districts, MDE considered the size and location of the district as well as the last year in which the district went through MDE review. With over 500 districts, the aim was to have five cohorts, each with a little over 100 districts. In assigning districts to cohorts, MDE considered also the type of district and whether it was a charter school, or a cooperative made up of several individual school districts. The resulting five cohorts each contain a variety of districts of varying sizes, including cooperatives and charter schools, from across the state. Each cohort includes approximately 65 SEAU's with EIS programs.

Once cohorts were assigned, MDE modeled its monitoring process after the Office of Special Education Programs' (OSEP) Differentiated Monitoring and Support (DMS) system with the three phases of discovery, engagement, and close-out. As part of its revised monitoring process, MDE made the decision to move towards a risk-based monitoring process that allowed MDE to differentiate the monitoring process based on the needs of the district. MDE analyzes risk data to identify districts with a greater need for support and assistance. Those identified as needing less support will complete a targeted record review, receive universal technical assistance and may complete other monitoring activities as needed. The primary focus of monitoring activities will be on those districts identified with greater needs. SEAU's identified as needing additional program monitoring will enter the three-phase monitoring process. First, MDE will gather additional data from the SEAU to better understand the current policies, practices and procedures of the SEAU. Next, additional record reviews, site visits, facility reviews, and staff interviews will be completed, as needed, and will be differentiated based on the results of the risk analysis and initial data collection and review activities completed during the first phase of the monitoring process. The third phase of monitoring will involve the completion of corrective actions designed to address any identified noncompliance with targeted technical assistance and coaching for the SEAU. Approximately 20% of the districts in a cohort are moved into the three-phase comprehensive review process. In FFY 2023, the year in which MDE initiated the monitoring process with cohort one, 19 districts were identified for comprehensive review; 11 of which include EIS programs.

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

MDE's general supervision system includes two types of record reviews as of FFY 2023. The first is the indicator data collection (IDC) record review that is conducted annually based on a random, statewide sample. The other is the targeted, topical record review (TRR) that is conducted as part of the program monitoring process and completed by all districts in the cohort during a given year. In FFY 2024, all SEAU's in cohort one completed the TRR.

For IDC, MDE generates an individual sample for indicators C1, C7 and C8. Using the Stepwell MN online system, MDE generates a random statewide sample from the most recent enrollment data reported via the Minnesota Automated Reporting Student System (MARSS). The sample for the indicator is dependent on the number of children meeting the sample requirements. For example, for C7, MDE generates a data extract of all infants and toddlers recently identified as eligible for EIS. From this pool of children, the system will create a random sample. In FFY 2023, for C1 MDE sampled 369 of the 6410 potential children. For C7, MDE sampled 361 of the 4701 potential children. And for C8, MDE sampled 297 of the 1285 potential children.

For TRR, MDE generates samples for three different age groups: infants and toddlers, preschool, and school age. Samples are generated for each district in the cohort. Sample sizes vary depending on the size of the district's student population. In FFY 2024, for infants and toddlers, MDE requested a minimum of five and maximum of 20 records per SEAU. For FFY 2024, MDE sampled 232 infants and toddlers for the TRR.

All record reviews are submitted through Stepwell MN, MDE's online data system. The system allows MDE to review findings of noncompliance and issues formal notifications of findings to the SEAU's. Each SEAU with noncompliance must submit demonstration of correction through Stepwell MN. MDE reviews and tracks all correction documentation and releases the SEAU from further action once the SEAU has demonstrated correction of each individual case of noncompliance as well as successfully demonstrated the SEAU is correctly implementing the regulatory requirements based on a review of updated data consistent with OSEP QA 23-01.

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

Data for indicators C1, C7 and C8 are collected through the IDC workflow in Stepwell MN. This system creates a random statewide sample for each indicator. SEAU's with sampled records review the records by entering data into the Stepwell MN system. The record review period is traditionally mid-February through mid-April. Any noncompliance is identified, and the SEAU is notified of findings of noncompliance in June. The SEAU then has one year to demonstrate correction, in accordance with OSEP QA 23-01. For FFY 2023, the IDC record review was launched February 20, 2024, and due April 15, 2024. In April and May of 2024 MDE reviewed the data and verified a sample of the reviews. Formal notifications of the findings were released to SEAU's on June 28, 2024.

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

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

For IDC, noncompliance is reported by SEAU. If multiple districts within a cooperative, for example, identify noncompliance with the same regulatory requirement, the noncompliance is counted as one finding attributed to the SEAU. For all other findings, noncompliance is reported by instance by district. Each individual district completes the TRR so findings are by instance by district. For the comprehensive review, findings are attributed to the individual districts as some districts in the cooperative may move on to comprehensive review and others may not.

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

MDE does not have procedures that allow SEAUs to correct noncompliance prior to issuance of findings.

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

For noncompliance identified through a child record review, such as IDC and TRR, the first level of correction is child level correction (SLC). SLC requires that the district correct each child-specific instance of noncompliance through review and revision of the child's record unless the child is no longer within the jurisdiction of the SEAU. For example, if the IFSP did not include appropriate transition steps and services and was cited for noncompliance related to indicator C8, the SEAU would need to review and revise that child's IFSP, including conducting a transition conference, if warranted, in order to bring that child's record into compliance. If the child has moved or aged-out of Part C, the district would request a release from the SLC by providing relevant data to MDE. In addition to SLC, MDE also requires district level correction (DLC), which involves the review of additional records, for an SEAU to demonstrate it is correctly implementing the regulatory requirements districtwide. This two-step correction process is consistent with OSEP QA 23-01 and ensures not only that each individual case of noncompliance is corrected, but also ensures the district is correctly implementing the regulatory requirements districtwide.

For noncompliance identified through the comprehensive review or follow up on credible allegations of noncompliance the SEAU is required to develop a corrective action plan (CAP). As part of each CAP, the SEAU works with the lead program monitor for the SEAU to conduct a root cause analysis to identify the reason(s) behind the noncompliance. The SEAU must then develop the CAP to address the root cause(s) and detail the actions and strategies it will take to correct the noncompliance. The CAP must also identify the data the SEAU will collect to verify the effectiveness of the actions and strategies. The SEAU must submit evidence of completion of the CAP to MDE. If a SEAU is unable to demonstrate compliance following the implementation of a CAP, the lead program monitor assigned to the SEAU will work with the SEAU to review the root cause analysis, actions and strategies and evidence of completion to identify areas of improvement. Additional coaching may be provided to the SEAU to help them correct noncompliance. The SEAU will be given the opportunity to implement additional actions and strategies, with the support of MDE, to bring the SEAU into compliance. If the SEAU is still unable to demonstrate compliance, additional monitoring activities may be initiated to gather additional information to support further analysis of the root cause(s) for the noncompliance and MDE may order specific actions and strategies as part of a subsequent CAP.

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

MDE makes annual determinations through consideration of the SEAU's performance on compliance indicators; its reporting of valid and reliable data; timely correction of identified noncompliance; and other data available to the State about the SEAU's compliance with IDEA, including any relevant audit findings. MDE notifies the SEAU if the determination status is Needs Assistance, Needs Intervention, or Needs Substantial Intervention. MDE has not identified any SEAUs as Needs Assistance, Needs Intervention or Needs Substantial Intervention since FFY 2019.

MDE reviews the data annually following the release of the formal notifications of findings from all monitoring activities, including IDC, TRR and comprehensive review. MDE ensures that all notifications of findings are released before the end of the federal fiscal year. In the fall of the subsequent federal fiscal year, MDE will review the data to determine the SEAUs status. For indicators C1, C7 and C8, where records are reviewed, points are awarded based on the percentage of noncompliance identified. Additional points are awarded based on timely and accurate reporting of data, fiscal audit findings and timely correction of noncompliance. The points are totaled per SEAU and compared to the total possible points available to an SEAU. An SEAU Meets Requirements if the score is at or above 90%. An SEAU is identified as Needs Assistance if the score falls between 75-89%. Needs Intervention would mean the SEAU scored between 50-74%. If an SEAU scored below 50% of the possible points, the determination status would be Needs Substantial Intervention.

To ensure ongoing alignment with federal requirements, MDE is continuously reviewing its monitoring process, including how determinations are made, and results are shared.

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

Conflicts in Special Education: <https://education.mn.gov/MDE/dse/sped/conf/>

Facilitated Team Meetings: <https://education.mn.gov/MDE/dse/sped/conf/team/>

Mediation: <https://education.mn.gov/MDE/dse/sped/conf/med/>

Hearings: <https://education.mn.gov/MDE/dse/sped/conf/duel/>

Complaints: <https://education.mn.gov/MDE/dse/sped/conf/Comp/>

Fiscal Monitoring: <https://education.mn.gov/MDE/dse/sped/mon/fiscal/>

IDC Resources: <https://education.mn.gov/MDE/dse/datasub/stepwell/PROD082663>

IDC Check lists: <https://education.mn.gov/MDE/dse/sped/mon/prog/list/>

Training: Program Monitoring: <https://education.mn.gov/MDE/dse/sped/mon/prog/Training/>

Technical Assistance System:

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

Together, the Division of Early Education at the Minnesota Department of Education (MDE) and the Part C program components of the Division of Early Learning Services at the Department of Children, Youth, and Families (DCYF) support systems and local programs in implementing high-quality, evidence-based services that center families in ways that honor the strengths, cultures, and self-identified priorities of each and every eligible infant and toddler and their families, so that families experience positive self-identified outcomes.

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

MDE and DCYF use a variety of mechanisms to provide technical assistance to early childhood special education leaders, providers, and collaborating partners. Our websites are a source of information for caregivers, administrators, service providers, regional partners, and other entities including our Governor's Children's Cabinet. Please note that DCYF Early Learning webpages are being updated and aligned, but the majority of public facing information related to Part C remains on the MDE website at this time. MDE and DCYF collaboratively host an annual forum to share foundational information for ECSE leaders and participates in a number of additional intra-and-interagency collaborative initiatives. The co-lead team also participates in trainings led by interagency programs like Child Protection and the Early Intensive Developmental and Behavioral Intervention (EIDBI) both through the Department of Human Services, and the Follow Along Program through the Department of Health. Minnesota has continued to offer hybrid and virtual methods of technical assistance, ensuring more equitable access to supports across our state and Tribal Nation lands, in part at the specific request of local programs in the Greater Minnesota rural and urban geographies. Our monthly virtual leadership calls deliver timely technical assistance, resources, and presentations from collaborative partners. The monthly leadership calls are also an opportunity for leaders to share with one another, problem solve and operationalize learnings. Foundational webinars remain available on the MDE ECSE website and will be available as part of CANVAS courses (an online Learning Management System) along with opportunities to debrief with MDE staff during live Question and Answer (Q&A) sessions. We also have information about the transition of Part C program components located on both the MDE and DCYF websites. Additional resources available to our leaders and practitioners can be found at <https://education.mn.gov/MDE/dse/early/ecse/bc/>. Other places families, caregivers, providers, and partners can go for resources are: Early Childhood Screening (<https://education.mn.gov/MDE/dse/early/elprog/scr/>), Help Me Grow Minnesota (<https://helpmegrowmn.org/HMG/index.htm>), Head Start and Public Preschool Referrals (<https://public.education.mn.gov/HSPPReferrals/>), Help Me Connect (<https://helpmeconnect.web.health.state.mn.us/HelpMeConnect/>), and Parent Aware (<https://www.parentaware.org/#/>). The Early Education team at MDE also provides technical assistance through a dedicated ECSE email address for Parts C and B/619 (mde.ecse@state.mn.us), typically responding to questions posed by district staff within 24 hours. To ensure consistency and alignment across agencies and programs, the questions and answers from the mailbox are catalogued for reference and analyzed for themes to identify broader Technical Assistance (TA) and professional development (PD) needs being addressed throughout the year in expanded capacities.

As shared in FFY 2022, we created district-specific Data Dashboards for child outcomes to support data-informed decision-making for ongoing program improvement, as well as providing direct consultation to districts for child reporting and maximization of funding. These Data Dashboards are updated on a scheduled basis. We also updated our public facing District Data Profiles (<https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=8>) at the end of FFY 2022 which have been helpful in a number of public avenues and are a part of our technical assistance with early childhood partners, our ICC, and families during in-reach opportunities along with our Early Childhood Longitudinal Data System (ECLDS) managed through our Early Learning Services division at DCYF (<https://eclds.mn.gov/>). Our Part C Coordinator continues to provide monthly TA support to the Regional Interagency Early Intervention Committees (IEICs), the primary base of Minnesota's public awareness and outreach work.

In effort to better coordinate systems and programming for caregivers participating in Part C, the ECSE Team from both MDE and DCYF collaborated with other early childhood partners in FFY 2023:

- Dream Catcher sessions with American Indian Home/School Liaisons as part of efforts to increase collaboration between American Indian Education and supports for caregivers and early childhood special education through our Part C Coordinator (<https://education.mn.gov/MDE/dse/MDE086456>)

- Minnesota Learn the Signs Act Early (<https://addm.umn.edu/ltsae>) Interagency committee through multiple MDE and DCYF early childhood special education team members

- Various projects in partnership with Special Education, Low Incidence Provider groups, and Early Hearing Detection and Intervention initiatives supporting infants and toddlers with sensory loss (e.g. https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD034482&RevisionSelectionMethod=latestReleased&Rendition=primary) through one of our ECSE Specialists and our Part B/619 and CSPD Coordinator

- Leadership participation in a cross-agency, cross-partner language acquisition group for infants, toddlers, and young children who are deaf and hard of hearing

- Continued co-leadership with Child Welfare through the Department of Human Services for a statewide workgroup developing materials and supports for child welfare workers and early childhood special education providers serving children who are automatically referred to Part C when identified as a child with a substantiated case of abuse

- Building on relationships with Child Care Services staff at the Department of Children, Youth, and Families to increase access to consistent and quality childcare for children and families receiving Part C supports and services and an intentional focus on decreasing "soft expulsions" of our youngest children

- Supportive communications and outreach in coordination with our Center for Inclusive Child Care organization. (<https://www.inclusivechildcare.org/>) through one of our ECSE Specialists

- Continued direct involvement with Help Me Connect (<https://helpmeconnect.web.health.state.mn.us/HelpMeConnect>) serving as our Part C resource directory through our Part C Coordinator on the Planning and Leadership Team and supporting the move for Help Me Connect to our Early Learning Services Department at DCYF in January 2025

Professional Development System:

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

Strengthening our professional development system for both the field and the ECSE team from MDE and DCYF continues to be a priority. During FFY 2023, the co-lead team benefitted from the following TA opportunities and actions to continue systems improvements for infants, toddlers, caregivers, and Part C programs:

- We developed an asynchronous course that was made available statewide, "A Trauma-Informed Approach to Early Childhood Practice: Foundational Course" in partnership with the Child Health and Development Institute (CHDI) which provides 9 hours of content to support early childhood professionals in using trauma-informed practices by learning to recognize, identify, and address the potential impacts and effects of trauma. This course as of January 17, 2025, has 215 individuals that have self-enrolled

- We developed an asynchronous course that was made available statewide titled, "Reflective Practice for Early Childhood Leaders" in partnership with Center Early Education and Development (CEED) at the University of Minnesota Twin Cities which provides 14 hours of content and practical

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

applications for building and implementing reflective skills in early childhood leaders and professionals as well as strategies for embedding reflection into their daily work. As of January 17, 2025), 72 individuals have self-enrolled in the course

--We are developing three additional trauma-informed advanced courses to be made available statewide in continued partnership with CHDI focused on those in leadership positions, those in classroom-based settings, and those providing early intervention

--We are developing an asynchronous course to be made available statewide, "Best Practices in Early Intervention" in partnership with the Family, Infant, and Preschool Program (FIPP)

-- We are developing an asynchronous course to be made available statewide showcasing current webinars and webinar series' that are available on the MDE website. This course will place early care and education webinars in one place and allow participants to receive clock hour certificates for viewing webinars and completing reflection activities (e.g. reflection questions, ungraded quizzes) for webinars that are one hour or longer.

--We received data systems support including intra-agency partners through The Center for IDEA Early Childhood Data Systems (DaSy) and Early Childhood Technical Assistance Center (ECTA), most specifically in transformation work for our Family Outcome Survey (FOS) and procedures

--We received intensive TA participation with DaSy and ECTA in our FOS renewal work in partnership with the Wilder Foundation (<https://www.wilder.org/>)

--We continue participating on the planning team and receiving monthly support from the ECTA and DaSy Family Outcomes Community of Practice

--We continue co-Leading the national Part C Racial Equity Community in partnership with ECTA and additional statewide intensive work with Dr. Rosemarie Allen supporting systems-level change at the regional and local levels through our Part C Coordinator

--We received system-level racial equity support and intra-and-interagency collaboration from the BUILD Initiative

--The CPSD workgroups supported the recommendation of the adoption of the national early intervention/early childhood special education standards as Minnesota's ECSE personnel standards. The CPSD workgroup worked closely with our licensing agency on this process

In addition to receiving support, the MDE and the DCYF continued to support the direction, organization, and design of the Minnesota Centers of Excellence for Young Children with Disabilities (MNCoe). MNCoe, as part of our CSPD, works to connect, support, and empower local leaders to build capacity in early childhood programs. Through these joint efforts, young children and their families are accessing and benefiting from high-quality programs and services throughout the state. Additionally, the MNCoe and the state early childhood special education (ECSE) team worked to build more foundational best practices resources, content, and implementation guides that became readily available to leaders and practitioners across the state.

The MNCoe includes the following structural components:

1. Professional Development Facilitators (PDFs) located within each region of the state. In alignment with the CSPD and work of the ECSE team at MDE and DCYF, the individuals in this role actively partner with local program ECSE leaders to identify opportunities to improve practitioner and program quality. This is achieved within the CSPD framework of working to improve the quantity, quality, and effectiveness of the early childhood workforce that provides services and interventions to facilitate the development and learning of eligible infants, toddlers, and young children and their families. PDFs partner with local ECSE leaders in their regions to identify professional development needs of their practitioners and work together to find and create opportunities to address those needs. PDFs also serve as external coaches, assisting in the implementation and facilitation of one of two evidence-based innovations available to programs throughout the state (see #3).

2. Consistent use of the frameworks of active implementation (implementation science).

3. Innovations that are evidence-based, including the Pyramid Model for Infants, Toddlers, and Preschoolers (formerly TACSEI) and Evidence-Based Quality Intervention Practices (EQIP). During FFY 2023 we continued to target discretionary federal funds to support local programs committing to the implementation of evidence-based innovations.

The collaborative work of the state ECSE team at DCYF and MDE and the MNCoe has focused on administering a comprehensive system of personnel development that ensures ECSE program leaders and practitioners have access to professional development focused on implementing best practices to provide high-quality special education programming to young children and their families. In an effort to align the work of early childhood education with other statewide priorities, MDE and DCYF will be retiring the MNCoe at the end of the state fiscal year (June 30, 2025). MDE Early Education and DCYF Early Learning teams will be intentionally partnering with the Collaborative Minnesota Partnerships to Advance Student Success (COMPASS) division at MDE, as it is the statewide system for continuous improvement created through a collaboration between MDE and the Minnesota Service Cooperatives. The goals of the partnership are to help build an integrated system of support for early childhood programs that prioritize inclusive, evidence-based, and developmentally appropriate practices from birth. This integrated system will create efficiencies, consistencies, alignment, and increased access and opportunity across the state. This connected system of supports and resources will work to meet local program leaders where they are at, build capacity of those local early childhood leaders to implement and sustain evidence-based practices to improve program quality, and inform continuous quality improvement throughout the state.

Stakeholder Engagement:

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

Minnesota continues our dedication to doing engagement differently and in ways that center families, caregivers, communities, and programs building what they want and need with us instead of top-down decisions from us. In addition to continuation of the mechanisms from previous years including the Part C American Rescue Plan funding in-reach and feedback looping, we maintain ongoing systems-level in-reach with our 12 regional Interagency Early Intervention Committee (IEIC) teams and our Governor's Interagency Coordinating Council on Early Childhood Intervention (ICC). We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership (co-created survey with MNDEC and MNCoe) to gather information from the field around issues such as professional development needs, workforce, and licensing. Families, caregivers, community partners, and early childhood partners are invited to every opportunity of in-reach we hold.

Over the past three years, Minnesota has been actively working to improve its in-reach and listening with American Indian families and community

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

partners, Families and Community Partners of Color, families and community partners from the disability community, families who live in diverse geographical areas of our state and Tribal Nations, and diversity within early childhood partners who also support Part C families with us. Foci for funding, projects, trainings and webinars, online courses, technical assistance and professional development (receiving and giving), and more are chosen through what we are hearing from these diverse communities matters most for them. We also have been working hard to develop systems for providing feedback loops with in-reach partners and have more room to grow in these processes. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable to better in-reach and feedback looping processes as well as how to hold us accountable. We held four in-reach sessions across two weeks with varied times including evening, and we held space within each of these for gathering community-driven suggestions from the partners present on how we can continue doing better with fully including more diverse voices from every community living and thriving in Minnesota and Tribal Nations. We continue using multiple methods of message-sharing to ensure the most families and caregivers possible hear about and are able to attend in-reach opportunities when they arise, and this year we also asked local providers for help in reaching directly to families, communities, and early childhood partners they are serving in their individual communities. Web-based polls have been effective in this virtual capacity and allow for in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after live virtual meetings conclude. Use of these information-gathering methods and specifically-focused surveys have continued being successful in FFY 2023 on an ongoing basis and encourage reciprocity of communication: participants are given access to the anonymous results of the polls through slides, reminder emails, and follow-up communication; and the poll results are openly available to anyone else who asks. Another benefit of these poll methods is access to flexible data formatting, recording, and analysis which help to drive our work to ensure that the people most involved in and affected by our services are driving the next decisions and actions.

In-reach and engagement are nothing for our co-lead agencies, MDE and DCYF, without implementation and sharing back with those who open up to us.

In FFY 2022, families and caregivers were engaged in actionable and historical ways for Minnesota's Part C system. For the first time ever in our Minnesota Part C systems implementation, we paused and intentionally asked families and caregivers to share with us through four community-led subgrants over a period of 15 months what their experiences, concerns, joys, and needs have been through Minnesota's Part C services. Every step of the process was family, caregiver, and community led, and reporting back to MDE and local programs at the end of the subgrants was encouraged to align with the specific communities' knowledge-sharing styles who participated in the in-reach. Each and every story and experience shared through these Family Engagement grants has already impacted our interagency early childhood system in addition to local implementation of Part C programming.

In FFY 2023, while continuing to prioritize listening and engagement with families and caregivers, outreach to additional community partners focused on collaborative problem-solving. We continued in-reach of diverse early childhood partners at each monthly ECSE Leadership call and ensured through interagency partnerships that our newly developed trauma-and-healing informed course are available to early childhood partners supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP, so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit, technical assistance and follow-up opportunities. Additionally, we have extensive interagency collaboration for child protection processes, Healthy Start (Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement action also continued as always with multi-year Interagency Coordinating Council (ICC) and monthly Interagency Early Intervention Committee (IEIC) meetings, where members were actively engaged in determining table-building and discussions of statute and structure needs in Part C as we have been transitioning into a co-lead space for the first time in Minnesota's history for these supports and services.

Also important to note, the work of the CSPD includes ongoing engagement with parents, ECSE practitioners and leaders, childcare representatives, institutes of higher education (IHEs), the Department of Human Services (DHS), the Minnesota Department of Health (MDH), Professional Educator Licensing and Standards Board (PELSB), the Center for Early Education and Development (CEED), Professional Development Facilitators (PDFs), Regional Low Incidence Providers (RLIFs), Minnesota Centers of Excellence for Young Children with Disabilities (MNCoe), and PACER Center through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a monthly agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

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

NO

Number of Parent Members:

250

Parent Members Engagement:

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

Building on our ongoing efforts to in-reach with families and caregivers in Minnesota's target setting, data analysis, improvement strategy development, and progress evaluation, we continued family and caregiver engagement this past year in the following ways, with additional intentional strategies being put in place for the coming year (note: the Number of Parent Members reflected above includes total parents engaged in the below opportunities in FFY 2023 in addition to Parent Members of our ICC which is currently 6) :

1. We continued honoring parent membership on the Governor's Interagency Council on Early Childhood Intervention (ICC) through greater representation of race/ethnicity, gender, and geographical region and continued adjusting of the timing of meetings to prioritize parents' needs; parents may also receive payment and reimbursement for childcare following state policies per our ICC bylaws once they are state vendors.
2. Parent members of our ICC are present and actively engaged at each ICC meeting, and a parent has sat as our ICC Chair for the last six years.
3. Representation from our Parent Training and Information Center (PTIC), including advocacy and Cultural Liaison staff, continues active engagement in every in-reach and engagement opportunity we provide through MDE and DCYF, including holding the Parent Advocacy Organization member seat on our ICC again this next four-year cycle.
4. We continue having paid parent representatives on all of the CSPD workgroups, including at the decision-making level on the Leadership and Evaluation Workgroups,
5. Parents participated as part of the contract with Dr. Rosemarie Allen and her team at the Center for Equity & Excellence where equity exploration took place. Part of that exploration process was to engage families in focus groups to gain an understanding of the experience of Families of Color and those who speak Heritage languages in accessing and participating in early intervention and early childhood special education services. The focus group

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

participants represented primarily Families of Color, migrant and refugee families, and those who speak Heritage languages.

6. We completed our contract with the Wilder Foundation (<https://www.wilder.org/>) for a complete redesign of our Family Outcomes Survey, which included in-reach with approximately 50 families in shaping new questions, creating a new form, and recommending new processes that align with families' and communities' ways of knowledge-sharing across Minnesota and the 11 Tribal Nations who share land with us. We additionally engaged approximately 12 more Part C parents in reviewing the recommendations made by Wilder after their in-reach and feedback looping with families during our SPP/APR in-reach sessions this federal fiscal year.

Activities to Improve Outcomes for Children with Disabilities:

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

We remain dedicated to supporting families and caregivers from each and every community in Minnesota and 11 Tribal Nations who share land with us, creating and building new Part C tables during our transition into our co-lead model. Partnering where we are listening takes more time as we continue building trust in the communities farthest from opportunities and most impacted by historical and current educational trauma, including Communities of Color across Minnesota and for American Indian relatives living on and off Tribal Nation lands. This past year, we implemented new actions hoping to increase capacity of diverse groups of families and caregivers and supporting development and implementation of systems, policies, and procedures for improving outcomes for each and every eligible infant and toddler and their families.

We stayed in the cycle of action for our Family Outcomes Survey (FOS) with major new steps toward implementation. We continued intensive TA with ECTA and DaSy who also participated directly in our monthly work with Wilder. We continued in-reach with families, community partners, and providers and leaders around current FOS processes for ways families and their trusted supports and individual programs envision a better FOS process. We continued sharing and gathering feedback with families, community partners, local programs, and early childhood partners about the racially disparate data in our child and family outcomes while working to make connections between Part C and Minnesota's glaring graduation rate disparities for children with disabilities and intersectionalities of political status, race, and wealth. We consistently shared the message that the FOS data we receive from families and caregivers is our most critical data, because every survey is a caregiver's story we need to hear, and we also need to hear the family and caregiver stories who choose not to fill out the FOS. And we completed our year-long intensive contract with the Wilder Foundation to help create a new FOS that is meaningful to both families and programs. The work was intended to ensure the FOS aligns with culturally-supportive language and transliteration and information-gathering methods; increases equitable and demographically-matched participation from families experiencing Part C; and continues answering the federal reporting questions for Indicator 4 in ways that make sense for families and encourage improvements within the systems at all levels. The in-reach with families through the Wilder work included a number of intentional actions to increase capacity for diverse groups of families including: an intentional focus on American Indian families living on and off Tribal Nation lands and additional communities who are made to be most marginalized through "race and place"; conducting in-reach with diverse families and trusted cultural liaisons and interpreters with Wilder staff from the focus communities; ensuring compensation for families' time; adhering to strict data privacy with families' stories gathered to support increased trust; and including cultural liaisons and Heritage language translators in the in-reach groups to enhance the ways we are learning to better engage and actively involve diverse families in moving forward in capacity-building with vocalizing their needs and preferences (e.g. providing a form that encompasses language and question-asking that align with diverse understandings of the federally-required questions such as "knowing rights" for families who are undocumented and think about rights from additional experiences with this term). We are in the process at the writing of this report of gathering additional response feedback through in-reach sessions from families, community partners, and local programs about the recommendations Wilder has given us through their own intentional family and partner in-reach. These recommendations include a new survey design with varied question types and open-ended questions with clearer groupings; clarifying the purpose to families in culturally relevant ways; using multiple modalities for both dissemination and retrieval of the family surveys (e.g. continue paper and add electronic, text, QR codes, phone/live, community trusted partner support, and an oral ability to share); increasing awareness about the survey through more relevant and consistent communication and reminders; creating a meaningful feedback loop for families and programs; and discussing ways to honor families' requests to share provider-specific feedback through other aligned methods. In the coming year, we will be engaging families from the initial focus groups, program providers and leaders, and additional partners to begin strategic implementation planning and piloting components of the recommendations.

While all families with infants and toddlers who may or are receiving Part C services in Minnesota are invited and included in the entire focus of our in-reach, intentional focus continued in FFY 2023 within the intersectionality of disability and American Indian families and caregivers, Families of Color, families who speak Heritage languages, families who experience homelessness and/or near homelessness, families experiencing wealth inequities, families with caregiver(s) who have disabilities or mental health needs, and families and caregivers with child protection involvement. Some specific ways this happened in FFY 2023 include: 1) The 12 regional Interagency Early Intervention Committees (IEICs) who are responsible for public awareness and outreach around Parts C and B/619 using funds to support Parent Connectors and new community partnerships from the diverse communities living and thriving in Minnesota and Tribal Nations in public spaces and engagements, developmental information creation and transliteration validation, and providing education to providers on cultural humility specific to Minnesota communities and 11 Tribal Nations who share land with us; 2) completing the process of adding three new languages to our three Help Me Grow Minnesota referral connection forms: Hmong, Spanish, and Somali; including updating several layers of the data components of our state-level referral connection system to ensure local programs have access to this information for better and more culturally supportive "cold calls" with both families and the people making referral connections. Now families and additional referring partners are able to make these connections in their thinking languages.

Perhaps our most significant system-level action taken this past federal fiscal year was to shift a portion of our Part C programming including our Part C Coordinator to the new Department of Children, Youth, and Families. An intention of this shift is to increase diversity and inclusion of voices in Part C capacity building and system/program direction determinations. It has been a time of transition where we are exploring and building intra-and-interagency partnerships that center family capacity-building and leadership in every aspect. While this year much of the work to enhance family and caregiver capacity has been laying new foundations and building new program teams – and therefore feels less "direct" capacity building for families – we believe this transition and the new co-lead partnership between MDE and DCYF will strengthen our consistent and ongoing abilities to exceed OSEP's expectations for increasing the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for infants and toddlers with disabilities and their families in Part C across each and every community living and thriving across Minnesota and 11 Tribal Nations who share land with us. We remain committed to an inclusive process for designing systems of impact and doing so without barriers and unintended oppression as we move through our SSIP implementation.

Soliciting Public Input:

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

Solicitation of public input continues in a number of ways. Our primary method for public information sharing continues to be posting federal reporting and Part C Grant Application public comment period information on our Governor's Interagency Coordinating Council (ICC) website (<https://education.mn.gov/MDE/about/adv/active/ICC/>). Public opportunity is encouraged during our ICC meetings, which are posted on the MDE public calendar along with an open Zoom link without restriction by code to ensure easy access for anyone who wishes to attend. The ICC voted again this

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

past year to have all meetings held virtually in order to encourage participation from the public and membership where distance and time may previously have been a factor. We also continue public in-reach opportunities, as well as focused in-reach with various applicable groups on an as-needed, ongoing basis. Our commitment to feedback looping instead of “one and done” continues as a priority. Public participation is encouraged from all geographical regions with an emphasis again this past year through virtual methods on rural areas that traditionally have not been able to attend public engagement opportunities due to distance from our main state agency locations in Central Minnesota.

In addition to support from our Governor’s office in expanding participation on our ICC including direct connections with the public, we continue building relationships with Tribal partners in order to increase American Indian family, caregiver, and community engagement in all aspects of targets, data analysis, improving strategies, and evaluating progress. We also continue intentionally reaching out through listservs and other methods such as forums to our partners in early care and education, including Early Head Start and Head Start, general education and preschool programs, Regional Low Incidence providers across the state, and community resource partners being developed through the new DCYF. Also, with the new Department of Children, Youth and Families, we directly supported a number of public engagement and in-reach opportunities for feedback ranging from Part C providers and leaders to caregivers, community partners, and ICC members as part of the development and implementation of the new agency.

Making Results Available to the Public:

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

MDE and DCYF use a variety of methods to share information with the public and plan to expand our engagement mechanisms and processes utilizing in-reach feedback and opportunities becoming available through our inclusion in the Department of Children, Youth, and Families. Ongoing efforts include the MDE website and ICC webpages, listservs and GovDelivery, as well as additional MDE and DCYF department newsletters (e.g. Special Education, Early Learning Services, and partnering interagency newsletters), the Help Me Connect website, Follow Along Program statewide meetings, etc. MDE and DCYF capitalize on regular live opportunities with our ICC, the IEIC regional teams, and monthly ECSE Leadership calls. Use of online survey systems allow MDE and DCYF to schedule and track participant lists for listening sessions, share slides and additional important information on all components of the work with participants, and contact these partners for the purpose of data analysis, development of improvement strategies, and evaluation and feedback looping. Timelines for most of these mechanisms is ongoing. Through the stakeholder engagement process which we refer to as in-reach in Minnesota, we hope to learn and incorporate additional strategies and mechanisms for public access to information and active engagement opportunities. We have also enlisted the help of local programs and providers as trusted partners in helping us better reach families and community partners from the communities living and thriving across Minnesota and 11 Tribal Nations lands.

Reporting to the Public:

How and where the State reported to the public on the FFY 2022 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2022 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State’s SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2022 APR in 2024, is available.

MDE and DCYF make an annual determination on the performance of each Special Education Administrative Unit (SEAU) against specific criteria. MDE and DCYF review all SEAU performance against 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 and DCYF publicly report the performance of each SEAU by member district in the MDE Data Center website under the Special Education District Profiles section. Performance on Part C indicators 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. The URL is <https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=550>. In addition, regular updates are shared with ECSE Leadership regarding data and implementation of the SPP/APR and State Systemic Implementation Plan, as well as interactive engagement as driven by the field or the ECSE Team at MDE and DCYF. This reporting platform allows SEAU’s to view integrated dashboards of their child outcomes data. Within these data dashboards, leaders can look at performance outcomes for their programs and can also disaggregate their data by race, disability, time in service, etc. Leaders can rely on this data to look at program trends, monitor data quality issues, and support practitioners in program improvements.

A complete copy of Minnesota’s SPP and APR are located on MDE’s website on the landing page from the Governor’s Interagency Coordinating Council. The URL is <https://education.mn.gov/MDE/about/adv/active/ICC/>. The ICC also voted the SPP and APR stand as our state’s annual legislative report on Part C, which can be found each year at <https://education.mn.gov/MDE/about/rule/leg/rpt/index.htm>.

Intro - Prior FFY Required Actions

The State has not provided a description of the activities conducted to increase the capacity of diverse groups of parents. In its FFY 2023 SPP/APR, the State must provide the required information.

The State’s IDEA Part C determination for both 2023 and 2024 is Needs Assistance. In the State’s 2024 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2023 SPP/APR submission, due February 1, 2025, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2022 SPP/APR

Minnesota is grateful for OSEP’s specific feedback and guidance around increasing capacity of diverse groups of parents, as well as ensuring increased TA support. This past federal fiscal year we have worked to grow our Part C program and surrounding systems in Minnesota and Tribal Nations for children and families, as well as identified new areas of growth. Information reflecting in our actions building our abilities in these areas are specifically reflected in our Introduction, as well as in our Indicator 11, SSIP. We also hope that OSEP will find seamless weaving of supporting actions for these required actions throughout our entire SPP/APR, as we are working hard to include these critical aspects of our programming into every-day work we do for infants, toddlers, young children, and families across Minnesota and 11 Tribal Nations who share land with us.

The focus of our specific technical assistance (TA) supports during FFY 2023 came from the Center for IDEA Fiscal Reporting (CIFR), The Center for IDEA Early Childhood Data Systems (DaSy), the Early Childhood Technical Assistance Center (ECTA), the Office of Special Education Programs (OSEP) TA calls, and EDFacts. We also received TA from national early childhood partners: Zero to Three and National Help Me Grow. Minnesota’s early childhood special education team members, including the Part C Coordinator and the ECSE Supervisor/Director of Early Education attended webinars, conferences, and trainings from each of these TA providers; maintained and added membership in Communities of Practice from each of

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

these TA providers; served on planning teams and co-led Communities of Practice with DaSy and ECTA; met regularly with state liaisons and focused content leads for support with projects and in partnership with contract vendors; received focused TA for Part C Grant Application writing and budgeting, SPP/APR report writing, and Family Outcomes Survey development. Minnesota also maintained our membership in the Infant and Toddler Coordinators Association (ITCA) for additional technical support and monthly coordinator meetings, as well as active membership with Zero to Three and National Help Me Grow.

Some examples of the actions derived through FFY 2023 TA which are included throughout Minnesota's FFY 2023 SPP/APR and SSIP include the following: Completion of a community partner contract for the initial phase of our Family Outcomes Survey redesign and beginning planning for the next phase of piloting and feedback loops; implementation of learning and continuous systems-level improvements from webinars and TA around Family Outcomes Survey, Child Outcomes, data gathering and management, and SPP/APR/SSIP writing and submission; learning of new systems for federal data submission such as EDPass; implementation of learned strategies for anti-racism in Part C and better supporting families including work plan development with our regional public awareness and outreach teams; creating of a number of trauma-and-healing informed learning opportunities for Parts C and B/619 leaders and providers as well as statewide early childhood partners; completion and beginning implementation of an early childhood equity audit for local programs and regional teams; increased interagency and local community work around workforce and increasing early childhood partner collaborations; supporting the development and interpretations of a referral connection form between statewide Head Starts and Public Preschools based on our Help Me Grow Minnesota parent form.

Intro - OSEP Response

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

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	100.00%

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

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
339	344	100.00%	100%	99.42%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

3

Provide reasons for delay, if applicable.

Of the 344 records reviewed, there were two reported delays in the provision of early intervention services due to district causes. In both cases, the SEAU reported the early intervention services were not provided in a timely manner due to unknown reasons. The SEAUs had documentation to show the services started more than 30 days after the date of consent but did not have any additional information to explain the delay. In addition, there were three documented delays due to exceptional family circumstances in which the child or family was not available to provide services earlier.

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).

As determined through extensive stakeholder engagement during FFY 2021, Minnesota's definition of "timely" means services beginning not more than 30 calendar days following the date of informed written consent, unless otherwise agreed upon by the parent and district.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

In FFY 2020, MDE initiated revision of its monitoring process and contracted development of an online system for conducting an annual statewide record review for indicator data collection, moving away from MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at "end of life" for reliability, and the cyclical monitoring process used in the past, which did not differentiate monitoring based on SEAU needs. MDE completed the record review for FFY 2023 using this new online system. The process for FFY 2023 included generating a random statewide sample for each of the indicators. For Indicator C-1, the sample pulled records from the Minnesota Automated Reporting Student System (MARSS). Records were selected from the most recent statewide enrollment data for children identified as receiving Part C services. Once the sample was finalized, districts were notified and asked to complete the review of the record(s) and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. If an SEAU were to identify any noncompliance, MDE would send a formal notification of the noncompliance. The SEAU would need to correct any noncompliance consistent with OSEP QA 23-01.

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 2023 data are based on reviews of records from 122 SEAUs, comprised of 192 individual districts.

Provide additional information about this indicator (optional)

n/a

Correction of Findings of Noncompliance Identified in FFY 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

1 - Prior FFY Required Actions

None

1 - OSEP Response

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

1 - Required Actions

Because the State reported less than 100% compliance for FFY 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	90.30%

FFY	2018	2019	2020	2021	2022
Target>=	95.00%	95.00%	95.00%	95.00%	95.00%
Data	98.06%	98.17%	99.53%	96.94%	97.46%

Targets

FFY	2023	2024	2025
Target >=	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

Please see Introduction for additional stakeholder engagement information. We are hopeful as we build new partnerships through MDE and DCYF programming in horizontal and vertical alignment, that we will build upon sharings from families and caregivers around virtual service delivery methodology, immigration needs across Minnesota, continued increased referrals, and what "natural environments" really mean for families who receive supports from our complex interagency early childhood systems. For many families, caregivers, and providers, natural environments have expanded to include additional places infants and toddlers spend their time made possible through virtual service delivery methods, and increased community and cultural responsiveness. Engagement and in-reach also continue to show that expansion of "family" includes caregivers for Minnesota's and Tribal Nations' Part C families (e.g. grandparents, kinship, in-home child-care) and "natural environments" includes the places infants and toddlers served through Part C spend time with each of their caregivers. In FFY 2022 we received a lot of feedback through our Part C American Rescue Plan Funds Family Engagement grants about what "natural environment" means for families who are from communities historically and currently made to be most marginalized, especially when their providers are predominantly from the dominant white culture (e.g. not always feeling comfortable having providers come into their homes who do not show value for their lifeways and cultures). As we settle into the DCYF, we plan to expand in-reach around this topic and will report actions that come from this in FFY 2024, including a focus on Native families who are underrepresented in Part C often due to discomfort having colonized providers coming into their natural environments before relationships are present.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	6,248
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Total number of infants and toddlers with IFSPs	6,410

FFY 2023 SPPI/APR Data

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
6,248	6,410	97.46%	95.00%	97.47%	Met target	No Slippage

Provide additional information about this indicator (optional).

n/a

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

Targets remain as set during the FFY 2020 SPP/APR process. Please see Introduction for additional Stakeholder Input information.

Historical Data

Outcome	Baseline	FFY	2018	2019	2020	2021	2022
A1	2018	Target>=	54.60%	50.50%	50.50%	50.60%	50.70%
A1	50.35%	Data	50.35%	50.12%	49.90%	49.88%	51.84%
A2	2018	Target>=	54.00%	48.50%	48.50%	49.50%	50.50%
A2	48.37%	Data	48.37%	48.38%	48.82%	47.49%	47.12%
B1	2018	Target>=	60.70%	55.90%	55.90%	60.00%	60.10%
B1	55.80%	Data	55.80%	57.61%	55.57%	55.79%	57.22%
B2	2018	Target>=	47.50%	41.80%	41.80%	42.30%	43.30%
B2	41.67%	Data	41.67%	43.43%	41.79%	40.52%	40.04%
C1	2018	Target>=	62.40%	57.80%	57.80%	57.90%	58.00%
C1	57.74%	Data	57.74%	57.83%	59.12%	56.27%	55.72%
C2	2018	Target>=	55.00%	50.10%	50.10%	51.10%	52.10%
C2	49.99%	Data	49.99%	50.69%	50.11%	48.90%	47.74%

Targets

FFY	2023	2024	2025
Target A1>=	50.80%	50.90%	51.00%
Target A2>=	51.50%	52.50%	53.50%
Target B1>=	60.20%	60.30%	60.40%
Target B2>=	44.30%	45.30%	46.30%
Target C1>=	58.10%	58.20%	58.30%
Target C2>=	53.10%	54.10%	55.10%

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	22	0.59%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,343	35.94%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	632	16.91%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	809	21.65%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	931	24.91%

Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in	1,441	2,806	51.84%	50.80%	51.35%	Met target	No Slippage

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program							
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	1,740	3,737	47.12%	51.50%	46.56%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	30	0.80%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,384	37.04%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	909	24.32%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	897	24.00%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	517	13.83%

Outcome B	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,806	3,220	57.22%	60.20%	56.09%	Did not meet target	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	1,414	3,737	40.04%	44.30%	37.84%	Did not meet target	Slippage

Provide reasons for B1 slippage, if applicable

Minnesota reviewed data submissions including COS ratings, demographic make-up of population served and exiting, as well as the percentage of children that were receiving services 6 months or more. All of these data points were compared to FFY 2022 data points. Additionally, Minnesota reviewed data quality and completeness compared to prior years. As it relates to demographic categories of race/ethnicity, Minnesota saw an increase of less than 1% of children identifying as Asian from FFY 2022 to FFY 2023. Additionally, the percentage of children identifying as Black, 2 or more races, and American Indian decreased less than 1%. Minnesota continues to see that our BIPOC children generally enter the system a few months later (therefore on average are receiving less months of services than their white peers). In analyzing the progress categories by race for children exiting Part C services, our BIPOC children represented a much smaller percentage of children who had improvement to the level of their peers or maintained close to their same-aged peers. With BIPOC children representing approximately 36% of our state Part C child population, it is not surprising that the impact had would be slippage. This is especially the case as it relates to acquisition and use of knowledge as we know that children in MN have a disproportionate impact in access to resources and enrichment opportunities. Minnesota also acknowledges that children receiving Part C services and exiting this year were impacted by COVID in terms of access, opportunity and socialization in the early years of their development.

Provide reasons for B2 slippage, if applicable

Minnesota reviewed data submissions including COS ratings, demographic make-up of population served and exiting, as well as the percentage of children that were receiving services 6 months or more. All of these data points were compared to FFY 2022 data points. Additionally, Minnesota reviewed data quality and completeness compared to prior years. As it relates to demographic categories of race/ethnicity, Minnesota saw an increase of less than 1% of children identifying as Asian from FFY 2022 to FFY 2023. Additionally, the percentage of children identifying as Black, 2 or more races, and American Indian decreased less than 1%. Minnesota continues to see that our BIPOC children generally enter the system a few months later (therefore on average are receiving less months of services than their white peers). In analyzing the progress categories by race for children exiting Part C services, our BIPOC children represented a much smaller percentage of children who had improvement to the level of their peers or maintained close to their same-aged peers. With BIPOC children representing approximately 36% of our state Part C child population, it is not surprising that the impact had would be slippage. This is especially the case as it relates to acquisition and use of knowledge as we know that children in MN have a

disproportionate impact in access to resources and enrichment opportunities. Minnesota also acknowledges that children receiving Part C services and exiting this year were impacted by COVID in terms of access, opportunity and socialization in the early years of their development.

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	23	0.62%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,366	36.55%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	644	17.23%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	954	25.53%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	750	20.07%

Outcome C	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,598	2,987	55.72%	58.10%	53.50%	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	1,704	3,737	47.74%	53.10%	45.60%	Did not meet target	Slippage

Provide reasons for C1 slippage, if applicable

Minnesota reviewed data submissions including COS ratings, demographic make-up of population served and exiting, as well as the percentage of children that were receiving services 6 months or more. All of these data points were compared to FFY 2022 data points. Additionally, Minnesota reviewed data quality and completeness compared to prior years. As it relates to demographic categories of race/ethnicity, Minnesota saw an increase of less than 1% of children identifying as Asian from FFY 2022 to FFY 2023. Additionally, the percentage of children identifying as Black, 2 or more races, and American Indian decreased less than 1%. Minnesota continues to see that our BIPOC children generally enter the system a few months later (therefore on average are receiving less months of services than their white peers). In analyzing the progress categories by race for children exiting Part C services, our BIPOC children represented a much smaller percentage of children who had improvement to the level of their peers or maintained close to their same-aged peers. With BIPOC children representing approximately 36% of our state Part C child population, it is not surprising that the impact had would be slippage. This is especially the case as it relates to appropriate behavior to meet one's needs as we know that children in MN have a disproportionate impact in access to resources and enrichment opportunities. MN also acknowledges that our current workforce does not even remotely represent the families and children served in MN and that rater bias as it relates to understanding the cultural nuances of activities that might demonstrate the skills in this area is likely prevalent.

Provide reasons for C2 slippage, if applicable

Minnesota reviewed data submissions including COS ratings, demographic make-up of population served and exiting, as well as the percentage of children that were receiving services 6 months or more. All of these data points were compared to FFY 2022 data points. Additionally, Minnesota reviewed data quality and completeness compared to prior years. As it relates to demographic categories of race/ethnicity, Minnesota saw an increase of less than 1% of children identifying as Asian from FFY 2022 to FFY 2023. Additionally, the percentage of children identifying as Black, 2 or more races, and American Indian decreased less than 1%. Minnesota continues to see that our BIPOC children generally enter the system a few months later (therefore on average are receiving less months of services than their white peers). In analyzing the progress categories by race for children exiting Part C services, our BIPOC children represented a much smaller percentage of children who had improvement to the level of their peers or maintained close to their same-aged peers. With BIPOC children representing approximately 36% of our state Part C child population, it is not surprising that the impact had would be slippage. This is especially the case as it relates to appropriate behavior to meet one's needs as we know that children in MN have a disproportionate impact in access to resources and enrichment opportunities. MN also acknowledges that our current workforce does not even remotely represent the families and children served in MN and that rater bias as it relates to understanding the cultural nuances of activities that might demonstrate the skills in this area is likely prevalent.

FFY 2023 SPP/APR Data

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	4,935
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.	1,357

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

Question	Number
Number of infants and toddlers with IFSPs assessed	3,737

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

In Minnesota, LEAs can use a variety of sources to inform ratings on each child's COS: norm-referenced tools administered as part of a child's initial evaluation, parent information or report, and professional observations. All of the sources are used to complete an age-anchored, criterion-referenced assessment tool. This work is informed and supported by the careful use of crosswalk documents developed by the Early Childhood Outcomes Center. In addition, MDE requires that assessments be made within a month of a child's program entry and/or exit date. And, when a child is exiting Part C and transitioning into early childhood special education services under Part B/619, the child's Part C exit rating previously became their Part B/619 entrance rating. Districts are able to make a determination as to whether or not the Exit C rating is appropriate for use as an Entry B/619 rating.

Provide additional information about this indicator (optional).

The criteria for defining "comparable to same-aged peers" when using Early Childhood Outcomes Center's (ECO's) Child Outcomes Summary Form (COS) process has been defined as a child who has been assigned a score of 6 or 7 on the COS Form.

CLARIFICATION:

Minnesota had a total of 4,935 students that exited from Part C services during the FFY23 reporting period. There were a significant number of students that were not in services for at least 6 months prior to exiting (1357) which is attributed to the delays in referrals and families not accessing services and programs during COVID and the following 2 years. For this reporting period, programs reported COS outcomes on 3,833 students (including some that were not in service for at least 3 months) but 96 of those students did not have complete data reported. Minnesota's total number of reported and complete exiting student outcome data was 3,737 making the denominator in its calculation of the percentage of infants and toddlers who were functioning within age expectation different from the total number of students exiting part C and having been in services for at least 6 months different from each other. Minnesota chose to include all reported, complete data in its analysis.

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2018	2019	2020	2021	2022
A	2013	Target>=	91.50%	92.00%	90.30%	90.60%	91.00%
A	89.22 %	Data	92.58%	91.09%	82.97%	87.41%	85.40%
B	2013	Target>=	94.00%	94.20%	93.40%	93.60%	93.80%
B	92.58 %	Data	95.35%	93.87%	88.36%	90.48%	91.97%
C	2013	Target>=	91.50%	91.80%	90.60%	90.90%	91.20%

C	89.80 %	Data	94.21%	92.00%	87.05%	90.48%	90.69%
---	---------	------	--------	--------	--------	--------	--------

Targets

FFY	2023	2024	2025
Target A>=	91.50%	92.00%	92.50%
Target B>=	94.00%	94.20%	94.40%
Target C>=	91.50%	91.80%	92.10%

Targets: Description of Stakeholder Input

Targets remain as set during the FFY 2020 SPP/APR process. In-reach with families, community partners, interpreters and cultural liaisons, ECSE leaders and providers, and early childhood partners in FFY 2021 demonstrated the need to redesign our Family Outcomes Survey and process as demonstrated through family members' sharings and demographic data including multiple years of response rates related to political status, race, and ethnicity and geographic regions. Targets set through this same intensive outreach were set to reflect the time this work would take over multiple years. Minnesota has made progress during FFY 2023 on redesigning the procedures associated with this collection as well as the content of the survey itself all through multiple opportunities for in-reach with families, cultural liaisons and interpreters, community partners, early childhood partners, and local program providers and leaders. Minnesota has been utilizing TA support through DaSY and ECTA and a contract through Wilder Foundation (referenced in the Introduction including weblink) for developing a new survey to meet this indicator's requirements in ways that better center each and every family in Minnesota and the 11 Tribal Nations who share land with us, and that will also better inform early intervention providers and programs of the necessary adjustments and supports that best meet the needs of children and their families. Minnesota is committed to continuing in-reach and feedback looping with the groups participating in Family Outcomes processes and development over the coming two years as we move into piloting and continuous improvement phases.

FFY 2023 SPP/APR Data

The number of families to whom surveys were distributed	4,935
Number of respondent families participating in Part C	493
Survey Response Rate	9.99%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	433
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	489
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	456
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	489
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	448
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	489

Measure	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	85.40%	91.50%	88.55%	Did not meet 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)	91.97%	94.00%	93.25%	Did not meet 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)	90.69%	91.50%	91.62%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

Response Rate

FFY	2022	2023
Survey Response Rate	16.13%	9.99%

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

Percentage +/- 4% metric was used and the comparison data utilized was child count data for children ages 0, 1, and 2 years of age within a school year.

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

Of the records that we are able to disaggregate, the demographic analysis of race indicates the following: 64% of Part C children exiting services were indicated to be white, while this group made up 84.72% of returned surveys. Another rather large discrepancy in return rate is for children identified as Black or African American for which they represented 10.63% of children exiting early intervention services but only 8.99% of returned surveys as well as American Indian with a return rate of 0.90% compared to an exiting percentage of 1.57%. A similar discrepancy is found with the return rate of children identifying as Hispanic/Latine compared to those that are exiting the program, 12.86% and 11.24% respectively. Another area of discrepancy in this year's data is for children identified as Asian. The percentage of children exiting services and identifying as Asian is 4.95% and yet made up only 2.92% of the returned surveys.

While the rates of return by race/ethnicity have some minor discrepancies from percentage of children served, it should be noted that for question 1, Hispanic and Black families reported knowing their rights at a rate higher than the statewide average. Across all three questions, white families indicated a positive outcome an average of 1-2% less than the statewide average. Additionally, with a very small return rate for our American Indian families, we cannot reliably consider the outcomes for each of the questions related to the statewide averages, but it is important to note that the majority of our Native American families reside in Greater/rural Minnesota.

Additionally, we have many districts with varying methods of administering the survey that impacts the rate of return. All districts are currently using a paper and mail-in form, but the timing and who leads the process varies dependent on local program decision. While this is not correlating with geographical area and/or school district or cooperative organization directly, it is still relevant in the redesign of not only the survey itself, but also the way in which it is administered. The new survey will also allow for families an opportunity to self-identify the race, ethnicity, and home language for their child on the survey itself. This will afford the state the opportunity to ensure that the data representing demographics of the children and family served are valid and reliable, since there are still processes and systems in use in Minnesota that either require a provider to determine race/ethnicity for a child if the family does not share this information, and/or when race/ethnicity is left blank, "white" is sometimes the default fill-in answer. We are also working to honor needs identified through relationships with Tribal Nation and Native partners that being Indigenous is not a "race" or "ethnicity", but rather an identity tied to place and a political designation.

In addition to our continued dedication to ensuring families responding to the Family Outcomes Survey in Minnesota and the 11 Tribal Nations who share land with us is representative of each and every community we serve, we have also determined geographic location to be a significant factor in Minnesota for our response rates. Geographic location not only has come up both organically and formally through a variety of in-reach opportunities with families and caregivers, providers, and early childhood partners, but we also know from a plethora of national research that "race and place" continue being direct determiners of a child's and family's ability to meet their self-determined outcomes in Part C and beyond. In reviewing our limited data set, we were able to organize categories of commonality as it relates to locations around Minnesota. We were particularly interested in the representativeness of the rate of return of surveys.

In Minnesota, our statewide 0-4 census, indicates 62.49% of children are white. However, when we look at our metropolitan economic development region, our white children receiving early intervention services make up just 51.30% of children and Hispanic and Black children making up 14.16% and 17.06% respectively. With our top 5 districts in child enrollment located within the metropolitan region with a rate of 51.30% white, and the percentage of returned surveys being from families of children identifying as white being 84.72%, it can be determined that we have a disproportionate rate of return in our most diverse Part C programs. In analyzing the percentage of children receiving services by economic development regions and comparing those with the surveys returned by economic development region, Regions 6 and 8 have our highest percentage of Hispanic families but have a return rate that is half of what their population percentage of children served is. Additionally, economic development regions 3 and 5 and 7 have the highest percentage of children at almost 82% (consistent with state demographics) identifying as white.

In summary, while the disparities in overall survey return rates as it relates to the racial demographics of children receiving services in and exiting from our Part C program are relatively small, we do have significant demographic differences across our state economic development regions. The differences in demographic make-up, local program type, scarcity of resources, and workforce impacts are all very real and impact the experiences that children and their families have. Minnesota's local control (the oneness of program implementation being largely in the purview of the individual local education agencies), while leaving a significant opportunity for local programs to be able to be responsive to the individual needs of their community, also results in inconsistencies with access and opportunity. Additionally, we need to ensure that we are getting a more representative sample across geography AND race as it relates to program support feedback in meeting the needs of young children and their families.

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

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

NO

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

Minnesota just wrapped up an extensive two-year process of intensive technical assistance activities addressing our Family Outcomes Survey process, including the survey content and format, further development of family/caregivers supports to ensure a culturally supportive common language, that the intentions addressed by this indicator for rights and expectations are universally clear, and that turn-around reporting to school districts is available and meaningful. We have now entered into the phase of reconciling the feedback and recommendations for the new survey. Family/caregivers completing the survey will have the option to self-identify race and ethnicity as well as home language and also political status for American Indian families, which will afford us the ability to compare to data reported by school districts for each of the individual children. We are also working to identify what additional ways the survey will be distributed (including electronic, trusted community partners, and oral language), and how answers can be captured that will better align with each and every community's knowledge-sharing that we serve in Minnesota and the 11 Tribal Nations who share land with us. These methods are being determined through family and community in-reach through our contract with Wilder Foundation. These changes will help ensure a more meaningful survey and process for families and providers and also ensure that we have accurate demographic information for more valid and reliable data analysis.

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

The new survey currently in development will allow for families another opportunity to self-identify the race, ethnicity and home language for their child on the survey itself. Additionally, recommendations that will be included in the new survey and process include: a new survey design with varied question types and open-ended questions with clearer groupings; clarifying the purpose to families in culturally relevant ways; using multiple modalities for both dissemination and retrieval of the family surveys (e.g. continue paper and add electronic, text, QR codes, phone/live, community trusted partner support, and an oral ability to share); increasing awareness about the survey through more relevant and consistent communication and reminders; creating a meaningful feedback loop for families and programs; and discussing ways to honor families' requests to share provider-specific feedback through other aligned methods. This will afford the state the opportunity to ensure that the data representing demographics of the children and family served are valid and reliable. Additionally, guidance will be provided to districts on the methods of administration that may include interpretation or liaison services in completion and mechanisms to orally respond to the survey in addition to only a paper method at this current time. Our intensive TA and contract with the Wilder Foundation was underway through September of 2024 with final recommendations of survey and content made available for further community in-reach before finalizing the design and operationalizing of the survey.

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

Minnesota has been very aware (through community and family in-reach as well as engagement with practitioners) that many of the survey questions that are asked of families are not culturally relevant or understood in the intent meant by Indicator 4 and therefore are biased in their presentation. For example, the concept of "rights" has varied understanding across the cultures served in Minnesota, including families who may be currently undocumented families. In response to these concerns, we are working to redesign the survey, create more relevant and timely feedback loops, and ensure that families are empowered in advocating for the priorities they have for their children's growth and development.

Provide additional information about this indicator (optional).

CLARIFICATION:

Minnesota recognizes that there are significant impacts to the usability of the family outcome survey data based on the low return rates as well as discrepancies in survey's returned and the demographics of children and families in our Part C programs. In Minnesota we have urban areas that include concentrations of diverse demographic categories and with those urban schools we have a disproportionate under representation of survey response rate. Minnesota is in the process of rewriting and revamping the administration of the family outcomes survey in the effort to improve overall response rate, greater representation of returns across race and geographic location. With commiserate and improved response rates, Minnesota will gain better insights into the experiences of our youngest learners and their families in order to support improved practices in the workforce.

4 - Prior FFY Required Actions

In the FFY 2023 SPP/APR, the State must report whether its FFY 2023 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.

Additionally, in the FFY 2023 SPP/APR, the State must include race/ethnicity and at least one other demographic category approved through the stakeholder input process in its analysis of the extent to which the response data are representative of the demographics of infants and toddlers enrolled in the Part C program, as required by the Measurement Table.

Response to actions required in FFY 2022 SPP/APR

Minnesota has responded to the required action within the body of the indicator demographic analysis. Minnesota has identified geography as the additional demographic category. Geography and racial analysis was provided as part of the FFY 2022 APR. Minnesota is a very demographically disparate state as it relates to geography context. For example, Minnesota's metropolitan counties have a 51.30% white demographic of children exiting Part C services while regions in Greater Minnesota have upwards of 80% of children exiting Part C services are white while the demographics in those regions are consistent with the overall 0-4 census populations in the respective regions. Additionally, there is disproportionality in rates of return across the regions and racial categories.

4 - OSEP Response

The State did not analyze the response rate to identify potential nonresponse bias to promote responses from a broad cross section of families that received Part C services, as required by the Measurement Table.

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

4 - Required Actions

In the FFY 2024 SPP/APR, the State must report whether its FFY 2024 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. In addition, in the FFY 2024 SPP/APR, the State must analyze the response rate to identify potential nonresponse bias and the steps taken to reduce any identified bias and promote response from a broad cross section of families that received Part C services, as required by the Measurement Table.

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100.

Instructions

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

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.46%

FFY	2018	2019	2020	2021	2022
Target >=	1.20%	1.21%	1.00%	1.02%	1.04%
Data	0.93%	0.94%	0.71%	0.82%	0.85%

Targets

FFY	2023	2024	2025
Target >=	1.06%	1.08%	1.10%

Targets: Description of Stakeholder Input

Targets remain as set during the FFY 2020 SPP/APR process. (See Introduction for additional stakeholder engagement information and activities.) Minnesota continues its work on engaging families, caregivers, community members, providers, leaders, early childhood partners, cultural liaisons, and regional teams to ensure we continue to do better for each and every child and family in Minnesota around "child find" and public awareness and outreach as the initial connector for families to early childhood special education in Minnesota and the 11 Tribal Nations who share land with us. This year we added a focus in our work and in-reach with the regional teams on Newborn Abstinence Syndrome (NAS) and the importance of this in public awareness and outreach work, particularly for Birth-to-1 referral connections.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 1 with IFSPs	582
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 1	63,637

FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
582	63,637	0.85%	1.06%	0.91%	Did not meet target	No Slippage

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

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

Minnesota did not have slippage for Indicator 5 in FFY 2023 and therefore chose not to include this information, as it was clarified by OSEP in national TA calls and in written information, as well as during EDFacts TA calls, to be required for FFY 2023 only if there was slippage.

Provide additional information about this indicator (optional)

n/a

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

6 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	1.56%

FFY	2018	2019	2020	2021	2022
Target >=	2.82%	3.00%	2.53%	2.60%	2.68%
Data	2.94%	2.96%	2.41%	2.84%	3.14%

Targets

FFY	2023	2024	2025
Target >=	2.75%	2.82%	3.00%

Targets: Description of Stakeholder Input

Indicator 6 actions were a continued priority for Minnesota engagement and in-reach. At the time of our FFY 2020-2025 target setting in-reach, participants shared about ensuring the definition of "family" is expanded to include additional caregivers such as Early Head Start and Head Start, childcare providers, community and ceremonial partners, extended-family for communities that center multi-generational care for infants and young children, which is reflected throughout our report. During our ARP Act family Engagement and District/Cooperative grants in FFY 2022, we learned more about the importance of trust-building and relationships that align with communities' ways of sharing knowledge in order to better support families and caregivers through this critical first connection into the early childhood special education process, so we have continued meaningful in-reach and are working to develop feedback looping for ongoing in-reach in FFY 2023 and forward. Minnesota continues its work on engaging families, caregivers, community members, providers, leaders, early childhood partners, cultural liaisons, and regional teams in ensuring we are continuing to do better for each and every child and family in Minnesota around "child find" and public awareness and outreach.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 3 with IFSPs	6,410
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 3	192,520

FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
6,410	192,520	3.14%	2.75%	3.33%	Met target	No Slippage

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

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

Minnesota did not have slippage for Indicator 6 in FFY 2023 and therefore chose not to include this information, as it was clarified by OSEP in national TA calls and in written information, as well as during EDFacts TA calls, to be required for FFY 2023 only if there was slippage.

Provide additional information about this indicator (optional).

n/a

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	92.94%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	96.22%	87.84%	92.94%	90.48%	89.55%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
219	325	89.55%	100%	85.23%	Did not meet target	Slippage

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

Provide reasons for slippage, if applicable.

Minnesota reports slippage from the FFY 2022 rate of 89.55% to the FFY 2023 rate of 85.23%. This is a decrease of 4.32%. Of the 325 records that were reviewed in FFY 2023, 219 were found in compliance with this indicator and 58 were found not in compliance due to family reasons. Forty-eight records were identified with noncompliance due to district causes in FFY 2023.

The main reasons identified for not meeting timelines in FFY 2023 were scheduling issues and staffing limitations. Staffing shortages have impacted education in many ways. As SEAs struggle to hire teachers, the existing teachers are stretched thin and unable to meet all their obligations within the required timelines. The limited availability of staff also makes it difficult to schedule meetings with families. MDE continues to work with SEAs to discuss meeting options, such as virtual or telephone attendance, as well as ways to improve processes to complete evaluations and IFSP meetings in a timely manner. MDE has developed trainings to ensure staff understand the requirements related to this indicator and works with the Early Education Division of MDE and the Early Learning Services Division of Department of Children, Youth and Families (DCYF) to ensure SEAs have the supports necessary to meet compliance.

Number of documented delays attributable to exceptional family circumstances

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

58

Provide reasons for delay, if applicable.

Of the 325 initial evaluations, assessments and IFSP meetings in the sample, 106 were not completed within the required 45-day timeline. A total of 58 initial evaluations, assessments and IFSP meetings were late due to documented delays attributable to exceptional family circumstances. Twenty of those evaluations were identified as late due to a delay in obtaining parental consent. Thirty-eight of the 58 were identified as late due to exceptional caregiver circumstances such as child or caregiver illness or family unavailability for various reasons. Forty-eight evaluations, assessments and initial IFSP meetings were determined to be late due to district causes. Comments indicate the lateness of these evaluations, assessments and initial IFSP meetings were primarily due to scheduling issues; roughly 50% identified this as the reason for not meeting the timeline. Approximately 25% were late due to staffing limitations. Other reasons identified include delay due to screening, staff illness, and difficulty scheduling interpreters or evaluators for a family.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

In FFY 2020, MDE initiated revision of its monitoring process and contracted development of an online system for conducting an annual statewide record review for indicator data collection, moving away from MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at "end of life" for reliability, and the cyclical monitoring process used in the past, which did not differentiate monitoring based on SEA needs. MDE completed the record review for FFY 2023 using the new web-based monitoring system, Stepwell MN. The process for FFY 2023 included generating a random statewide sample for each of the indicators. For Indicator C-7, the sample pulled records from the Minnesota Automated Reporting Student System (MARSS) for children newly identified as receiving Part C services. Once the sample was finalized, SEAs were notified and asked to complete the review of the record(s) and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. SEAs with identified noncompliance were then formally notified of the noncompliance. The SEA would need to correct any noncompliance consistent with OSEP QA 23-01.

Data for this indicator are gathered from examining records of children determined eligible for Part C services and determining whether the evaluation, assessment and initial IFSP meeting was completed within 45 calendar days. The FFY 2023 data are based on reviews of records from 122 SEAs, comprised of 197 individual districts.

Provide additional information about this indicator (optional).

Please see Introduction for additional stakeholder engagement information. Suggestions from ongoing in-reach around 45-day timeline targets and actions include providing cultural liaisons not just interpreters for parents who speak Heritage languages; finding ways to be timely while emphasizing relationships with parents and acknowledging additional ways families function within time concepts; finding ways to enhance supportive accountability for districts; and continuing to use virtual meetings to help with timeliness and full team and parent participation. These suggestions and more are in-process as Minnesota transitioned to a co-lead agency state as of July 1, 2024.

Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
16	16	0	0

FFY 2022 Findings of Noncompliance Verified as Corrected

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

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE has revised its approach to demonstrating correction of noncompliance to include a subsequent review of additional data for all SEAs with identified noncompliance and not just those with noncompliance deemed to be systemic or chronic. As part of this revised approach, MDE examined each of the findings of noncompliance from FFY 2022 and reviewed updated data from the SEA to verify correct implementation of the regulatory requirements. The 28 noncompliant records from FFY 2022 resulted in findings of noncompliance for 16 SEAs. Each SEA was asked to review randomly selected records to demonstrate correction and submit paper reviews to MDE for regulatory compliance. Submitted documentation confirmed that all 16 of the SEAs were correctly implementing the regulatory requirements. MDE has reviewed updated data from SEAs with identified noncompliance in FFY 2022 and verified that each SEA is correctly implementing 34 CFR § 303.310.

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

The data collection for the FFY 2022 record review took place using the Stepwell MN online system. Stepwell MN includes a Student Level Correction component that allows for MDE to track the correction of all individual children noncompliance. For post-referral timelines, when record reviews were completed, the SEA provided the date of the referral and the date the evaluation, assessments and initial IFSP meeting were completed. This allowed MDE to verify that the actions had been completed, although they may have been late. If the date of the evaluation, assessments and the initial IFSP meeting was missing, MDE required the SEA to submit the completed IFSP to demonstrate the evaluation and assessments and IFSP meeting had subsequently been completed, although late. If the child was no longer within the jurisdiction of the SEA, the SEA would submit to MDE the reason (e.g., child moved) and the date of the occurrence to release the SEA from further demonstration of correction for that specific child. Based on a review

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

of the data, MDE verified all of the evaluations, assessments and initial 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, assessments and IFSP meetings, although late, for any child whose initial evaluation and assessment and IFSP meeting was not timely unless the child was no longer within the jurisdiction of the SEAU. All correction of individual child record noncompliance was completed within the one-year timeframe.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

7 - Prior FFY Required Actions

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

Response to actions required in FFY 2022 SPP/APR

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE has revised its approach to demonstrating correction of noncompliance to include a subsequent review of additional data for all SEAUs with identified noncompliance and not just those with noncompliance deemed to be systemic or chronic. MDE verified that all SEAUs with identified noncompliance are correctly implementing the specific regulatory requirements as described in the section "Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements" above. MDE also ensured each individual case of noncompliance has been corrected consistent with OSEP QA 23-01 as described in the section "Describe how the State verified that each individual case of noncompliance was corrected" above.

7 - OSEP Response

7 - Required Actions

Because the State reported less than 100% compliance for FFY 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	92.42%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	98.00%	94.74%	92.42%	83.91%	80.34%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
231	290	80.34%	100%	87.24%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

22

Provide reasons for delay, if applicable.

The results of the record reviews indicated 22 children had a late transition conference due to exceptional caregiver circumstances or the unavailability of the caregiver. There were seven records in which a timely transition conference was held, but the transition steps and services were not sufficiently documented within the IFSP. District comments indicated for many records the transition steps and services were discussed at a transition conference or IFSP meeting, but the IFSP was not updated to document the conversations. A few comments noted that the IFSP did not include transition steps and services because the child was not deemed eligible or potentially eligible for Part B services. MDE has clarified with those SEAU that the transition steps and services are required to be documented in the IFSP for all children exiting Part C, whether they are going on to Part B or not.

There were 13 records cited because the IFSPs appropriately documented transition steps and services, but the transition conference did not take place at least 90 days before the child's third birthday. There were 17 records that were cited because the child did not receive a timely transition conference and the IFSP did not include documentation of the transition steps and services. MDE analyzed the information submitted with regard to the reason why the transition conference was not held within the required timeframe. Of the thirty records without a timely transition conference, four records identified the reason for delay as scheduling issues. Eleven records indicated unknown reasons for the delay suggesting the records did not have sufficient detail to determine why the district failed to meet the timeline. Twelve records indicated the district did not hold a transition conference. No explanation was provided as to why the conferences were not held. The remaining three transition conferences were late due to staffing limitations.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

In FFY 2020, MDE initiated revision of its monitoring process and contracted for development of an online system to conduct an annual statewide record review for indicator data collection, moving away from MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at "end of life" for reliability, and the cyclical monitoring process used in the past, which did not differentiate monitoring based on SEAU needs. MDE completed the record review for FFY 2023 using the new web-based monitoring system, Stepwell MN. The process for FFY 2023 included generating a random statewide sample for each of the indicators. For Indicator 8A, the sample pulled records, based on the most recent statewide enrollment data, from the Minnesota Automated Reporting Student System (MARSS) for children identified as exiting Part C services. Once the sample was finalized, SEAU were notified and required to complete the record reviews and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. If an SEAU identified noncompliance, MDE sent a formal notification of the noncompliance; the SEAU would need to correct any noncompliance consistent with OSEP QA 23-01.

Data for this indicator are gathered from examining records of children exiting Part C services and reviewing the IFSP to ensure the inclusion of transition steps and services and the timely completion of the transition conference. The FFY 2023 data are based on reviews of records from 121 individual districts representing 96 SEAU.

Provide additional information about this indicator (optional).

Please see Introduction for additional stakeholder engagement information. Despite not having to set targets for Indicator 8A, 8B, and 8C during engagement in FFY 2021, all three outcomes of Indicator 8 were part of the in-reach with families, community partners, and Tribal Nations partners and continue to be prioritized in our work. Please note that the information included here includes feedback for all three of the Indicator 8 outcomes – they were discussed all together.

Feedback from participants in FFY 2021 that remains relevant includes challenges for families/caregivers as the family-centered Part C shifted to

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

educational needs of the child in Part B and ensuring families/caregivers understand different expectations for both children and families/caregivers in both settings; supporting systems to honor cultures and beliefs in a classroom instead of home/natural environments; and maintaining close relationships with families/caregivers and collaborating with community partners, cultural liaisons, Head Start, and other trusted partners. Another factor shared in FFY 2021 that is ever relevant in FFY 2023 is the impact a stretched workforce has on these components of Part C programming and our early childhood partners.

CLARIFICATION:

Minnesota mistakenly entered “No” to the prompt: “Data include only those toddlers with disabilities exiting Part C at age 3 for whom the Lead Agency was required to develop an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday.” This was due to Minnesota using a sampling method in monitoring process and a misunderstanding of the question asked. Minnesota has clarified that this should be “yes” and has marked that accordingly.

Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
26	26	0	0

FFY 2022 Findings of Noncompliance Verified as Corrected

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

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE has revised its approach to demonstrating correction of noncompliance to include a subsequent review of additional data for all SEAs with identified noncompliance and not just those with noncompliance deemed to be systemic or chronic. As part of this revised approach, MDE examined each of the findings of noncompliance from FFY 2022 and reviewed updated data from the SEA to verify correct implementation of the regulatory requirements. The 26 SEAs with identified noncompliance in FFY 2022 were asked to review subsequent records in FFY 2023. Those records were chosen randomly and submitted to MDE via a paper review for regulatory compliance. Submitted documentation confirmed that all SEAs were correctly implementing the regulatory requirements. MDE has thus reviewed updated data from each of the SEAs with identified noncompliance in FFY 2022 and verified that each SEA is correctly implementing the regulatory requirements.

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

The data collection for the FFY 2022 record review took place using the Stepwell MN online system. Stepwell MN includes a Student Level Correction component that allows for MDE to track the correction of all individual child noncompliance. For Part C to Part B transition, when record reviews were completed, the SEA provided the date the transition conference was held. This allowed MDE to verify that the conference had been completed, although it may have been late. If the transition conference was not held, MDE required the SEA to verify the successful transition to Part B. If the children were no longer within the jurisdiction of the SEA, the SEA was required to submit to MDE the reason (e.g., child moved) and the date of the occurrence to release the SEA from further demonstration of correction for that specific child. Based on a review of the data, MDE has verified that all records with identified noncompliance in FFY 2022 were corrected and the SEAs are now in compliance or the child is no longer within the jurisdiction of the SEA, consistent with OSEP QA 23-01. All correction of individual child record noncompliance was completed within the one-year timeframe.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

8A - Prior FFY Required Actions

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

Response to actions required in FFY 2022 SPP/APR

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE has revised its approach to demonstrating correction of noncompliance to include a subsequent review of additional data for all SEAs with identified noncompliance and not just those with noncompliance deemed to be systemic or chronic. MDE verified that all SEAs with identified noncompliance are correctly implementing the specific regulatory requirements as described in the section “Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements” above. MDE also ensured each individual case of noncompliance has been corrected consistent with OSEP QA 23-01 as described in the section “Describe how the State verified that each individual case of noncompliance was corrected” above.

8A - OSEP Response

8A - Required Actions

Because the State reported less than 100% compliance for FFY 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	100.00%

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

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
290	290	100.00%	100%	100.00%	Met target	No Slippage

Number of parents who opted out

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

0

Provide reasons for delay, if applicable.

n/a

Describe the method used to collect these data.

The method used to collect data for this indicator for FFY 2023 began with generating a random statewide sample of children exiting Part C services. For Indicator 8B, the sample pulled records from the most recent statewide enrollment data reported in the Minnesota Automated Reporting Student System (MARSS) for children identified as exiting Part C services. Once the sample was finalized, SEAs were notified and required to complete an online review using the new Stepwell MN system and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. SEAs with identified noncompliance were then formally notified of the noncompliance. No review questions were asked specific to this indicator as Education is the lead agency for both Part C and Part B services in Minnesota; the notification of the LEA is a seamless process. The FFY 2023 data is comprised of reviews from 121 individual districts representing 96 SEAs.

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.

In FFY 2020, MDE initiated revision of its monitoring process and contracted for development of an online system to conduct an annual statewide record review for indicator data collection, moving away from MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at "end of life" for reliability, and the cyclical monitoring process used in the past, which did not differentiate monitoring based on SEA needs. MDE completed the record review for FFY 2023 using the new web-based system, Stepwell MN. The process for FFY 2023 included generating a random statewide sample for each of the indicators. For Indicator 8B, the sample pulled records, based on the most recent statewide enrollment data, from the Minnesota Automated Reporting Student System (MARSS) for children identified as exiting Part C services. Once the sample was finalized, SEAs were notified and required to complete a review of the record(s) and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. If an SEA identified noncompliance, MDE sent a formal notification of the noncompliance; the SEA would need to correct any noncompliance consistent with OSEP QA 23-01.

No review questions were asked specific to this indicator as Education is the lead agency for both Part C and Part B services in Minnesota; the notification of the LEA is a seamless process.

Data for this indicator are gathered from examining records of children exiting Part C services and potentially eligible for Part B. The FFY 2023 data are based on reviews of records from 121 individual districts representing 96 SEAs.

Provide additional information about this indicator (optional).

Please see Introduction for additional stakeholder engagement information. Despite not having to set targets for Indicator 8A, 8B, and 8C during engagement in FFY 2021, all three outcomes of Indicator 8 were part of the in-reach with families, community partners, and Tribal Nations partners and continue to be prioritized in our work. Please note that the information included here includes feedback for all three of the Indicator 8 outcomes – they

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

were discussed all together.

Feedback from participants in FFY 2021 that remains relevant includes challenges for families/caregivers as the family-centered Part C shifted to educational needs of the child in Part B and ensuring families/caregivers understand different expectations for both children and families/caregivers in both settings; supporting systems to honor cultures and beliefs in a classroom instead of home/natural environments; and maintaining close relationships with families/caregivers and collaborating with community partners, cultural liaisons, Head Start, and other trusted partners. Another factor shared in FFY 2021 that is ever relevant in FFY 2023 is the impact a stretched workforce has on these components of Part C programming and our early childhood partners.

Correction of Findings of Noncompliance Identified in FFY 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

8B - Prior FFY Required Actions

None

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	96.97%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	96.97%	94.12%	96.97%	90.23%	85.52%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
238	290	85.52%	100%	89.66%	Did not meet target	No Slippage

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

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

0

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.

22

Provide reasons for delay, if applicable.

The results of the record reviews indicated 22 children had a late transition conference due to exceptional caregiver circumstances or the unavailability of the caregiver. There were a total of 30 children that were exiting Part C but did not have a transition conference in the appropriate timeframe. Thirteen of those children had IFSPs appropriately documenting transition steps and services, but the transition conference did not take place at least 90 days before the child's third birthday. Seventeen of the 30 records were cited because the child did not receive a timely transition conference and the IFSP did not include adequate documentation of the transition steps and services. MDE analyzed the information submitted with regard to the reason why the transition conference was not held within the required timeframe. Four records identified the reason for delay as scheduling issues. Eleven records indicated unknown reasons for the delay suggesting the records did not have sufficient detail to determine why the district failed to meet the timeline. Twelve records indicated the district did not hold a transition conference with no explanation as to why. The remaining three transition conferences were late due to staffing limitations.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

In FFY 2020, MDE initiated revision of its monitoring process and contracted for development of an online system to conduct an annual statewide record review for indicator data collection, moving away from MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at "end of life" for reliability, and the cyclical monitoring process used in the past, which did not differentiate monitoring based on SEAU needs. MDE completed the record review for FFY 2023 using the new web-based monitoring system, Stepwell MN. The process for FFY 2023 included generating a random statewide sample for each of the indicators. For Indicator 8C, the sample pulled records, based on the most recent statewide enrollment data, from the Minnesota Automated Reporting Student System (MARSS) for children identified as exiting Part C services. Once the sample was finalized, SEAUs were notified and required to complete a review of the record(s) and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. If an SEAU identified noncompliance, MDE sent a formal notification of the noncompliance; the SEAU would need to correct any noncompliance consistent with OSEP QA 23-01.

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 2023 data are based on reviews of records from 121 individual districts representing 96 SEAUs.

Provide additional information about this indicator (optional).

Accessible format can be found at the Office of Special Education Programs (OSEP): 2025 Determination Letters on State Implementation of IDEA

Please see Introduction for additional stakeholder engagement information. Despite not having to set targets for Indicator 8A, 8B, and 8C during engagement in FFY 2021, all three outcomes of Indicator 8 were part of the in-reach with families, community partners, and Tribal Nations partners and continue to be prioritized in our work. Please note that the information included here includes feedback for all three of the Indicator 8 outcomes – they were discussed all together.

Feedback from participants in FFY 2021 that remains relevant includes challenges for families/caregivers as the family-centered Part C shifted to educational needs of the child in Part B and ensuring families/caregivers understand different expectations for both children and families/caregivers in both settings; supporting systems to honor cultures and beliefs in a classroom instead of home/natural environments; and maintaining close relationships with families/caregivers and collaborating with community partners, cultural liaisons, Head Start, and other trusted partners. Another factor shared in FFY 2021 that is ever relevant in FFY 2023 is the impact a stretched workforce has on these components of Part C programming and our early childhood partners.

CLARIFICATION:

Minnesota mistakenly entered "No" to the prompt: "Data include only those toddlers with disabilities exiting Part C at age 3 for whom the Lead Agency was required to conduct the transition conference, held with the approval of the family, at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services." Minnesota has clarified that this should be "yes" and has marked that accordingly.

Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
29	29	0	0

FFY 2022 Findings of Noncompliance Verified as Corrected

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

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE has revised its approach to demonstrating correction of noncompliance to include a subsequent review of additional data for all SEAU with identified noncompliance and not just those with noncompliance deemed to be systemic or chronic. As part of this revised approach, MDE examined each of the findings of noncompliance from FFY 2022 and reviewed updated data from the SEAU to verify correct implementation of the regulatory requirements. All 29 of the SEAU with identified noncompliance in FFY 2022 were asked to review subsequent records in FFY 2023. Those records were chosen randomly from the MARSS system and submitted to MDE via a paper review for regulatory compliance. Submitted documentation confirmed that the SEAU were correctly implementing the regulatory requirements. MDE has thus reviewed updated data from each of the SEAU with identified noncompliance in FFY 2022 and verified that each SEAU is correctly implementing the regulatory requirements.

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

The data collection for the FFY 2022 record review took place using the Stepwell MN online system. Stepwell MN includes a Student Level Correction component that allows for MDE to track the correction of all individual child noncompliance. For the transition conference timeline, when record reviews were completed, the SEAU provided the date the transition conference was held. This allowed MDE to verify that the actions had been completed, although they may have been late. If the transition conference was not held, MDE required the SEAU to verify the successful transition to Part B. If the child was no longer within the jurisdiction of the SEAU, the SEAU would submit to MDE the reason (e.g., child moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific child. Based on a review of the data, MDE verified all of the transition conferences had been completed and that each SEAU with noncompliance reflected in the data the State reported for this indicator had completed the transition conference, although late, for any child whose transition conference was identified as not timely unless the child was no longer within the jurisdiction of the SEAU, consistent with OSEP QA 23-01. All correction of individual child record noncompliance was completed within the one-year timeframe.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

8C - Prior FFY Required Actions

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

Response to actions required in FFY 2022 SPP/APR

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE has revised its approach to demonstrating correction of noncompliance to include a subsequent review of additional data for all SEAUs with identified noncompliance and not just those with noncompliance deemed to be systemic or chronic. MDE verified that all SEAUs with identified noncompliance are correctly implementing the specific regulatory requirements as described in the section "Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements" above. MDE also ensured each individual case of noncompliance has been corrected consistent with OSEP QA 23-01 as described in the section "Describe how the State verified that each individual case of noncompliance was corrected" above.

8C - OSEP Response

8C - Required Actions

Because the State reported less than 100% compliance for FFY 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Select yes to use target ranges.

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

Regarding Stakeholder Input for Indicator 9 (included as an additional section in the FFY 2023 draft document but not included in this FFY 2023 online format): See Introduction for more information on Stakeholder Engagement. Similar to other indicators that did not need to be part of target setting in-reach in FFY 2021 due to being compliance indicators with targets set by OSEP, Minnesota chose to include Indicator 9 in the public in-reach with families, community partners, cultural liaisons and interpreters, early childhood partners, and Part C providers and leaders because of the reasons expressed in the narrative above. We continue conversations during in-reach with these same groups of partners as applicable to better understand and share our responsibilities that families know their special education rights and how to find support when they feel these rights are not being met.

Historical Data

Baseline Year	Baseline Data

FFY	2018	2019	2020	2021	2022
Target>=					
Data					

Targets

FFY	2023	2024	2025
Target>=			

FFY 2023 SPP/APR Data

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

Provide additional information about this indicator (optional)

Part C in Minnesota is for many infants, toddlers and families, the beginning into the education system in Minnesota. We have prioritized supporting parents in their rights and advocacy by establishing clear guidance and support of evidence-based early intervention practices among the workforce supporting Part C services. when many parents may not even believe they have rights, such as parents who are undocumented? We are dedicated to continuing our learning from families and caregivers how we can best support their and their children's needs.

CLARIFICATION:

Minnesota adopts Part B procedures for dispute resolution. Minnesota is not required to establish Targets or Baselines as there have been less than 10 resolution sessions (Minnesota Part C has 0 resolution sessions).

Minnesota indicates that this indicator is applicable and has provided information for stakeholder engagement.

9 - Prior FFY Required Actions

OSEP notes that this indicator is not applicable.

Response to actions required in FFY 2022 SPP/APR

Not applicable, as OSEP notes that this indicator is not applicable in the "Prior FFY Required Actions" section.

9 - OSEP Response

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

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements. (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

Minnesota does NOT meet criteria to report for Indicator 10: Mediation.

While this indicator is NOT APPLICABLE to Minnesota, we would like to share that we continue discussion and in-reach about Indicator 10 along with Indicator 9: Resolution Sessions with stakeholders. We also intentionally focused American Rescue Plan Act (ARP) funds subgrants for Family Engagement in FFY 2022 that continue to be relevant in their outcomes. Family Engagement grant recipients focused on why families sometimes choose additional options and not Part C services when their children are referred. We continue learning through ongoing in-reach how to better support and ensure each and every family in Minnesota and the 11 Tribal Nations who share land with us are served in ways that align with their families' cultures, values, and wants for their children. Based on our state's graduation rates' demographic data for the last 7 years, we have much work to do across the systems to do better for Black, Indigenous, and Children and Families/Caregivers of Color, as well as families/caregivers who use Heritage languages. Part C is the beginning into education for children and families/caregivers in Minnesota at the intersection of race, language, and disability. How are we really doing with supporting parents in their rights when many parents may not even believe they have rights, such as parents who are undocumented? In addition, are we educating families/caregivers about advocacy in ways that support their cultures, traditions, ways of information-sharing, or are we expecting them to fit into the dominant culture mold? Once again, we do not meet criteria to report Indicator 10, but we see this indicator's intent in Minnesota with a clearer understanding. We are dedicated to continuing our learning from families and caregivers how we can best support their and their children's needs.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2018	2019	2020	2021	2022
Target>=					
Data					

Targets

FFY	2023	2024	2025
Target>=			

FFY 2023 SPP/APR Data

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

Provide additional information about this indicator (optional)

See Introduction for more information on Stakeholder Engagement. Similar to other indicators that did not need to be part of target setting in-reach in FFY 2021 due to being compliance indicators with targets set by OSEP, Minnesota chose to include Indicator 10 in the public in-reach with families, community partners, cultural liaisons and interpreters, early childhood partners, and Part C providers and leaders because of the reasons expressed in the narrative above under "Indicator Data". We continue conversations during in-reach with these same groups of partners as applicable to better understand and share our responsibilities that families know their special education rights and how to find support when they feel these rights are not being met.

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

11 - Indicator Data

Section A: Data Analysis

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

Infants, toddlers, and preschool children with disabilities will substantially increase their rate of growth in the acquisition and use of knowledge and skills by the time they exit Part C or transition to kindergarten.

All local programs will contribute data to Minnesota's performance toward achieving the established targets.

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

NO

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

YES

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

The subpopulation of children is limited to:

- a) infants and toddlers who enter or exit Part C below age expectations in acquisition and use of knowledge and skills, including early language and communication, and;
- b) preschool-aged children who enter or exit 619 below age expectations in acquisition and use of knowledge and skills including early language, literacy and communication

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

NO

Please provide a link to the current theory of action.

https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD058346&RevisionSelectionMethod=latestReleased&Rendition=primary

Progress toward the SiMR

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

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

YES

Historical Data

Part	Baseline Year	Baseline Data
A	2018	55.80%
B	2018	67.84%

Targets

FFY	Current Relationship	2023	2024	2025
Target A	Data must be greater than or equal to the target	60.20%	60.30%	60.40%
Target B	Data must be greater than or equal to the target	67.90%	68.70%	69.50%

FFY 2023 SPP/APR Data

Part	# of infants and toddlers/preschoolers reported in progress category (c) plus # of infants and toddlers reported in category (d)	# of infants and toddlers/preschoolers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	1,806	3,220	57.15%	60.20%	56.09%	Did not meet target	Slippage
B	3,302	5,242	61.18%	67.90%	62.99%	Did not meet target	No Slippage

Provide reasons for A slippage, if applicable

Minnesota reviewed data submissions including COS ratings, demographic make-up of population served and exiting, as well as the percentage of children that were receiving services 6 months or more. All of these data points were compared to FFY 2022 data points. Additionally, Minnesota reviewed data quality and completeness compared to prior years. As it relates to demographic categories of race/ethnicity, Minnesota saw an increase of less than 1% of children identifying as Asian from FFY 2022 to FFY 2023. Additionally, the percentage of children identifying as Black, 2 or more races, and American Indian decreased less than 1%. Minnesota continues to see that our BIPOC children generally enter the system a few months later (therefore on average are receiving less months of services than their white peers). In analyzing the progress categories by race for children exiting Part C services, our BIPOC children represented a much smaller percentage of children who had improvement to the level of their peers or maintained close to their same-aged peers. With BIPOC children representing approximately 36% of our state Part C child population, it is not surprising that the impact had would be slippage. This is especially the case as it relates to acquisition and use of knowledge as we know that children in MN have a disproportionate impact in access to resources and enrichment opportunities.

Provide the data source for the FFY 2023 data.

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 caregiver report and professional observation to complete an age-anchored criterion-referenced assessment tool. Minnesota's process requires careful use of the cross-walk documents developed by the Early Childhood Outcome Center. Minnesota requires ratings be made within a month of the actual date of entry or exit. Last year, Minnesota changed the process of COS exit C and entry at the point of transition. This provides the opportunity for local level decisions about the appropriateness of the use of a Part C exit rating as the Part B entry rating. As local agencies are completing their rating submissions, they are given an opportunity to pull in the exit rating from part C exit reporting or enter a new entry rating for Part B.

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

Exit reporting occurs each November for the previous school year collection of children entering and exiting both Part B and Part C programs during that year. SEAs are provided a list of children that the MDE has generated based on child enrollment information that has been reported. These lists are broken into each entrance and exit collection. Districts are able to load their data via spreadsheet uploads, manual input, or through the submission of item level assessment data in the case of Part B/619. During the course of reporting, MDE staff monitor closely for incomplete submissions and "spot" check for validity for those scores generated through item level assessment procedures. Data is then pulled into Tableau® server and coded to create dashboards for analysis. Once the data is within the Tableau® dashboards created we can disaggregate data in a variety of means (race, region, type of district, disability category and setting) and through secure reporting are able to "turn around" reports to local SEA's for their use at the local level.

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

NO

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

YES

Describe any data quality issues, unrelated to COVID-19, specific to the SiMR data and include actions taken to address data quality concerns.

This year marked the second year of implementing the revisions to our COS collection system. While we are more confident in the data collections associated with state calculated ratings (modified the crosswalks from item level assessment tools to COS ratings), we are continuing to see that local level programs do not have consistent practices in place to aid in the collection of the data and the reporting. Additionally, we continue to work with districts on accurate reporting of child enrollment data to the state (a requirement that aides in the creation of child lists associated with each collection).

Minnesota is currently developing work scope with our technology team to develop some additional functions in our data collection system that will allow for more real time reporting progress, allowing districts to identify reporting reasons for children's inclusion/exclusion from the collection list, and will allow the state team to override coding when conditions point to it being necessary. This is all in an attempt to better support districts in building their capacity in reporting high quality data, ensuring accurate reporting of child enrollment data (directly tied to program funding), and therefore, supporting more complete and higher data quality for state analysis.

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

YES

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

The COVID-19 pandemic, while in our review mirror, continues to stretch workforce of the early intervention and early childhood special education programs across the state. In speaking with several of our local education program providers, we are learning that the impact of workforce shortages and turn-over that has been further exacerbated by the pandemic has resulted in difficulties with training and then time necessary to ensure quality assessment practice as it relates to the COS. District programs and staff are prioritizing assessments that more immediately support and inform child instruction.

The MDE and DCYF Early Childhood Special Education Team continues to design and publish training materials that can be accessed asynchronously for leaders to utilize with onboarding new staff. Additionally, MDE and DCYF have been providing leaders and practitioners with technical assistance around efficiencies that can be maximized while still meeting requirements of IDEA. MDE and DCYF continue to work closely with districts on identifying the children appropriate for collection, ensuring accuracy of reporting, and providing "in-time" support when there are identified issues in the data.

Section B: Implementation, Analysis and Evaluation

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

Theory of Action:

https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD058346&RevisionSelectionMethod=latestReleased&Rendition=primary / Logic Model Operations:

https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD058348&RevisionSelectionMethod=latestReleased&Rendition=primary

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

NO

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

1. Minnesota Part C and Part B/619 SEA is committed to further developing sustainable and equitable professional development inclusive of practitioners and early childhood leaders that will be responsively developed and supported in order to meet local level programs where they're at while striving to improve practices implemented with fidelity.
2. Minnesota Part C and Part B/619 SEA is committed to ensuring that Special Education Administrative Unit (SEAU) level administrators, schools boards and early childhood leaders have access to the technical assistance and professional development to ensure their capacity and understanding of programs and services necessary to support early learning programs inclusive of workforce, fiscal, program design and quality, data informed decision making, and oversight.
3. Minnesota Part C and Part B/619 SEA is committed to a system that prioritizes diverse and inclusive family, caregiver, and community partnerships and ongoing feedback loops at the state and local levels focused on meeting family, caregiver, and community identified needs.
4. Minnesota Part C and Part B/619 SEA is committed to ensuring that data collected, and data used are reliable, high-quality, valid and useful at the state and local levels to inform program improvement and ongoing needs assessment as well as data literacy for program leaders and practitioners.
5. Minnesota Part C and Part B/619 SEA is committed to improvement of early intervention/early child special education resources and services available through implementation of high-quality, trauma-informed best practices and culturally responsive programs.

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

As referenced above, these outcomes are directly tied to ongoing in-reach across Minnesota and 11 Tribal Nations who share land with us. While each and every child and caregiver will benefit, our intentional focus continues to be American Indian children and caregivers and families historically and currently made to be most marginalized by our systems.

1. Commitment to further developing sustainable and equitable professional development for practitioners/early childhood leaders:
 - a. MDE and DCYF ensure materials, resources, and assistance are readily accessible across the state through timely responses, engaging virtual calls, and monthly regional in-person visits. These opportunities prioritize ongoing, purposeful feedback loops.
 - b. Our CSPD workgroups use data from a comprehensive survey process identifying reasons educators leave the profession and recommendations for culturally responsive retention implementation and have led pivotal work for the adoption of national ECSE standards in Minnesota.
 - c. Our Due Process, Standards Aligned IEPs, and Hard Conversations in Early Childhood webinars and virtual TA sessions are accessed across the state. Collaborations with general education partners support inclusive practices and address transitions to Kindergarten using the framework of the Successful Learner Equation (<https://education.mn.gov/MDE/dse/early/highquality/kt/sl/index.htm>).
 - d. Access to innovations has led to designing and making available new evidence-based materials and implementation guides for programs across the state.
 - e. New professional development opportunities with an equity foundation for leaders, practitioners, and early childhood partners as explained in more detail throughout the SPP/APR are available including multiple asynchronous courses on equity and trauma-and-healing informed care created in partnership with the organizations Child Health and Development institute (CHDI); the Family, Infant, and Preschool Program (FIPP); and the Center for Early Education and Development (CEED). We also developed a platform for current webinars and a webinar series' available on the MDE website so early care and education webinars are in one place and allow clock hour certificates for webinars at least one hour.
2. Commitment to ensuring that SEAU administrators, schools boards and leaders understand programs and services:
 - a. We continue providing a TA leader series for onboarding ECSE leaders in their first years and "timely topics" provided at monthly leadership calls.
 - b. We continue a series for executive level leadership around early education program competencies.

3. Commitment to a system that prioritizes ongoing family, caregiver, and community partnerships and feedback loops for authentic engagement – listening to understand:

- a. Building on our previous ARP activities, we completed work on our Family Outcomes Survey renewal process in partnership with a community-trusted community partner with continued focus on American Indian Families and families made to be most marginalized, as well as the cultural liaisons, interpreters, and providers who support families within the Part C system
- b. We received recommendations and are beginning planning for further development and piloting over the next two fiscal years for the FOS work. An electronic method began piloting in Spring 2023 and has continued. The opportunity for caregivers to self-select demographic identifiers in the FOS will include Tribal Nation political designation, race, ethnicity, and Heritage language. Transliterations of the new form will be integral in helping Minnesota move this commitment forward for families and communities. The full process of our work includes continually engaging family, caregiver, community, and partner in-reach and feedback looping.

4. Commitment to ensuring that data collected and used are reliable, valid and useful, including increasing data literacy:

- a. Workshops are available to local leaders. Districts request individual sessions addressing questions about funding, interpreting outcomes data, analyzing forecasting trends, and program development decisions.
- b. Minnesota is refining tools and processes for collecting data and information, ensuring data is valid and reliable through rigorous qualitative analysis and logic model development; and building detailed, historical data dashboards for LEAs to access, analyze, and track data trends over time.
- c. We continue increasing data literacy and access for our regional Interagency Early Intervention Committees (IEICs) for data pieces they need to do their public awareness and outreach work more equitably, including access to regional coaches from the Early Childhood Longitudinal Data System (ECLS) (<https://ecls.mn.gov/#>).

5. Commitment to the improvement of resources and services available around trauma and racism for children, families/caregivers and their EI/ECSE providers:

- a. The Preschool Development Grant and MDE/DCYF provide trauma-centered communities of practice (CoPs) focusing on awareness and understanding of trauma's impact and how it affects behavior of adults and children with an emphasis on self-care for providers.
- b. We completed our contract with the Center for Equity and Excellence (CEE) (<https://www.rosemarieallen.com/home.html>). This included a community-created racial equity audit and a 20-month intensive training for our state team, professional development facilitators, and leaders of the IEICs on the 5 stages of anti-bias work: personal, interpersonal, institutional, community, and system. This work also led to ongoing development of asynchronous learning modules, reflective practice guides, equity audits for the IEICs at their regional and local levels and implementing recommendations for advancement of equity in Part C and B/619 programs from CEE.
- c. In-reach-led updates to our referral system in FFY 2023 included translations of three referral connection forms in our Help Me Grow Minnesota system in Hmong, Spanish, and Somali; including updating various levels of back-end data held at the state and sent to local programs to assist them in stronger initial communication with families. We are also updating translations and language used on the Help Me Grow Minnesota website reflecting ongoing in-reach with families, caregivers, and community partners for child-and-family centered language and language that demonstrates better cultural humility and support. The experiential family/caregiver videos developed from perspectives of diverse cultures support referral processes for children and families/caregivers from diverse communities and continue to be a top google search on the website (<https://www.helpmehrowmn.org/HMG/HelpfulRes/ParentStories/index.html>).
- d. The Regional IEIC Teams continue their learning in equity to increase their personal and system-level understanding and implementation of work plans for better reaching families, communities, and additional referring partners in culturally supportive ways. Their work plans for FFY 2023 demonstrated integration of equity throughout instead of separate equity goals.
- e. In efforts to better coordinate systems and programming for families/caregivers participating in Part C, MDE and DCYF also continue focus on collaborating with early childhood partners. Refer to the Introduction for a list of ways this is ongoing. It is MDE's and DCYF's hope as co-lead partners in the implementation and continuous improvement of Part C in Minnesota and 11 Tribal Nations who share land with us that the very reasons for the new DCYF agency, including better systems-level and local programs coordination for smoother connections and supports for families to what they want and need, will foster our efforts in new and strong partnerships.

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

NO

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

1. Minnesota Part C and Part B/619's co-lead and partnering agencies, MDE and DCYF, will continue sustainable and equitable professional development inclusive of practitioners and early childhood leaders that also reflects the diversity of families and communities we are supporting across Minnesota and 11 Tribal Nations who share land with us. The early childhood special education team will continue building partnerships with state and local level programs, TA centers, community-based organizations and entities, and our parent advocacy centers to supplement and grow the creation of webinars, implementation supports, and reflective practice guides. Even more, with the work being done on increasing our capacity in trauma-healing practices and implicit bias, we will further expand the incorporation of these practices into all other learning modules and trainings and continue in-reach on an ongoing basis.
2. Minnesota Part C and Part B/619's co-lead and partnering agencies, MDE and DCYF, are committed to ensuring that Special Education Administrative Unit (SEAU) level administrators and early childhood leaders have access to the technical assistance and professional development to ensure their capacity and understanding of programs and services necessary to support early learning programs inclusive of workforce, fiscal, program design and quality, data informed decision making, and oversight and will continue this work by turning individual program supports into supports readily available webinars and supporting documents. Additionally, we will continue to explore ways for leaders across the state to have support in learning how to facilitate implementation and sustainability while managing adaptive challenges associated with funding and workforce.
3. Minnesota Part C and Part B/619's co-lead and partnering agencies, MDE and DCYF, are committed to a system that prioritizes family, caregiver, and community partnerships and ongoing feedback loops at the state and local levels focused on meeting family, caregiver, and community identified needs and will continue this work in the following ways:

--Shift into piloting, implementing, and continued feedback looping for the Family Outcome Survey renewal and its process. During this next imperative phase, we will support the needs of families/caregivers in having multiple methods to engage in providing feedback and in the tweaking and continued building of a more meaningful Family Outcomes Survey. The desire and opportunity to provide quality family/caregiver feedback directly to the districts supporting children and families/caregivers through early intervention services will also be a critical feedback loop component and was made clearly important during the Wilder Foundation in-reach and engagement process. It is important to MDE and DCYF that we do this process well, giving it the time it takes with families, community partners, and program providers in the work with us every step of the way.

--Additionally, the IEICs and the ICC are in process of reviewing feedback and recommendations from the considerable engagement we have had the last three years on how best to proceed in making recommendation to DCYF and MDE during our transition into co-lead management to best meet the

needs of the Part C early intervention families and systems of supports.

4. Minnesota Part C and Part B/619 SEA is committed to ensuring that data collected and data used are reliable, valid and useful at the state and local levels to inform program improvement and ongoing needs assessment as well as data literacy for program leaders and practitioners and will supported access to data dashboards, revenue and expenditure reports, and opportunities to review and learn from workforce recruitment and retention.

5. Minnesota Part C and Part B/619 SEA is committed to improvement of resources and services available to early intervention/early childhood special education children and caregivers through implementation of high quality, trauma-informed best practices, and culturally responsive programs that will be supported in the following ways in the coming year:

--Over the course of the next year, we will continue to create additional webinars and courses along with those implemented during FFY 2023 to build up the learning, knowledge, and implementation already begun around Implicit Bias and Trauma-Healing practices. We will also work at the state agency and intra-agency levels to combine efforts where able, ensuring early childhood partners including Part C providers and leaders are learning and implementing better whole-systems, whole-family services.

--At the time of this writing, the Minnesota Part C Coordinator and the Minnesota Child Care Services Division Early Childhood Expulsion and Suspension Manager are beginning co-facilitation of a piloted intensive technical assistance (TA) opportunity through the Office of Child Care, along with strong leadership support from both teams at DCYF and the Director of Early Education at MDE. This opportunity is meant to maximize new team and agency relationships in collaboration with families and local programs to increase communication and efficacy between Part C and Child Care Services. While the specific goals are still forming with our TA beginning January 22, 2025, some main areas of focus are better state and local coordination, a more supported and educated staff on both sides about the work of the other, increased access to quality childcare services for infants and young children with disabilities and their families, and meaningful contributions to Minnesota's work in decreasing suspension and expulsions (including "soft" expulsions) in Parts C and B/619.

--Additionally, through collaborations with partners in the departments of health and human services, we will work to ensure that mechanisms supported by these agencies to provide quality mental health supports and services to young children and families are linked to local providers and referral sources. MDE and DCYF Part C and B/619 staff are working on an interagency and community team to also increase access to mental health supports and services for infants, toddlers, young children, youth, and families through Medicaid funding and support schools and local partners in this process.

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

Our robust improvement plan continues to promote four distinct sets of evidence-based or evidence-informed practices that were chosen to support practitioners in our 0-5 system who work in homes, classrooms, or who support eligible young children itinerantly: Evidence-based Quality Intervention Practices (EQIP); The Pyramid Model; The Classroom Engagement Model (CEM); Practice-Based Coaching.

With the creation of practice modules and implementation guides, more district and cooperative programs will be able to engage in the materials and supports that best meet their program and families' needs at the time, while also having the support for the implementation and sustainability of practices. Detailed information about the implementation of these four bundles of practices is provided during our discussion of progress made on the activities. Information on the innovations can also be accessed on the Minnesota Centers of Excellence website (www.mncoe.org). Additionally, the evidence-based practice of Practice-Based Coaching is incorporated throughout implementation of every innovation practice.

We developed new professional development opportunities with an equity foundation for leaders, practitioners, and early childhood partners statewide:

a) an asynchronous course called "A Trauma-Informed Approach to Early Childhood Practice: Foundational Course" in partnership with the Child Health and Development Institute (CHDI) ; b) three trauma-informed advanced courses in continued partnership with CHDI focused on those in leadership positions, those in classroom-based settings, and those providing early intervention; c) an asynchronous course called "Best Practices in Early Intervention" in partnership with the Family, Infant, and Preschool Program (FIPP); d) an asynchronous course called "Reflective Practice for Early Childhood Leaders" in partnership with Center Early Education and Development (CEED) at the University of Minnesota Twin Cities; e) an asynchronous course showcasing current webinars and webinar series' that are available on the MDE website putting early care and education webinars in one place and allowing participants to receive clock hour certificates for viewing webinars and completing reflection activities.

Provide a summary of each evidence-based practice.

Evidence-based Quality Intervention Practices (EQIP): EQIP is a MNCoE innovation that supports early interventionists to learn and implement Family Centered Practices within Natural Learning Environments, using a Coaching Interaction Style. The essential elements include Coaching Interaction Practices, characteristics of coaching, building family/caregiver capacity; Natural Learning Environment Practices, using everyday settings as sources of learning, child interest in learning; Family/Caregiver-Centered Practices, culturally responsive practices; Relationship-Based Practices, teaming and collaboration strategies for implementing the primary coach approach, joint visits.

Pyramid Model: Pyramid Model is a framework for supporting social competence and preventing challenging behavior in young children, particularly those with or at risk for delays or disabilities. The model emphasizes building positive relationships with children and families/caregivers, creating supportive environments, intentionally teaching social skills and individualizing interventions when needed. The goal of the Pyramid Model Partnership is to plan, implement and sustain a cross-sector professional development system in order to enhance the knowledge and skills of practitioners in meeting the social-emotional needs of young children in inclusive and natural environments. Data-driven decision-making is used to evaluate the effectiveness of instructional approaches and implementation of the model to fidelity.

The Classroom Engagement Model (CEM): The Classroom Engagement Model (CEM) is a set of research-based teaching practices that increase engagement and full participation of each and every child. Increased engagement leads to more learning, increased skill acquisition, and better outcomes for children. The overarching principles are focused on engagement, independence and social relationships through strong partnerships between general and special education partnerships. These outcomes align to the Child Outcome Summary (COS) used in Early Childhood Special Education to summarize a child's functioning in everyday living across developmental domains to support local, state and federal organizations to make data-based decisions on continuous improvement.

Practice-Based Coaching: Practice-Based Coaching is a model of coaching that includes three components which are associated with change in mentees' practices and associated changes in child outcomes. Each of the components occurs within the context of collaborative partnerships. Component 1: shared goals and action planning involves identifying priorities and then activities and resources to meet those goals. It is essentially a roadmap for support and feedback and ongoing monitoring of outcomes; Component 2: Engaging in Focused Observations with observation referring to the process of gathering and recording information about the desired effective practices during ongoing activities, routines and transitions; Component 3: Reflecting on and Sharing Feedback involves taking time to think about what was effective and what was a barrier to improving or refining

implementation of practices.

During FFY 2023 we continued to target discretionary federal funds to support local programs implementing one of the evidence-based interventions. We shifted the allocation process to needs-based budget proposals while ensuring more equitable access to districts across Greater Minnesota and school cooperatives who historically have had less capacity to apply for this funding. In the next phase of our Personnel Development plan, we plan to build out additional engagement and support opportunities that meet districts where they're at in the identification of barriers to implementing best practices, as well as needs and capacity with implementation science. This will include programs serving American Indian families/caregivers on and off Tribal Nation lands and many additional growing communities across Minnesota.

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

EQIP is a package of evidence-based practices that are known to have specific impacts to child outcomes. When parents/caregivers are well supported to practice and support the needs of their child throughout daily routines, improved outcomes in all domains will occur.

The Pyramid Model has been tested in multiple research projects and has shown evidence for promoting young children's social and emotional skills and decreasing child challenging behavior. These evidence-based practices were focused on identifying those practices that would: 1) Promote the social and emotional outcomes of all children; 2) promote the skill development of children with social, emotional, and behavioral delays to prevent the need for more intensive supports; and 3) intervene effectively when children have persistent challenging behavior.

The Classroom Engagement Model (CEM) is a set of research-based teaching practices that increase engagement and full participation of every child. Increased engagement leads to more learning, increased skill acquisition, and better outcomes for children. CEM focuses on teaching children within daily routines, alongside their peers, and with materials or activities that children are interested in. Additionally, children with disabilities are at-risk for lower levels of engagement and often need additional opportunities to practice new skills. Focusing on strategies to increase engagement and active participation leads to better outcomes for all children.

Practice-Based Coaching: Studies have shown that practice-based coaching activities have a positive impact on desired teaching practices including curricular implementation, behavior support practices, improved child-teacher interactions and overall changes to a teacher's attitude about teaching practices. Components of practice-based coaching are also associated with positive child outcomes including increased participation and engagement, increased social skills, and increased knowledge and skills.

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

In August 2020, MNCoE launched Minnesota Innovation Implementation Data (MIID), a web-based data system for local programs to enter data and generate meaningful reports in real time, to all participating sites statewide. MNCoE and MDE in partnership with MNIT Services (Minnesota's state technology center), created the MIID system to replace the more cumbersome data collection efforts through paper logs and excel spreadsheets. The online system provides local teams instant access to data summaries that can be used to make decisions and improve practices in the implementation of their selected innovation. Within the online data collection and reporting system, programs that are participating in innovations record coaching log data, fidelity tool data for each specific innovation, and benchmarks of quality that have been established for each innovation.

The MIID system has been appreciated by innovation sites for fidelity of implementation monitoring. Statewide data reports demonstrate that growth in implementation with fidelity is evident across all of the innovations. COVID-19 had considerable impact on districts as a whole. There were several districts that put their innovation work on hold, others that managed to maintain engagement, and still a few others that cancelled their contracts. Of significance, however, is that EQIP demonstrated the least amount of impact likely due to the ability to translate these tools in a virtual platform. Our state implementation teams and local leaders have demonstrated commitment to ensure that progress continues and that district teams have the support and resources necessary to meet their program implementation goals whether through innovation engagement or foundational and operational supports.

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

With each of the evidence-based practice innovation (EQIP, Pyramid, and CEM), considerable effort has been made to ensure that fidelity of implementation is paramount. With data collection requirements that are part of the joint powers agreement process (state contracts with each district to support the initial installation of evidence-based practices), we have been able to determine that the frameworks of active implementation components have been successful in building internal capacity within districts and long-term sustainability. Through stakeholder engagement, the consensus became that the only way to ensure scalability of these practices was to allow for engagement that has a tiered progression of training, an opportunity to address staff turn-over through readily accessible trainings offered virtually and asynchronously, and that location and size of SEAU were not prohibitive. MDE and DCYF, along with MNCoE, have begun the work of developing different means to access high quality supports that support the capacity and needs of individual programs while working to support implementation.

When implementing high quality, evidence-based practices in programs, it would be expected that child outcomes improve over time. Directly correlating child outcomes to implementation of practices would not be a reasonable connection to make given that lack of control of variables is impacting the work and data collections. However, due to the favorable outcomes at the local level on staff efficacy and culture, as well as the potential for significant systems improvement, stakeholders indicated a strong desire to continue innovations AND ensure more equitable access for broader implementation.

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

For EQIP, CEM and Pyramid Innovations, we have committed to the following:

1. Launch, support and guide the use of new asynchronous learning modules for evidence-based practices in early intervention. Minnesota contracted The Family, Infant and Preschool Program (FIPP) to develop state specific learning modules for quality early intervention practices. Beginning summer of 2025, these modules will be available to any early intervention practitioner across the state with additional supportive implementation guides for early intervention leaders.

2. Launch, support, guide and revise (per built in survey and response feedback loops with the vendor) a module series entitled "A Trauma-Informed Approach to Early Childhood Practice. This series includes foundational, leadership, and practitioner modules that are designed to lay the groundwork

for common understanding and foundational practices that are built upon in context specific modules designed for leaders and practitioners. These modules also have implementation guides that incorporate putting practices into action as well as planning for scale and sustainability over time.

3. Over the next 12 months, Minnesota is also committed to building additional courses for asynchronous learning application of our Classroom Engagement Model practices in addition to revising the scale and sustainability plan for practices that are part of the Pyramid Model. Minnesota is making these changes to be responsive to the needs of our districts programs that are seeing significant impacts on workforce which result in the need to continuously train new staff, support new leaders, and provide professional development in ways that are flexible in order to meet the varied needs of programs across our state. Additionally, our early childhood professional development coaching network will be joining a larger state education system of supports in order to build regional networks that will support not only the EI/ECSE programs across the state but will also create the intentional structure of vertical alignment that better supports the context in which our local programs operate.

With these changes, it is anticipated that more leaders and practitioners will access supports that are relevant to their context in meaningful ways and the coaching supports of our system will be able to better support program need identification, implementation plans, and ongoing data informed decision making.

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

YES

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

MDE and DCYF have purposefully not made any significant changes to the activities and strategies or timelines described in the previous submission during our transition time to a co-lead model. Our logic models and theory of action remain relevant and supportive of the continuation of our work plans because they were completely determined through the intensive engagement and in-reach described in the last three year's SPP/APR submissions. MDE and DCYF remain committed to continuous engagement and feedback looping opportunities as a means to being responsive, collaborative, and supportive of the needs of children, families, caregivers, and the professionals that serve them. At this time, continued engagement and work plan actions align fully with our SSIP.

Please find our Comprehensive System of Personnel Development Logic Model at:

https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD058347&RevisionSelectionMethod=latestReleased&Rendition=primary

Please find our EI/ECSE Operations and Implementation Logic Model at:

https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD058348&RevisionSelectionMethod=latestReleased&Rendition=primary

Section C: Stakeholder Engagement

Description of Stakeholder Input

Stakeholder input around Minnesota's Indicator 11/SSIP for FFY 2023 is intricately linked with the in-reach described throughout FFY 2022's SPP/APR in a number of implementation activities described throughout this year's Introduction and each Indicator. During this past year, stakeholder input and in-reach has been through action and beginning development of ongoing feedback looping with systems changes and information implementation for the coming years ahead. We are committed to extensive family and caregiver input in historical ways for Minnesota's Part C program, working to give family and partner in-reach the time it needs to take while also engaging in meaningful change action. Much of the work that came from our American Rescue Plan funds projects is in-process.

In addition, MDE and DCYF continue our dedication to in-reach at every opportunity through a variety of informal listening sessions, ECSE Leadership calls, DCYF listening opportunities, workgroup participation, CSPD work, and ICC and IEIC meetings. We continue gathering and sharing out through various methods of data capturing, such as large and small group discussions, use of virtual and anonymous polls like Mentimeter and Ideaboardz, and active in-reach through contracts like The Wilder Foundation for Family Outcomes and grants we plan to implement in the future as we continue moving forward the work that has come directly from in-reach.

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

Minnesota's SSIP and development of the current Theory of Action and subsequent logic models were completely driven and determined by stakeholder engagement, and the actions arising are part of developing feedback looping. As we continued action on our SSIP this past year, we continued our dedication to the activities happening to support our SSIP being developed by and for the people most impacted by the SSIP actions. The focus this past year for engagement and in-reach has been around families, caregivers, community partners and family/caregiver liaisons, providers, program leaders, our ICC membership, our regional IEIC teams responsible for public awareness and outreach, including our CSPD workgroup and leadership teams which each include paid family and caregiver members. Families and caregivers are a direct part of the work through each of these entities and are compensated for their time including childcare during meetings. All those engaged this past year in our key improvement efforts have helped streamline priorities, review progress, create new synthesis of data and themes, and brainstorm action plans and strategies that will now support the new co-lead agencies' transition and beyond.

In addition, the ICC and the IEICs continued regular interactive meetings and support the work of the SSIP through consistent advisement, assistance, and implementation across all areas. The ICC and IEICs have also continued focusing on systems, policy, and programming level changes through equity foundations going on five years. This work has been grounded through embracing the components of an Intentional Container as developed by Open Source Leadership Strategies (<https://opensourceleadership.com/>), tying all work to the Ten Commitments to Equity as redeveloped at the Minnesota Department of Education and brought along with Part C to DCYF (<https://education.mn.gov/MDE/about/cmsh/>), and working to recognize and decolonize the components of white supremacy throughout our systems and implementation actions as described by Tema Okun (<https://www.whitesupremacyculture.info/>) while simultaneously embracing additional creative ways to be in this work for children, families, caregivers, and each other that are inspired by the communities we live within.

ECSE Leadership monthly engagement through regularly scheduled statewide calls with the Parts C and B/619 team from MDE and DCYF continued to keep information flow consistent to and from all districts. Various co-lead agency team members attended Special Education director forums, Regional Low Incidence Facilitator meetings, weekly Dream Catcher groups, and other stakeholder opportunities to maximize information gathering and giving. The CSPD workgroups have met monthly to engage in their work on a consistent and efficacious level, therefore advancing this work in critical ways that support Minnesota's SSIP, Theory of Action, and logic models in action including recommendations for adopting national early intervention standards,

which have now been implemented in Minnesota for over a year. All levels of engagement this past year have included surveys, polls, and work groups to capture information shared, discussed, and leading the way with Minnesota's cycles of action for infants, toddlers, young children, families, caregivers, communities, and each other. Please see the Introduction for additional information about engagement and in-reach.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

A predominant theme throughout engagement and across the representative participants continues to be workforce issues (e.g. lack of professionals trained and ready, lack of programs available, lack of awareness of the profession, as well as retention of current and over-burdened employees). A significant part of workforce concerns that came through strong again this year is ensuring the workforce in Minnesota, currently predominantly white and identified female, matches our diverse population and comes from Native Communities and Communities of Color and those using diverse Heritage languages to better serve our families/caregivers historically and currently underserved in Minnesota's Part C programs. While we work to diversify our workforce, we also heard this past year across every region of our state the need for current majority-white providers to continue with supports in addressing implicit bias and with learning how to better support children and families/caregivers experiencing trauma. Additionally, themes of the rapidly changing demographics of children and families/caregivers and increased complexity of needs in the area of mental health and resource scarcity continue, as do needs for increased support for ECSE programs and providers in establishing and maintaining collaborative partnerships with early childhood programs that help us surround families in care.

Another theme that continues centers the concerns around a leadership force responsible for supporting early learning programs while having minimal capacity in program implementation, best practices, and professional needs. A final and critical theme that continues with strength and need is the focus on equity for infants, toddlers, and families/caregivers in Minnesota and 11 Tribal Nations who share land with us who have been historically and are currently made to be most marginalized, and the tie between early childhood and graduation rates for each and every child in Minnesota and all Tribal Nations represented on and off Tribal Nations lands.

To address some of these issues, we created a number of statewide trainings, courses, and webinars around trauma-and-healing informed care and implicit bias as described in the Introduction and early in the Indicator 11: SSIP for FFY 2023. We also continued our dedication to helping leaders grow their cultural humility and anti-racist learning and actions through a 20-month intensive technical assistance opportunity for regional professional development specialists and regional Interagency Early Intervention Committee leadership focusing on racial equity and additional intersectionalities from internal learning all the way through systems-level work so they are better able to support this same learning in their teams across Minnesota and 11 Tribal Nations who share land with us.

We have begun work through Minnesota's Developmental Screening Taskforce in developing a companion guide for the Ages & Stages Questionnaire (ASQ) that will better support North American Indian infants, toddlers, families, and communities. The group working on this includes state-level program coordinators and managers from all early childhood programs that do screening, Tribal partners, and has been brought before the Tribal Nations Education Committee (TNEC) (<https://www.tnecmn.com/>) for support to begin and continue the work. This project is now being funded through Minnesota's renewed Preschool Development Grant.

The MDE and DCYF early childhood special education team has also been involved in a number of interagency initiatives supporting ECSE professionals and folks from Child Care Services, Child Permanency, Foster Care, Early Childhood Mental Health, and other partners in this work to better understand each other and how to collaborate better to collectively address the racial, economic, and geographical inequities that continue to afflict our graduation rates at alarming levels for American Indian children, Black children, Latine children, children using Heritage languages, children experiencing poverty, and our children with disabilities. Much of this work is aligned with projects happening through Minnesota's renewed Preschool Development Grant and the strategic plan for our Early Learning Services division at DCYF. The ECSE Team at DCYF and MDE continues to look for ways to be in the cycles of change addressing the concerns of those engaged in our work who are most affected by our work.

Additional Implementation Activities

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

The Minnesota Departments of Education (MDE Early Education) and Children, Youth, and Families (DCYF Early Learning) are partnering with MDE's Collaborative Minnesota Partnerships to Advance Student Success (COMPASS) division, the statewide system for continuous improvement, and the Minnesota Service Cooperatives (MSC) to intentionally align early childhood special education supports with other statewide programs and initiatives to increase vertical and horizontal alignment across the early care and education landscape. By intentionally integrating new positions with expertise in early childhood special education into the COMPASS system statewide, this partnership will create a powerful network dedicated to empowering early childhood special education leaders with the knowledge, skills, and resources to best support the needs within their program.

To address these opportunities for growth, MDE and DCYF, in partnership with MSC, will be introducing new positions focused on early childhood special education within the COMPASS system. This proactive partnership aims to foster collaboration between general and special education across Minnesota's early care and education landscape, with each position providing essential coaching and support to early childhood special education leaders, empowering them to implement and sustain evidence-based practices in their programs to create inclusive, joyful, and developmentally appropriate learning experiences for all children. These dedicated professionals will utilize their expertise to lead and support others within the regional and statewide COMPASS system to ensure the unique needs of young children (birth into third grade) are represented in discussions and collaborative efforts. These professionals will also work closely with early childhood education teams at MDE, DCYF, and with other regional partners.

Additionally, MDE and DCYF as co-lead agencies continue to coordinate efforts to support the implementation of Part C in Minnesota and 11 Tribal Nations who share land with us. DCYF will be hiring a new supportive position that will focus on Family Engagement and Service Coordination. This position will bring the opportunity to further support the implementation of the newly designed and to-be implemented Family Outcome Survey as well as work with the MDE early childhood special education staff on the development of practice supports for service coordinators while building on interagency relationships.

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

Part C became a co-lead program in Minnesota and 11 Tribal nations who share land with us on July 1, 2024 with subsequent moving of specific components to the new Department of Children, Youth, and Families (DCYF) on July 17, 2024. The new Part C position supporting family engagement and service coordination is anticipated to be hired before the end of FFY 2023 through DCYF.

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

Minnesota is a co-lead state for the first time in our Part C story. Beginning July 1, 2024, the newly formed Department of Children, Youth, and Families (DCYF) has joined the Minnesota Department of Education (MDE) in ensuring high-quality, culturally supportive Part C supports and services are happening for each and every child living in Minnesota and 11 Tribal Nations who share land with us. While this is an exciting change, it brings additionally some expected and needed “transition” space as new relationships and partnerships are formed. It is important to note that all policies and processes remain the same at this time as reflected in Minnesota’s FFY 2024 Grant Application submission, which was accepted by the Office of Special Education Programs (OSEP) with subsequent fiscal grant awarding. For additional information of how DCYF and MDE are working together for Part C, we created a Cover Letter posted for the public and also on file with OSEP (https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD083742&RevisionSelectionMethod=latestReleased&Rendition=primary).

The teams at DCYF and MDE responsible for Part C work together on a daily basis to ensure everything is running smoothly and no family or local program is feeling any negative or barrier effects during this transition and the establishment of our co-lead model. In addition, we continue offering opportunities for feedback and in-reach with families/caregivers, community partners, ECSE leaders, and local providers and partners as we work to streamline and maximize the new opportunities we believe this co-lead partnership affords each and every one of us in Minnesota and 11 Tribal Nations who share land with us. We are committed to building anything new or different in partnership with the people directly impacted by Part C programming and those who work within or in partnership with Part C to support children and families.

Provide additional information about this indicator (optional).

CLARIFICATION: Minnesota made an error in entering the denominator for Part A resulting in a percentage rate that was inconsistent with Indicator 3 B(1). Minnesota corrected the denominator to 3220 which resulted in the FFY2023 Data for Part A to result in 56.09% which is consistent with the slippage determination.

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Indicator 12: General Supervision

Instructions and Measurement

Monitoring Priority: General Supervision

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

Data Source

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

Measurement

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

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

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

12 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	100.00%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

Indicator 1. Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

Findings of Noncompliance Identified in FFY 2022

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

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

MDE reviewed data from all components of its general supervision system including due process complaints and hearings, fiscal monitoring and program monitoring. There were no additional findings related to this indicator other than those reported in the indicator.

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

There was no noncompliance for Indicator C1 identified in FFY 2022.

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

There was no noncompliance for Indicator C1 identified in FFY 2022.

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

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
16	0	16	0	0

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

MDE reviewed data from all components of its general supervision system including due process complaints and hearings, fiscal monitoring and program monitoring. There were no additional findings related to this indicator other than those reported in the indicator.

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

All noncompliance related to Indicator C7 was identified through the program monitoring Indicator Data Collection (IDC) activity. MDE examined each of the findings of noncompliance from FFY 2022 and reviewed updated data from the SEAU to verify correct implementation of the regulatory requirements. The 28 noncompliant records from FFY 2022 resulted in findings of noncompliance for 16 SEAU's. Each SEAU was asked to review randomly selected records to demonstrate correction and submit paper reviews to MDE for regulatory compliance. Submitted documentation confirmed that all 16 of the SEAU's were correctly implementing the regulatory requirements. MDE has reviewed updated data from SEAU's with identified noncompliance in FFY 2022 and verified that each SEAU is correctly implementing 34 CFR § 303.310.

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

The IDC for the FFY 2022 record review took place using the Stepwell MN online system. Stepwell MN includes a Student Level Correction component that allows for MDE to track the correction of all individual child noncompliance. For post-referral timelines, when record reviews were completed, the SEAU provided the date of the referral and the date the evaluation, assessments and initial IFSP meeting were completed. This allowed MDE to verify that the actions had been completed, although they may have been late. If the date of the evaluation, assessments and the initial IFSP meeting was missing, MDE required the SEAU to submit the completed IFSP to demonstrate the evaluation and assessments and IFSP meeting had subsequently been completed, although late. If the child was no longer within the jurisdiction of the SEAU, the SEAU would submit to MDE the reason (e.g., child moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific child. Based on a review of the data, MDE verified all of the evaluations, assessments and initial 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, assessments and IFSP meetings, although late, for any child whose initial evaluation and assessment and IFSP meeting was not timely unless the child was no longer within the jurisdiction of the SEAU. All correction of individual child record noncompliance was completed within the one-year timeframe.

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

A. Developed an IFSP with transition steps and services at least 90 days (and, at the discretion of all parties, not more than nine months) prior to the toddler's third birthday. (20 U.S.C. 1416(a)(3)(B) and 1442).

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
26	0	26	0	0

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

MDE reviewed data from all components of its general supervision system including due process complaints and hearings, fiscal monitoring and program monitoring. There were no additional findings related to this indicator other than those reported in the indicator.

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

All noncompliance related to Indicator C8A was identified through the program monitoring Indicator Data Collection (IDC) activity. MDE examined each of the findings of noncompliance from FFY 2022 and reviewed updated data from the SEAU to verify correct implementation of the regulatory requirements. The 26 SAUs with identified noncompliance in FFY 2022 were asked to review subsequent records in FFY 2023. Those records were chosen randomly and submitted to MDE via a paper review for regulatory compliance. Submitted documentation confirmed that all SAUs were correctly implementing the regulatory requirements. MDE has thus reviewed updated data from each of the SAUs with identified noncompliance in FFY 2022 and verified that each SAU is correctly implementing the regulatory requirements.

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

The IDC for the FFY 2022 record review took place using the Stepwell MN online system. Stepwell MN includes a Student Level Correction component that allows for MDE to track the correction of all individual child noncompliance. For Part C to Part B transition, when record reviews were completed, the SAU provided the date the transition conference was held. This allowed MDE to verify that the conference had been completed, although it may have been late. If the transition conference was not held, MDE required the SAU to verify the successful transition to Part B. If the child was no longer within the jurisdiction of the SAU, the SAU was required to submit to MDE the reason (e.g., child moved) and the date of the occurrence to release the SAU from further demonstration of correction for that specific child. Based on a review of the data, MDE has verified that all records with identified noncompliance in FFY 2022 were corrected and the SAUs are now in compliance, or the child is no longer within the jurisdiction of the SAU, consistent with OSEP QA 23-01. All correction of individual child record noncompliance was completed within the one-year timeframe.

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

B. Notified (consistent with any opt-out policy) the SEA and LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. (20 U.S.C. 1416(a)(3)(B) and 1442)

Findings of Noncompliance Identified in FFY 2022

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

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

MDE reviewed data from all components of its general supervision system including due process complaints and hearings, fiscal monitoring and program monitoring. There were no additional findings related to this indicator other than those reported in the indicator.

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

There was no noncompliance for Indicator C8B identified in FFY 2022.

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

There was no noncompliance for Indicator C8B identified in FFY 2022.

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

C. Conducted the transition conference held with the approval of the family at least 90 days (and, at the discretion of all parties, not more than nine months) prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. (20 U.S.C. 1416(a)(3)(B) and 1442)

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
29	0	29	0	0

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

MDE reviewed data from all components of its general supervision system including due process complaints and hearings, fiscal monitoring and program monitoring. There were no additional findings related to this indicator other than those reported in the indicator.

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

All noncompliance related to Indicator C8C was identified through the program monitoring Indicator Data Collection (IDC) activity. MDE examined each of the findings of noncompliance from FFY 2022 and reviewed updated data from the SEAU to verify correct implementation of the regulatory requirements. All 29 of the SEAU with identified noncompliance in FFY 2022 were asked to review subsequent records in FFY 2023. Those records were chosen randomly from the MARSS system and submitted to MDE via a paper review for regulatory compliance. Submitted documentation confirmed that the SEAU were correctly implementing the regulatory requirements. MDE has thus reviewed updated data from each of the SEAU with identified noncompliance in FFY 2022 and verified that each SEAU is correctly implementing the regulatory requirements.

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

The IDC for the FFY 2022 record review took place using the Stepwell MN online system. Stepwell MN includes a Student Level Correction component that allows for MDE to track the correction of all individual child noncompliance. For the transition conference timeline, when record reviews were completed, the SEAU provided the date the transition conference was held. This allowed MDE to verify that the actions had been completed, although they may have been late. If the transition conference was not held, MDE required the SEAU to verify the successful transition to Part B. If the child was no longer within the jurisdiction of the SEAU, the SEAU would submit to MDE the reason (e.g., child moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific child. Based on a review of the data, MDE verified all of the transition conferences had been completed and that each SEAU with noncompliance reflected in the data the State reported for this indicator had completed the transition conference, although late, for any child whose transition conference was identified as not timely unless the child was no longer within the jurisdiction of the SEAU, consistent with OSEP QA 23-01. All correction of individual child record noncompliance was completed within the one-year timeframe.

Optional for FFY 2023, 2024, and 2025:

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

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

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

n/a

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

n/a

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

n/a

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

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
71	0	71	0	0

FFY 2023 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified in FFY 2022	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
71	71		100%	100.00%	N/A	N/A

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	0.00%
---	-------

Provide additional information about this indicator (optional)

n/a

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

1. Number of findings of noncompliance the State identified during FFY 2022 (the period from July 1, 2022 through June 30, 2023).	71
2. Number of findings the State verified as timely corrected (corrected within one year from the date of written notification to the EIS program/provider of the finding)	71
3. Number of findings <u>not</u> verified as corrected within one year	0

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

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

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

n/a

12 - OSEP Response

The State has established the baseline for this indicator, using data from FFY 2023, and OSEP accepts that baseline.

12 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Lead Agency Director

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

Name:

Danielle M Hayden

Title:

Early Education Director

Email:

danielle.hayden@state.mn.us

Phone:

612-279-3587

Submitted on:

04/17/25 12:17:37 PM

Determination Enclosures

RDA Matrix

Minnesota

2025 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
81.25%	Meets Requirements

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	8	6	75.00%
Compliance	16	14	87.50%

2025 Part C Results Matrix

I. Data Quality

(a) Data Completeness: The percent of children included in your State's 2023 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e., outcome data)	3,737
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	4,935
Percentage of Children Exiting who are Included in Outcome Data (%)	75.72
Data Completeness Score (please see Appendix A for a detailed description of this calculation)	2

(b) Data Anomalies: Anomalies in your State's FFY 2023 Outcomes Data

Data Anomalies Score (please see Appendix B for a detailed description of this calculation)	2
--	---

II. Child Performance

(a) Data Comparison: Comparing your State's 2023 Outcomes Data to other States' 2023 Outcomes Data

Data Comparison Score (please see Appendix C for a detailed description of this calculation)	1
---	---

(b) Performance Change Over Time: Comparing your State's FFY 2023 data to your State's FFY 2022 data

Performance Change Score (please see Appendix D for a detailed description of this calculation)	1
--	---

Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2023	51.35%	46.56%	56.09%	37.84%	53.50%	45.60%
FFY 2022	51.84%	47.12%	57.22%	40.04%	55.72%	47.74%

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2025: Part C."

2025 Part C Compliance Matrix

Part C Compliance Indicator (2)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2022 (3)	Score
Indicator 1: Timely service provision	99.42%	N/A	2
Indicator 7: 45-day timeline	85.23%	YES	1
Indicator 8A: Timely transition plan	87.24%	YES	1
Indicator 8B: Transition notification	100.00%	N/A	2
Indicator 8C: Timely transition conference	89.66%	YES	2
Indicator 12: General Supervision	100.00%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

(2) The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at:

<https://sites.ed.gov/idea/files/FFY2023-Part-C-SPP-APR-Reformatted-Measurement-Table.pdf>

(3) This column reflects full correction, which is factored into the scoring only when the compliance data are $\geq 90\%$ and $< 95\%$ for an indicator.

Appendix A

I. (a) Data Completeness:

The Percent of Children Included in your State's 2023 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2023 Outcomes Data (C3) and the total number of children your State reported in its FFY 2023 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State's Indicator C3 data by the number of children your State reported exited during FFY 2023 in the State's FFY 2023 IDEA Section 618 Exit Data.

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

Appendix B

I. (b) Data Quality:

Anomalies in Your State's FFY 2023 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2023 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2019 – FFY 2022 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e (numbers are shown as rounded for display purposes, and values are based on data for States with summary statement denominator greater than 199 exiters). In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2023 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State's data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

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

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

Expected Range of Responses for Each Outcome and Category, FFY 2023

Outcome\ Category	Mean	StDev	-1SD	+1SD
Outcome A\ Category a	1.52	3.25	-1.74	4.77
Outcome B\ Category a	1.34	2.98	-1.64	4.32
Outcome C\ Category a	1.25	2.62	-1.37	3.87

Outcome\ Category	Mean	StDev	-2SD	+2SD
Outcome A\ Category b	24.44	8.87	6.69	42.19
Outcome A\ Category c	21.76	13.64	-5.52	49.04
Outcome A\ Category d	26.56	9.69	7.17	45.94
Outcome A\ Category e	25.72	15.93	-6.14	57.59
Outcome B\ Category b	26.16	9.47	7.23	45.1
Outcome B\ Category c	30.12	12.97	4.17	56.07
Outcome B\ Category d	30.25	8.17	13.92	46.59
Outcome B\ Category e	12.12	8.46	-4.79	29.04
Outcome C\ Category b	21.94	9.15	3.64	40.24
Outcome C\ Category c	23.99	13.89	-3.8	51.77
Outcome C\ Category d	32.49	8.51	15.48	49.51
Outcome C\ Category e	20.33	14.99	-9.66	50.31

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

Anomalies in Your State's Outcomes Data FFY 2023

Number of Infants and Toddlers with IFSP's Assessed in your State	3,737
---	-------

Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	22	1,343	632	809	931
Performance (%)	0.59%	35.94%	16.91%	21.65%	24.91%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	30	1,384	909	897	517
Performance (%)	0.80%	37.04%	24.32%	24.00%	13.83%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	23	1,366	644	954	750
Performance (%)	0.62%	36.55%	17.23%	25.53%	20.07%
Scores	1	1	1	1	1

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

Data Anomalies Score	2
----------------------	---

Appendix C

II. (a) Data Comparison:

Comparing Your State's 2023 Outcomes Data to Other States' 2023 Outcome Data

This score represents how your State's FFY 2023 Outcomes data compares to other States' FFY 2023 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement (values are based on data for States with a summary statement denominator greater than 199 exiters). Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

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

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

Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2023

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	46.08%	34.56%	54.67%	27.46%	53.10%	33.55%
90	80.98%	70.42%	82.41%	58.27%	84.63%	73.68%

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

Your State's Summary Statement Performance FFY 2023

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	51.35%	46.56%	56.09%	37.84%	53.50%	45.60%
Points	1	1	1	1	1	1

Total Points Across SS1 and SS2	6
---------------------------------	---

Your State's Data Comparison Score	1
------------------------------------	---

Appendix D

II. (b) Performance Change Over Time:

Comparing your State's FFY 2023 data to your State's FFY 2022 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2022) is compared to the current year (FFY 2023) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of $p \leq .05$. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of '0', '1', or '2' for each State is based on the total points awarded. Where OSEP has approved a State's reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of 'N/A' for this element.

Test of Proportional Difference Calculation Overview

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

Step 1: Compute the difference between the FFY 2023 and FFY 2022 summary statements.

e.g., $C3A \text{ FFY}2023\% - C3A \text{ FFY}2022\% = \text{Difference in proportions}$

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

$\text{Sqrt}([(FFY2022\% * (1-FFY2022\%)) / FFY2022N] + [(FFY2023\% * (1-FFY2023\%)) / FFY2023N]) = \text{Standard Error of Difference in Proportions}$

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

$\text{Difference in proportions} / \text{standard error of the difference in proportions} = z \text{ score}$

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

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

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

0 = statistically significant decrease from FFY 2022 to FFY 2023

1 = No statistically significant change

2 = statistically significant increase from FFY 2022 to FFY 2023

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

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

Summary Statement/ Child Outcome	FFY 2022 N	FFY 2022 Summary Statement (%)	FFY 2023 N	FFY 2023 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	2,504	51.84%	2,806	51.35%	-0.48	0.0137	-0.3514	0.7253	NO	1
SS1/Outcome B: Knowledge and Skills	2,910	57.22%	3,220	56.09%	-1.13	0.0127	-0.8913	0.3728	NO	1
SS1/Outcome C: Actions to meet needs	2,649	55.72%	2,987	53.50%	-2.22	0.0133	-1.6718	0.0946	NO	1
SS2/Outcome A: Positive Social Relationships	3,347	47.12%	3,737	46.56%	-0.56	0.0119	-0.4677	0.64	NO	1
SS2/Outcome B: Knowledge and Skills	3,347	40.04%	3,737	37.84%	-2.20	0.0116	-1.8941	0.0582	NO	1
SS2/Outcome C: Actions to meet needs	3,347	47.74%	3,737	45.60%	-2.15	0.0119	-1.8079	0.0706	NO	1

Total Points Across SS1 and SS2	6
---------------------------------	---

Your State's Performance Change Score	1
---------------------------------------	---

Data Rubric
Minnesota

FFY 2023 APR (1)

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

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

APR Score Calculation

Subtotal	14
Timely Submission Points - If the FFY 2023 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	19

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

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/Settings Due Date: 7/31/24	1	1	1	3
Exiting Due Date: 3/5/25	1	1	1	3
Dispute Resolution Due Date: 11/13/24	1	1	1	3

618 Score Calculation

Subtotal	9
Grand Total (Subtotal X 2.11111111) =	19.00

Indicator Calculation

A. APR Grand Total	19
B. 618 Grand Total	19.00
C. APR Grand Total (A) + 618 Grand Total (B) =	38.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	38.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

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

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

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2025 Submission

SPP/APR Data

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

Part C 618 Data

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

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	7/31/2024
Part C Exiting	FS901	3/5/2025
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	11/13/2024

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

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

Dispute Resolution

IDEA Part C

Minnesota

Year 2023-24

Section A: Written, Signed Complaints

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

Section B: Mediation Requests

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

Section C: Due Process Complaints

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

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

Minnesota

These data were extracted on the close date:

11/13/2024

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2025 will be posted in June 2025. Copy and paste the link below into a browser to view.

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



United States Department of Education Office of Special Education and Rehabilitative Services

Final Determination Letter

June 18, 2025

Honorable Willie Jett
Commissioner of Education
Minnesota Department of Education
400 NE Stinson Boulevard
Minneapolis, MN 55413

Dear Commissioner Jett:

I am writing to advise you of the U.S. Department of Education's (Department) 2025 determination under Sections 616 and 642 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Minnesota meets the requirements and purposes of Part C of the IDEA. This determination is based on the totality of Minnesota's data and information, including the Federal fiscal year (FFY) 2023 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Minnesota's 2025 determination is based on the data reflected in Minnesota's "2025 Part C Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for Minnesota and consists of:

- (1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;
- (2) a Results Matrix (including Components and Appendices) that include scoring on Results Elements;
- (3) a Compliance Score and a Results Score;
- (4) an RDA Percentage based on both the Compliance Score and the Results Score; and
- (5) Minnesota's Determination.

The RDA Matrix is further explained in a document, entitled "How the Department Made Determinations under Sections 616(d) and 642 of the Individuals with Disabilities Education Act in 2025: Part C" (HTDMD-C).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making the Department's determinations in 2025, as it did for Part C determinations in 2016-2024. (The specifics of the determination procedures and criteria are set forth in the HTDMD-C document and reflected in the RDA Matrix for Minnesota.) For the 2025 IDEA Part C determinations, OSEP also considered performance on timely correction of noncompliance requirements in Indicator 12. While the State's performance on timely correction of noncompliance was a factor in each State or Entity's 2025 Part C Compliance Matrix, no State or Entity received a Needs Intervention determination in 2025 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2026 determinations. For 2025, the Department's IDEA Part C determinations continue to include consideration of each State's Child Outcomes data, which measure how children who receive Part C services are improving functioning in three outcome areas that are critical to school readiness:

- positive social-emotional skills;
- acquisition and use of knowledge and skills (including early language/communication); and
- use of appropriate behaviors to meet their needs.

Specifically, the Department considered the data quality, and the child performance levels in each State's Child Outcomes FFY 2023 data. You may access the results of OSEP's review of Minnesota's SPP/APR and other relevant data by accessing the EMAPS SPP/APR reporting tool using your State-specific log-on information at <https://emaps.ed.gov/suite/>. When you access Minnesota's SPP/APR on the site, you will find, in Indicators 1 through 12, the OSEP Response to the indicator and any actions that Minnesota is required to take. The actions that Minnesota is required to take are in the "Required Actions" section of the indicator.

It is important for your State to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

Your State will also find the following important documents in the Determinations Enclosures section:

- (1) Minnesota's RDA Matrix;
- (2) the HTDMD link;
- (3) "2025 Data Rubric Part C," which shows how OSEP calculated the State's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and

400 MARYLAND AVE. S.W., WASHINGTON DC 20202-2600

www.ed.gov

The Department of Education's mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.

- (4) "Dispute Resolution 2023-2024," which includes the IDEA Section 618 data that OSEP used to calculate the State's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Minnesota's 2025 determination is Meets Requirements. A State's 2025 RDA Determination is Meets Requirements if the RDA Percentage is at least 80%, unless the Department has imposed Specific Conditions on the State's last three IDEA Part C grant awards (for FFYs 2022, 2023, and 2024), and those Specific Conditions are in effect at the time of the 2025 determination.

The Secretary is considering modifying the factors the Department will use in making its determinations in June 2026 and beyond, as part of the Administration's priority to empower States in taking the lead in developing and implementing policies that best serve children with disabilities, and empowering parents with school choice options. As we consider changes to data collection and how we use the data reported to the Department in making annual IDEA determinations, OSEP will provide parents, States, entities, and other stakeholders with an opportunity to comment and provide input through a variety of mechanisms.

For the FFY 2024 SPP/APR submission due on February 1, 2026, OSEP is providing the following information about the IDEA Section 618 data. The 2024-25 IDEA Section 618 Part C data submitted as of the due date will be used for the FFY 2024 SPP/APR and the 2026 IDEA Part C Results Matrix and data submitted during correction opportunities will not be used for these purposes. States will not be able to resubmit their IDEA Section 618 data after the due date. The 2024-25 IDEA Section 618 Part C data that States submit will automatically be prepopulated in the SPP/APR reporting platform for Part C SPP/APR Indicators 2, 5, 6, 9, and 10 (as they have in the past). Under EDFacts Modernization, States are expected to submit high-quality IDEA Section 618 Part C data that can be published and used by the Department as of the due date. States are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States to take one of the following actions for all business rules that are triggered in the appropriate EDFacts system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States will be unable to submit the IDEA Section 618 Part C data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part C data.

As a reminder, Minnesota must report annually to the public, by posting on the State lead agency's website, on the performance of each early intervention service (EIS) program located in Minnesota on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Minnesota's submission of its FFY 2023 SPP/APR. In addition, Minnesota must:

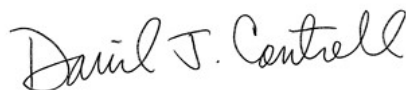
- (1) review EIS program performance against targets in Minnesota's SPP/APR;
- (2) determine if each EIS program "meets the requirements" of Part C, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part C of the IDEA;
- (3) take appropriate enforcement action; and
- (4) inform each EIS program of its determination.

Further, Minnesota must make its SPP/APR available to the public by posting it on the State lead agency's website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

- (1) includes Minnesota's determination letter and SPP/APR, OSEP attachments, and all State attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and
- (2) will be accessible to the public via the ed.gov website.

OSEP appreciates Minnesota's efforts to improve results for infants and toddlers with disabilities and their families and looks forward to working with Minnesota over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,



David J. Cantrell
Deputy Director
Office of Special Education Programs

cc: State Part C Coordinator