

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2024**

Minnesota



**PART C DUE
February 2, 2026**

**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 meet 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 for optimal 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, planful, 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 2024 data demonstrates Minnesota meeting Indicators 2, 6, 8B, and 12. Indicators 1, 3, 5, 7, 8C, and 11 were not met but did not have slippage. Indicators 4 and 8A were not met and had slippage. Indicators 1, 4, 7 8A, and 8C had required actions in the SPP/APR for FFY 2023 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 continued co-lead partnership. Minnesota's Part C families are being served through local public school 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 2024, 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.

Full access, process, policy, and action for each and every child and family remains the focus of Minnesota's early childhood special education programs. Partnerships and collaboration support the whole-child, whole-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 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 community organizations, university programs, and national partners. At MDE, the Early Education Team collaborates with additional 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 and Early/Head Start. These horizontal and vertical alignments afford continuity of support to the field. Inclusion in July 2024 of components of Part C program requirements in DCYF allows streamlining into more collaborations, processes, and systems development. 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/>).

Continuing work that was started with Federal Part C American Rescue Plan (ARP) Act funds, Minnesota realizes the impacts at both state and local levels of the sustainable improvements, supports, and in-reach that occurred throughout the funds expenditure. This past year, we utilized in-reach impact to continue strengthening interagency collaborations through ongoing bi-weekly collaboration with early childhood at the Minnesota Department of Health (MDH) and the team leading work in Neonatal Abstinence Syndrome (NAS). Additionally, we 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 began with ARP funds is the 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. The new survey and implementation of this is rolling out over the next few months and Minnesota is excited to be ready to share our progress during our next reporting period.

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. Minnesota also uses "in-reach" instead of "engagement", at the specific suggestion of family and community partners. 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

With Minnesota's early intervention programs operating within our education system, student enrollment data and information is reported to the state via the Minnesota Automated Reporting Student System (MARSS). This system collects necessary enrollment information as well as demographic and other state specific data. We use the data entered into this system for our 618 data reporting requirements as well as to ensure we are accurately collecting the required child and family outcomes.

Minnesota has also built a child outcomes application to collect the required child outcomes survey data. This system is automated to generate the required collections for each individual SEAU based on the enrollment records reported to the state via the MARSS system. EC Outcomes application has two functions for ensuring EC Outcomes reporting is complete. SEAU's are able to manually add ratings for each child identified for the collection. The data from this system is stored within a secure database and Tableau interactive dashboards are then developed for SEAU's to have their data securely provided for disaggregation.

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

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a scheduled basis. We also continue to update our public facing District Data Profiles (<https://pub.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=550>), which have been helpful in a number of public avenues and are a part of our TA 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 (ELS) 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.

Minnesota uses an online referral system as part of its "child find" efforts in order to support connecting families to early intervention and early childhood special education. This system allows for parents, family/friends, and primary referral sources a uniform way of taking in information about a child and the concerns for their development and automatically sending that information to their district of residence for response. While this system was not designed for robust data analysis, it does process well over 28,000 referrals per year of which roughly 66% are children ages birth to three.

For the purposes of tracking and managing monitoring, 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. 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.

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:

1. 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. Part C monitoring occurs through the co-led interagency agreement between MDE and DCYF. MDE spent several years redeveloping its monitoring process, which was implemented beginning in FFY 2024. In MDE's revised monitoring process, all districts, including charter schools and districts that do not provide EIS, are assigned into one of five cohorts. With over 500 districts, the aim is to have five cohorts, each with a little over 100 districts. In assigning districts, MDE considered the size and location of the district as well as the last year in which the district went through MDE review. 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 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 MDE monitoring activities will be on those districts identified with greater needs. SEAU identified as needing additional program monitoring will enter the three-phase monitoring process. First, MDE will gather additional data from the SEAU, including data from the completion of online staff interviews, 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 involves the completion of corrective actions designed to address any identified noncompliance with targeted technical assistance and coaching for the SEAU. Between 20 and 30 percent of the districts in a cohort are moved into the three-phase comprehensive review process annually. In FFY 2024, the year in which MDE initiated the revised monitoring process with cohort one, 19 districts were identified for comprehensive review; 11 of which include EIS programs.

2. 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 noncompliance.

MDE's general supervision system includes two types of record reviews as of FFY 2024. 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 in cohort one completed the TRR. The focus of the TRR for FFY 2024 is on progress reporting and periodic review requirements.

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 2024, for C1 MDE sampled 413 of the 6410 potential children. For C7, MDE sampled 386 of the 4701 potential children. And for C8, MDE sampled 331 of the 1404 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. 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.

3. 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 record review in Stepwell MN. This system creates a random statewide sample for each indicator. Selected SEAU's 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 2024, the IDC record review was launched March 3, 2025, and due April 30, 2025. In May of 2025 MDE reviewed the data and verified a sample of the reviews. Formal notifications of the findings were released to SEAU's on June 27, 2025.

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

For 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.

5. 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 SEAU's to correct noncompliance prior to issuance of findings.

6. 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 student 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.

7. 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 SEAU's 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 SEAU's 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.

8. 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/>

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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/schfin/fismont/>

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, family context, and self-identified priorities of each and every eligible infant and toddler and their families, so that families experience positive self-identified outcomes.

MDE and DCYF use a variety of mechanisms to provide TA to programs, providers and partners. Minnesota has continued to offer hybrid and virtual methods of TA, ensuring more equitable access to supports across our state and Tribal Nation lands, 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 their learning. In addition, foundational webinars remain available asynchronously along with opportunities to debrief with MDE staff during live Question and Answer (Q&A) sessions.

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 (<https://dcyf.mn.gov/partners-and-providers/child-care-and-early-learning/districts-schools-and-head-start>), but the majority of public facing information related to Part C remains on the MDE website at this time (<https://education.mn.gov/MDE/dse/early/spec/ecse/>). Other places families, caregivers, providers, and partners can go for resources are: Help Me Grow Minnesota (<https://helpmegrowmn.org/HMG/index.htm>), Head Start and Public Preschool Referrals (<https://pub.education.mn.gov/HSPPRreferrals/>), 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/6 19 (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 TA and professional development (PD) needs being addressed throughout the year in expanded capacities. Help Me Grow referral system questions are handled through a dedicated email as well through DCYF (helpmegrow@state.mn.us).

In order to build state staff capacity, MDE and DCYF collaboratively participate in a number of additional intra-and-interagency collaborative initiatives. The co-lead team participates in trainings led by interagency programs like Child Protection and the Early Intensive Developmental and Behavioral Intervention (EIDBI) through DCYF and the Department of Human Services, and the Follow Along Program through the Department of Health.

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 2024:

- Dream Catcher Project sessions and Community of Practice 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://admn.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?ldcService=GET_FILE&dDocName=PROD034482&RevisionSelectionMethod=latestReleased&Ren)

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[dition=primary](#)) through one of our ECSE Specialists and our Part B/619 and Comprehensive System of Personnel Development (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 now at the Department of Children, Youth, and Families 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 maltreatment
- 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 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.

During FFY 2024, the co-lead team continued to expand upon our professional development offerings in order to improve the supports for leaders, providers, and partners. The identified professional development opportunities and program implementation supports are a direct result of feedback from program leaders, providers, families, and partners that support young children with disabilities.

We continued our efforts to provide asynchronous learning opportunities to the early childhood workforce in Minnesota. We grew our online learning catalog to provide a variety of high-quality professional development opportunities. We continued to provide access to the two courses that we launched in August of 2024. A Trauma-Informed Approach to Early Childhood Practice Foundational Course has a total of 620 enrollments (as of 1/2/26) since its launch. It is our course with the highest enrollment. The Reflective Practice for Early Childhood Leaders course has a total of 141 enrollments making up about half of the leaders we have in our programs across the state (as of 1/2/26). In addition to these courses initially launched in August 2024, the team launched five additional asynchronous courses throughout the 2024-25 school year.

We developed three additional trauma-informed courses in partnership with the Child Health and Development Institute of Connecticut (CHDI) that were more role-specific for those in leadership positions (58 total enrollments as of 1/2/26), those working in classroom-based settings (31 total enrollments as of 1/2/26), and those providing support in early intervention (103 total enrollments as of 1/2/26).

We also put out a course titled, “Best Practices in Early Intervention” in partnership with the Family, Infant, and Preschool Program (FIPP). That course is designed for practitioners working with eligible infants, toddlers, and their families focused on enhancing practitioners’ understanding of strategies for increasing caregiver competence and confidence to support their child’s participation in natural activities and routines. As of 1/2/26, there are a total of 307 enrollments in the course.

We also developed an asynchronous course that showcases a variety of current webinars and webinar series’ that are also available on the MDE website (<https://education.mn.gov/MDE/dse/early/spec/ecse/>). This course was a way to put these webinars in one place for ease of access and provides an opportunity for participants to receive clock hour certificates for viewing the webinars and completing reflective activities of webinars that are at least one hour in length. This course has a total of 246 enrollments as of 1/2/26.

State staff have also participated in a variety of professional development opportunities as indicated below:

- We continue participating on the planning team and receiving monthly support from the ECTA and DaSy Family Outcomes Community of Practice focusing on how to improve our return rates, utilize the data and information, and how to better support districts.
- We received system-level racial equity support and intra-and-interagency collaboration from the BUILD Initiative, in addition to our Part C Coordinator participating in the 2025-2026 BUILD LAN Fellowship.
- In addition to receiving support, MDE and the DCYF continued to provide support for the direction, organization, and design of the Minnesota Centers of Excellence for Young Children with Disabilities (MNCoE) through June 30, 2025. MNCoE, a part of our CSPD, worked to connect, support, and empower local leaders to build capacity in early childhood programs. MNCoE provided support to leaders through a network of Professional Development Facilitators (PDFs), located regionally throughout the state.

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- In alignment with the CSPD and work of the ECSE team at MDE and DCYF, staff actively partnered with local program ECSE leaders to identify opportunities to improve practitioner and program quality. This was 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 partnered 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 served as external coaches, assisting in the implementation and facilitation of one of two evidence-based innovations (utilizing the frameworks of active implementation); the Pyramid Model for Infants, Toddlers, and Preschoolers (formerly TACSEI) and Evidence-Based Quality Intervention Practices (EQIP). During FFY 2024 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 along with 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 retired MNCoE at the end of the state fiscal year (June 30, 2025).
- As of July 1, 2025, the MDE Early Education and DCYF Early Learning Divisions are intentionally partnering with the COMPASS [Collaborative Minnesota Partnerships to Advance Student Success] division at MDE, as it is the statewide system for continuous improvement. COMPASS is a collaboration between MDE and the Minnesota Service Cooperatives (<https://education.mn.gov/MDE/dse/compass/ecsecspeced/>). The goals of the partnership are to re-imagine an integrated system of support for early childhood programs that prioritize inclusive, evidence-based, and developmentally appropriate practices from birth. This integrated system is aiming to create new efficiencies, consistencies, alignment, and increased access and opportunity across the state. This connected system of supports and resources works 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.
- The MDE Early Education Division, DCYF Early Learning Services Division, and the Minnesota Service Cooperatives partnered together to hire four COMPASS Early Childhood/Early Childhood Special Education (EC/ECSE) Leads, that are based regionally throughout the state. The COMPASS EC/ECSE Team have two main priorities for the 2025-2026 school year. The first is focused on strengthening early childhood integration within the COMPASS system. The team is focused on learning about the current COMPASS system and work that has been done since its creation in July 2024, while making connections with other content areas within COMPASS to highlight the value, uniqueness, and best practices for early childhood. The second main priority is collaborating with early childhood and early childhood special education leaders throughout Minnesota. The COMPASS EC/ECSE team is focused on ensuring that the supports that they are building for EC/ECSE leaders are connected and aligned with statewide and regional needs. The COMPASS EC/ECSE Team has hosted and participated in engagement sessions where they've listened, gathered, and have started looking for patterns and trends as they analyze the feedback data. The team has also begun drafting out its action plans for the remainder of this school year (2024-2025) and into next year and beyond, working to make sure that the team is providing support to leaders in a way that meets their identified needs.

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 in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IEIC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

Over the past four years, Minnesota has been actively improving our in-reach and listening within each and every community and partner space supporting Part C families, as well as an ever-growing community of parents and families receiving or who have received Part C services. The learning we are doing through this in-reach and from these partners helps inform our priorities for funding, projects, trainings and webinars, online courses, technical assistance and professional development, and more. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable for in-reach and feedback loop processes in addition to growing the community of voices supporting Part C work. We held three in-reach sessions with varied times including evening and ensured all needs for access were met including adult learning strategies and accessibility options. This year, we accessed social media for the first time and multiple monthly reminders of invitation to the scheduled in-reach sessions. For these in-reach sessions, as well as other opportunities throughout the year, we continued using multiple methods of message-sharing to ensure the most families and caregivers possible heard about and were able to attend in-reach opportunities when they arise. Again this year we also asked local providers for help in directly inviting families, communities, and early childhood partners they are serving in their individual communities.

During the SPP/APR and SSIP in-reach sessions, as well as additional in-reach opportunities during monthly leader calls and multiple interagency partner opportunities across FFY 2024, web-based polls have been effective in virtual and in-person capacities to allow for anonymous in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after in-reach meetings conclude. We have found consistently that these methods create reciprocity of communication and more easily allow participants access to the anonymous results of the polls through slides, reminder emails, and follow-up communication. All poll results are openly available to anyone else who requests them. 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.

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In FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developtoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IEIC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular 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)

YES

Number of Parent Members:

150

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 2024 in addition to Parent Members of our ICC which is currently 5):

1. We continued honoring parent membership on the 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 seven years.
3. Representation from our PTIC, including advocacy and Cultural Liaison staff, continues active involvement 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, and our team supports additional state agency departments in learning how to better support families as vendors to ensure fair compensation.
5. 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.

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 in creating and building new Part C processes and strategies. 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 and systems trauma. We continue implementing actions to increase capacity and numbers 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.

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 2024 within the intersectionality of disability race/ethnicity, geography, 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. An example of how this happened in FFY 2024 includes the 12 regional IEICs who are responsible for

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public awareness and outreach around Parts C and B/619. They were authorized to use their funds to support Parent Connectors from these communities and build new community partnerships. Engagements with the IECs were planned in public spaces and included developmental information that had been translated and culturally adapted.

A continued critical system-level action in FFY 2024 was the on-going functional development of our co-lead relationship between DCYF and MDE. The vertical and horizontal relationship developing across both agencies is important to ensuring well-supported children and their families in the transitions across time and programs. This time of transition has supported Minnesota in exploring and better building intra- and inter-agency partnerships that center family capacity-building and leadership in every aspect. We believe this co-lead partnership is strengthening our abilities as a state to exceed OSEP's expectations for increasing the community of parent, caregiver, and family voices leading development and implementation for improved 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.

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 ICC website (<https://education.mn.gov/MDE/about/adv/active/ICC/>). Public opportunity is encouraged during our ICC meetings, which are posted on both the DCYF and the MDE public calendars 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 past year to have monthly virtual meetings 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 for Minnesota. 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 DCYF, we directly supported a number of public engagement and in-reach opportunities for feedback ranging from Part C providers and leaders to Child Care and parts of the Child Welfare system to caregivers, community partners, and ICC members as part of the development and implementation of the 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 DCYF. Ongoing efforts include the MDE website and ICC webpages, the DCYF website (<https://dcyf.mn.gov/>) and Family Outcomes Survey webpage (<https://dcyf.mn.gov/partners-and-providers/child-care-and-early-learning/districts-schools-and-head-start/family-outcomes-survey-part-c>), listservs and GovDelivery, social media, 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 IEC regional teams, and monthly ECSE Leadership calls. Use of online survey systems allow MDE and DCYF to 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 2023 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 2023 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 2023 APR in 2025, is available.

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 (<https://pub.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 SSIP, 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. We also include this information in ICC meetings and other in-reach opportunities to encourage families and additional partners to explore how their local programs are doing.

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

A complete copy of Minnesota's SPP and APR are located on MDE's website on the landing page for the ICC (<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/>.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

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

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

Provide detailed information about the timely correction of 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permits 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	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	99.42%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
373	381	99.42%	100%	98.95%	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.

4

Provide reasons for delay, if applicable.

Of the 381 records reviewed, there were four reported delays in the provision of early intervention services due to district causes. In two 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. For the other two, the SEAUs indicated the documentation of service visits was not properly recorded. They indicated the children and families were receiving services, but the documentation was lacking. In addition, there were four 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 2024 using this new online system. The process for FFY 2024 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 2024 data are based on reviews of records from 124 SEAUs, comprised of 212 individual districts.

Provide additional information about this indicator (optional)

n/a

Correction of Findings of Noncompliance Identified in FFY 2023

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

FFY 2023 Findings of Noncompliance Verified as Corrected

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

To verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. The 2 noncompliant records from FFY 2023 resulted in one finding of noncompliance for 1 SEAU. In FFY 2024, a subsequent review of randomly selected records was completed as part of MDE's monitoring process. The subsequent record reviews confirmed that the SEAU was correctly implementing the regulatory requirements. In FFY 2024 MDE reviewed updated data from the SEAU with identified noncompliance in FFY 2023 and verified that the SEAU is correctly implementing 34 CFR § 303.342(e), as required by OSEP QA 23-01.

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

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The data collection for the FFY 2023 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 student noncompliance. For correction of noncompliance, the SEAU needs to submit documentation to MDE to demonstrate correction. Resubmission is required until the SEAU can demonstrate correction. If the student is no longer within the jurisdiction of the SEAU, the SEAU would submit to MDE the reason (e.g., student moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, MDE verified the SEAU submitted correction for both records with identified noncompliance reflected in the data the State reported for this indicator and that correction documentation verified the records are in compliance or the child is no longer within the jurisdiction of the SEAU. All correction of individual student record noncompliance was completed within the one-year timeframe.

If procedures have been adopted that permit EIS program or providers to correct noncompliance prior to the State’s issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

n/a

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 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.

Response to actions required in FFY 2023 SPP/APR

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE 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.

1 - OSEP Response

The State did not demonstrate that each EIS program or provider corrected the findings of noncompliance identified in FFY 2023 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP QA 23-01. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2023 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.

1 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. In addition, the State must demonstrate, in the FFY 2025 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2023 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2024 and each EIS program or provider with remaining noncompliance identified in FFY 2023: (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 2025 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 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of

noncompliance in FFY 2024. 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

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS902.

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	2019	2020	2021	2022	2023
Target>=	95.00%	95.00%	95.00%	95.00%	95.00%
Data	98.17%	99.53%	96.94%	97.46%	97.47%

Targets

FFY	2024	2025
Target >=	95.00%	95.00%

Targets: Description of Stakeholder Input

Minnesota continues our dedication to doing in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IEIC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

Over the past four years, Minnesota has been actively improving our in-reach and listening within each and every community and partner space supporting Part C families, as well as an ever-growing community of parents and families receiving or who have received Part C services. The learning we are doing through this in-reach and from these partners helps inform our priorities for funding, projects, trainings and webinars, online courses, technical assistance and professional development, and more. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable for in-reach and feedback loop processes in addition to growing the community of voices supporting Part C work. We held three in-reach sessions with varied times including evening and ensured all needs for access were met including adult learning strategies and accessibility options. This year, we accessed social media for the first time and multiple monthly reminders of invitation to the scheduled in-reach sessions. For these in-reach sessions, as well as other opportunities throughout the year, we continued using multiple methods of message-sharing to ensure the most families and caregivers possible heard about and were able to attend in-reach opportunities when they arise. Again this year we also asked local providers for help in directly inviting families, communities, and early childhood partners they are serving in their individual communities.

During the SPP/APR and SSIP in-reach sessions, as well as additional in-reach opportunities during monthly leader calls and multiple interagency partner opportunities across FFY 2024, web-based polls have been effective in virtual and in-person capacities to allow for anonymous in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after in-reach meetings conclude. We have found consistently that these methods create reciprocity of communication and more easily allow participants access to the anonymous results of the polls through slides, reminder emails, and follow-up communication. All poll results are openly available to anyone else who requests them. 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.

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In FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developtoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IEIC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

We are hopeful as we continue building 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 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 (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 furthest from resources.

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part C Child Count - Infants and Toddlers with Disabilities (EDFacts file spec FS902; Data group 5023)	07/30/2025	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	6,364
SY 2024-25 IDEA Part C Child Count - Infants and Toddlers with Disabilities (EDFacts file spec FS902; Data group 5023)	07/30/2025	Total number of infants and toddlers with IFSPs	6,549

FFY 2024 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
6,364	6,549	97.47%	95.00%	97.18%	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

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Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

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the State must separately report outcome data on either: (1) just its at-risk infants and toddlers; or (2) aggregated performance data on all of the infants and toddlers it serves under Part C (including developmentally delayed children, children with diagnosed conditions, and at-risk infants and toddlers).

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

Minnesota continues our dedication to doing in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IEIC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

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In FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IEIC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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Targets remain as set during the FFY 2020 SPP/APR process.

Historical Data

Outcome	Baseline	FFY	2019	2020	2021	2022	2023
A1	2018	Target>=	50.50%	50.50%	50.60%	50.70%	50.80%
A1	50.35%	Data	50.12%	49.90%	49.88%	51.84%	51.35%
A2	2018	Target>=	48.50%	48.50%	49.50%	50.50%	51.50%
A2	48.37%	Data	48.38%	48.82%	47.49%	47.12%	46.56%
B1	2018	Target>=	55.90%	55.90%	60.00%	60.10%	60.20%

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B1	55.80%	Data	57.61%	55.57%	55.79%	57.22%	56.09%
B2	2018	Target>=	41.80%	41.80%	42.30%	43.30%	44.30%
B2	41.67%	Data	43.43%	41.79%	40.52%	40.04%	37.84%
C1	2018	Target>=	57.80%	57.80%	57.90%	58.00%	58.10%
C1	57.74%	Data	57.83%	59.12%	56.27%	55.72%	53.50%
C2	2018	Target>=	50.10%	50.10%	51.10%	52.10%	53.10%
C2	49.99%	Data	50.69%	50.11%	48.90%	47.74%	45.60%

Targets

FFY	2024	2025
Target A1>=	50.90%	51.00%
Target A2>=	52.50%	53.50%
Target B1>=	60.30%	60.40%
Target B2>=	45.30%	46.30%
Target C1>=	58.20%	58.30%
Target C2>=	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	23	0.53%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,484	34.25%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	754	17.40%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	965	22.27%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,107	25.55%

Outcome A	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,719	3,226	51.35%	50.90%	53.29%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	2,072	4,333	46.56%	52.50%	47.82%	Did not meet target	No Slippage

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

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	27	0.62%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,516	35.00%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,018	23.50%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,181	27.27%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	589	13.60%

Outcome B	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 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	2,199	3,742	56.09%	60.30%	58.77%	Did not meet target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	1,770	4,331	37.84%	45.30%	40.87%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	35	0.81%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,492	34.44%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	750	17.31%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,224	28.25%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	831	19.18%

Outcome C	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 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	1,974	3,501	53.50%	58.20%	56.38%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	2,055	4,332	45.60%	54.10%	47.44%	Did not meet target	No Slippage

FFY 2024 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.	4,487
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.	242
Number of infants and toddlers with IFSPs assessed.	4,340

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 now 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).

Minnesota wants to note that overall, there were 4340 children with assessments completed. For each question, there were children whose assessment was unable to be calculated appropriately to be included in the ratings. This did not have a significant impact and appears to be an isolated incidents within the entering of data in our state application.

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.

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 = $\left[\frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family know their rights}}{\text{\# of respondent families participating in Part C}} \right] \times 100$.
- B. Percent = $\left[\frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs}}{\text{\# of respondent families participating in Part C}} \right] \times 100$.
- C. Percent = $\left[\frac{\text{\# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn}}{\text{\# of respondent families participating in Part C}} \right] \times 100$.

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	2019	2020	2021	2022	2023
A	2013	Target>=	92.00%	90.30%	90.60%	91.00%	91.50%
A	89.22 %	Data	91.09%	82.97%	87.41%	85.40%	88.55%
B	2013	Target>=	94.20%	93.40%	93.60%	93.80%	94.00%
B	92.58 %	Data	93.87%	88.36%	90.48%	91.97%	93.25%

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C	2013	Target>=	91.80%	90.60%	90.90%	91.20%	91.50%
C	89.80 %	Data	92.00%	87.05%	90.48%	90.69%	91.62%

Targets

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

Targets: Description of Stakeholder Input

Minnesota continues our dedication to doing in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IELC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

Over the past four years, Minnesota has been actively improving our in-reach and listening within each and every community and partner space supporting Part C families, as well as an ever-growing community of parents and families receiving or who have received Part C services. The learning we are doing through this in-reach and from these partners helps inform our priorities for funding, projects, trainings and webinars, online courses, technical assistance and professional development, and more. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable for in-reach and feedback loop processes in addition to growing the community of voices supporting Part C work. We held three in-reach sessions with varied times including evening and ensured all needs for access were met including adult learning strategies and accessibility options. This year, we accessed social media for the first time and multiple monthly reminders of invitation to the scheduled in-reach sessions. For these in-reach sessions, as well as other opportunities throughout the year, we continued using multiple methods of message-sharing to ensure the most families and caregivers possible heard about and were able to attend in-reach opportunities when they arise. Again this year we also asked local providers for help in directly inviting families, communities, and early childhood partners they are serving in their individual communities.

During the SPP/APR and SSIP in-reach sessions, as well as additional in-reach opportunities during monthly leader calls and multiple interagency partner opportunities across FFY 2024, web-based polls have been effective in virtual and in-person capacities to allow for anonymous in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after in-reach meetings conclude. We have found consistently that these methods create reciprocity of communication and more easily allow participants access to the anonymous results of the polls through slides, reminder emails, and follow-up communication. All poll results are openly available to anyone else who requests them. 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 FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developtoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IELC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

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. Minnesota made progress during FFY 2024 on redesigning the procedures associated with this collection as well as the content of the survey itself while prioritizing opportunities for in-reach with families, cultural liaisons and interpreters, community partners, early childhood partners, and local program providers and leaders. Implementation of the new survey begins during the FFY 2025.

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FFY 2024 SPP/APR Data

The number of families to whom surveys were distributed	3,621
Number of respondent families participating in Part C	480
Survey Response Rate	13.26%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	419
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	480
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	446
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	480
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	443
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	480

Measure	FFY 2023 Data	FFY 2024 Target	FFY 2024 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)	88.55%	92.00%	87.29%	Did not meet target	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)	93.25%	94.20%	92.92%	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)	91.62%	91.80%	92.29%	Met target	No Slippage

Provide reasons for part A slippage, if applicable

In analyzing the data returned, it is indicating that by far and across demographic indicators, fewer families reported that the program helped them to know their rights. This is consistent across regions as well as race with Black, Asian, and Hispanic families reporting less understanding of their rights than our white, 2 or more races, Native American, or Pacific Islander families. We believe that sample size is most likely the impacting factor of the 1.26% 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	2023	2024
Survey Response Rate	9.99%	13.26%

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

Percentage +/- 3% 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.

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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.

Responses were analyzed against the demographic distribution of infants and toddlers served under Part C. Race/ethnicity was categorized according to federal IDEA Section 618 categories, and geographic location was represented by Minnesota's eleven economic development regions.

The representativeness analysis compared survey respondents to the Exit C roster (record of families being served and exiting the program) by race and region. Statewide, survey responses over-represented white families and under-represented Black or African American and Two or More Races. For example, white families comprised 72.5% of survey respondents compared to 62.9% of the Exit C roster (+9.6 percentage points), while Black or African American families represented only 5.0% of survey respondents compared to 10.3% in the roster (-5.3 percentage points). Two or More Races were absent from the survey sample despite representing nearly 7% of the roster.

Regional analysis revealed that Northern Minnesota and Southern Minnesota had the greatest number of race categories outside the ± 3 percentage-point bounds, primarily due to over-representation of white families (greater than 85%) and under-representation of Black or African American families (less than 5%) and Hispanic/Latino families (less than 9%). Metropolitan Minnesota showed moderate imbalance (under-representation of white (66%), Black and Hispanic with 10% and 3% over-representation respectively) while North Central and West Central regions were closer to representativeness but still exhibited gaps for certain race groups.

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.

In order to address representativeness, Minnesota has redesigned its survey and implementation process and will be launching this in February of 2026. The following steps will be implementation improvements:

(a) Expand multimodal survey distribution from primarily providing the survey directly to family at last visit prior to exiting the program to primarily using email and SMS with the implementation of the newly designed survey; (b) Provide culturally and linguistically appropriate materials, including translations and LEP support as appropriate or identified by local programs as the strategy best suited for their families; (c) Partner with OSEP-funded parent centers and local early intervention providers to engage families in Northern and Southern Minnesota and among underrepresented race groups; (d) Analyze demographic representativeness after each survey cycle and adjust outreach strategies accordingly.

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 will allow families another opportunity to self-identify the race, ethnicity, and home language(s) for their child on the survey itself. Additionally, family and community-based recommendations that have been 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; increasing awareness about the survey through more relevant and consistent communication and reminders; creating a meaningful feedback loop for 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 as well as mechanisms to orally respond to the survey in addition to only the paper method at this current time.

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.

Statewide, families reported high levels of agreement that early intervention services helped them achieve the three outcomes: 87.3% affirmed knowing their rights (Question A), 92.9% affirmed being able to communicate their children's needs (Question B), and 92.3% affirmed that services helped their children develop and learn (Question C). However, disparities emerged when disaggregating by race and region. Black or African American families reported lower affirmation rates—75% for knowing rights and 79% for helping children develop and learn—compared to white families who indicated 88% and 92% averages respectively. Northern Minnesota also showed lower affirmation rates across all three outcomes, with approximately 76% for knowing rights and 82% for helping children develop and learn, while other regions consistently exceeded 90%.

During our extensive engagement and redesign of the survey, we received feedback that the meaningfulness of the survey was in question by both families and providers. A primary goal of our redesign was to provide a survey to families that they found resonated with what they wanted providers and programs to know about their experiences as well as to ensure that the outcomes laid out in the indicators are met. First and foremost, it is Minnesota's belief that in order to ensure feedback that is representative of the populations served and nonresponse bias, the questions must be relevant, and the process must feel supportive which was a required outcome of our survey redesign. This redesign process incorporated representative feedback from families served. Additionally, we wanted to ensure that the information that families provide and the experiences they share can be utilized to support the professional development of providers and program improvement outcomes for SEAs. Using this data in the spirit of continuous improvement will be a critical piece of ensuring non-response bias and under-or-over representativeness in the data.

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Another step that we are taking to address non-response bias is “in real time” survey completion rate data to the SEAU's. This will allow us to carefully track representativeness and nonresponse bias and provide districts real time technical assistance on how to support improvements in both. Some strategies that will be supportive of our SEAUs include cultural liaisons, outreach from trusted community partners and organizations, as well as work with Parent Centers.

Provide additional information about this indicator (optional).

Over FFY 2024, we continued TA with ECTA and DaSy as we developed an implementation plan for the newly designed survey and method based on continued in-reach with families, community partners, and providers 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 and geographically disparate data in our child and family outcomes while working to make connections between Part C and Minnesota's continued graduation rate disparities for children with disabilities and intersectionalities of geography, race, and wealth. We believe our new FOS form is clearer, the language more supportive, and translations have been vetted with community. With the upcoming implementation we believe it will increase access and demographically-matched participation from families experiencing Part C while continuing to answer the federal reporting questions for Indicator 4. In order to ensure the new survey form is being utilized as soon as possible, we will be rolling it out statewide in February 2026 and creating Communities of Practice to support local programs and providers in its implementation. Minnesota will continue with in-reach for families and providers to learn how the new survey can be most meaningfully implemented over time (e.g. clarifying the purpose to families in culturally relevant ways; using multiple modalities for both dissemination and retrieval of the family surveys such as continuing paper and electronic methods; utilizing text and/or QR codes; accessing through phone/live; having community trusted partner support and/or an oral ability to share); increasing awareness about the survey through more relevant and consistent communication and reminders; exploring methods for meaningful feedback from families and programs; and discussing ways to honor families' requests to share provider-specific feedback through other aligned methods. A new Part C position will be responsible for directly supporting this implementation.

4 - Prior FFY 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.

Response to actions required in FFY 2023 SPP/APR

The new survey will allow families another opportunity to self-identify the race, ethnicity, and home language(s) for their child on the survey itself. Additionally, family and community-based recommendations that have been included in the new survey and process are: 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; increasing awareness about the survey through more relevant and consistent communication and reminders; creating a meaningful feedback loop for 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 as well as mechanisms to orally respond to the survey in addition to only the paper method at this current time.

During our extensive engagement and redesign of the survey, we received feedback that the meaningfulness of the survey was in question by both families and providers. A primary goal of our redesign was to provide a survey to families that they found resonated with what they wanted providers and programs to know about their experiences as well as to ensure that the outcomes laid out in the indicators are met. First and foremost, it is Minnesota's belief that in order to ensure feedback that is representative of the populations served and nonresponse bias, the questions must be relevant, and the process must feel supportive which was a required outcome of our survey redesign. This redesign process incorporated representative feedback from families served. Additionally, we wanted to ensure that the information that families provide and the experiences they share can be utilized to support the professional development of providers and program improvement outcomes for SEAUs. Using this data in the spirit of continuous improvement will be a critical piece of ensuring non-response bias and under-or-over representativeness in the data.

Another step that we are taking to address non-response bias is “in real time” survey completion rate data to the SEAU's. This will allow us to carefully track representativeness and nonresponse bias and provide districts real time technical assistance on how to support improvements in both. Some strategies that will be supportive of our SEAUs include cultural liaisons, outreach from trusted community partners and organizations, as well as work with Parent Centers.

4 - OSEP Response

4 - Required Actions

In the FFY 2025 SPP/APR, the State must report whether its FFY 2025 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS902 and Census (for the denominator).

Measurement

Percent = $\left[\left(\frac{\text{\# of infants and toddlers birth to 1 with IFSPs}}{\text{population of infants and toddlers birth to 1}} \right) \right] \text{ times } 100.$

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. If the State is required to report on the reasons for slippage, the State must include the results of its analyses.

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.46%

FFY	2019	2020	2021	2022	2023
Target >=	1.21%	1.00%	1.02%	1.04%	1.06%
Data	0.94%	0.71%	0.82%	0.85%	0.91%

Targets

FFY	2024	2025
Target >=	1.08%	1.10%

Targets: Description of Stakeholder Input

Minnesota continues our dedication to doing in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IEIC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

Over the past four years, Minnesota has been actively improving our in-reach and listening within each and every community and partner space supporting Part C families, as well as an ever-growing community of parents and families receiving or who have received Part C services. The learning we are doing through this in-reach and from these partners helps inform our priorities for funding, projects, trainings and webinars, online courses, technical assistance and professional development, and more. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable for in-reach and feedback loop processes in addition to growing the community of voices supporting Part C work. We held three in-reach sessions with varied times including evening and ensured all needs for access were met including adult learning strategies and accessibility options. This year, we accessed social media for the first time and multiple monthly reminders of invitation to the scheduled in-reach sessions. For these in-reach sessions, as well as other opportunities throughout the year, we continued using multiple methods of message-sharing to ensure the most families and caregivers possible heard about and were able to attend in-reach opportunities when they arise. Again this year we also asked local providers for help in directly inviting families, communities, and early childhood partners they are serving in their individual communities.

During the SPP/APR and SSIP in-reach sessions, as well as additional in-reach opportunities during monthly leader calls and multiple interagency partner opportunities across FFY 2024, web-based polls have been effective in virtual and in-person capacities to allow for anonymous in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after in-reach meetings conclude. We have found consistently that these methods create reciprocity of communication and more easily allow participants access to the anonymous results of the polls through slides, reminder emails, and follow-up communication. All poll results are openly available to anyone else who requests them. Another benefit of these poll

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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.

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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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

Targets remain as set during the FFY 2020 SPP/APR process. 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.

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part C Child Count - Infants and Toddlers with Disabilities (EDFacts file spec FS902; Data group 5023)	07/30/2025	Number of infants and toddlers birth to 1 with IFSPs	554
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, 2024	06/03/2025	Population of infants and toddlers birth to 1	61,413

FFY 2024 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
554	61,413	0.91%	1.08%	0.90%	Did not meet target	No Slippage

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

Minnesota did not have slippage for Indicator 5 in FFY 2024 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 2024 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

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

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

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS902 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. If the State is required to report on the reasons for slippage, the State must include the results of its analysis.

6 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	1.56%

FFY	2019	2020	2021	2022	2023
Target >=	3.00%	2.53%	2.60%	2.68%	2.75%
Data	2.96%	2.41%	2.84%	3.14%	3.33%

Targets

FFY	2024	2025
Target >=	2.82%	3.00%

Targets: Description of Stakeholder Input

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In FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developtoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IEIC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

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 ongoing in FFY 2024 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 and 11 Tribal Nations around “child find” and public awareness and outreach.

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part C Child Count - Infants and Toddlers with Disabilities (EDFacts file spec FS902; Data group 5023)	07/30/2025	Number of infants and toddlers birth to 3 with IFSPs	6,549
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, 2024	06/03/2025	Population of infants and toddlers birth to 3	191,770

FFY 2024 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
6,549	191,770	3.33%	2.82%	3.42%	Met target	No Slippage

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

Minnesota did not have slippage for Indicator 6 in FFY 2024 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 2024 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 = $\left[\frac{\text{(\# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline)}}{\text{(\# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted)}} \right] \times 100$.

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

Instructions

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

Targets must be 100%.

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

States are not required to report in their calculation the 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit 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	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	87.84%	92.94%	90.48%	89.55%	85.23%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
243	349	85.23%	100%	89.68%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

70

Provide reasons for delay, if applicable.

Of the 349 initial evaluations, assessments and IFSP meetings in the sample, 106 were not completed within the required 45-day timeline. Twenty-two evaluations were identified as late due to a delay in obtaining parental consent. Forty-eight were identified as late due to exceptional caregiver circumstances such as child or caregiver illness or family unavailability for various reasons. Thirty-six 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 47% identified this as the reason for not meeting the timeline. Approximately 30% were late due to staffing limitations. Other reasons identified included delay due to screening, waiting for information from the family, or delay in communication from intake to evaluation team.

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 2024 using the new web-based monitoring system, Stepwell MN. The process for FFY 2024 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, SEAUs 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. SEAUs with identified noncompliance were then formally notified 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 determined eligible for Part C services and determining whether the evaluation, assessment and initial IFSP meeting was completed within 45 calendar days. The FFY 2024 data are based on reviews of records from 121 SEAUs, comprised of 203 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; 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.

Correction of Findings of Noncompliance Identified in FFY 2023

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
36	36	0	0

FFY 2023 Findings of Noncompliance Verified as Corrected

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

To verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. The 48 noncompliant records from FFY 2023 resulted in findings of noncompliance for 36 SEAUs. In FFY 2024, a subsequent review of randomly selected records from each of the 36 SEAUs was completed as part of MDE's monitoring process. The subsequent record review confirmed that all 36 of the SEAUs were correctly implementing the regulatory requirements. In FFY 2024, MDE reviewed updated data from the SEAUs with identified noncompliance in FFY 2023 and verified that each SEAU is correctly implementing 34 CFR § 303.310, as required by OSEP QA 23-01.

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

The data collection for the FFY 2023 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 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 is missing, MDE requires 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.

If procedures have been adopted that permit EIS program or providers to correct noncompliance prior to the State’s issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

n/a

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 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.

Response to actions required in FFY 2023 SPP/APR

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE 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

The State did not demonstrate that each EIS program or provider corrected the findings of noncompliance identified in FFY 2023 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP QA 23-01. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2023 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.

7 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. In addition, the State must demonstrate, in the FFY 2025 SPP/APR, that the remaining 36 uncorrected findings of noncompliance identified in FFY 2023 corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2024 and each EIS program or provider with remaining noncompliance identified in FFY 2023: (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

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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 2025 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 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2024. 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit 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

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Baseline Year	Baseline Data
2020	92.42%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	94.74%	92.42%	83.91%	80.34%	87.24%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
267	320	87.24%	100%	85.94%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Minnesota reports slippage from the FFY 2023 rate of 87.24% to the FFY 2024 rate of 85.94%. This is a decrease of 1.3%. Of the 320 records that were reviewed in FFY 2024, 267 were found in compliance with this indicator and 8 were found not in compliance due to family reasons. Forty-five records were identified with noncompliance due to district causes in FFY 2024. As noted, this represents overall slippage from FFY 2023 when 231 of the 290 records were found in compliance and 22 were not in compliance due to family reasons. In FFY 2023, 37 records were identified with noncompliance due to district causes.

Eleven of the noncompliant records were cited because a timely transition conference was held, but the transition steps and services were not sufficiently documented within the IFSP. MDE is working with SEAs to clarify that the transition steps and services must be documented in the IFSP even if the child is not transitioning to Part B or if the child was not identified as eligible for Part C until less than 90 days before the child's third birthday.

The majority of the noncompliance related to this indicator is due to the transition conference not taking place at least 90 days before the child's third birthday. Of the thirty-four records without a timely transition conference, seven records identified the reason for delay as scheduling issues. Sixteen 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. Seven records indicated the district did not hold a transition conference even though the child was potentially eligible for Part B. No explanation was provided as to why the conferences were not held. The remaining four records included transition information in the IFSP, suggesting a conference was held, but there was no documentation of the date it was held. MDE continues to work with SEAs to stress the importance of documenting dates of meetings and any reasons why timelines are not being met. MDE has developed trainings to ensure staff understand the requirements related to this indicator and works with the Early Learning Division of MDE and the Department of Children, Youth and Families 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 children exiting Part C who have an IFSP with transition steps and services" field to calculate the numerator for this indicator.

8

Provide reasons for delay, if applicable.

The results of the record reviews indicated 8 children had a late transition conference due to exceptional caregiver circumstances or the unavailability of the caregiver. There were 11 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. One record 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 the SEAs 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 24 records cited because the transition conference did not take place at least 90 days before the child's third birthday, although the IFSPs appropriately documented transition steps and services. There were ten 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

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reason why the transition conference was not held within the required timeframe. Of the thirty-four records without a timely transition conference, seven records identified the reason for delay as scheduling issues. Sixteen 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. Seven records indicated the district did not hold a transition conference even though the child was potentially eligible for Part B. No explanation was provided as to why the conferences were not held. The remaining four records included transition information, suggesting a conference was held, but there was no documentation of the date it was held.

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 2024 using the new web-based monitoring system, Stepwell MN. The process for FFY 2024 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, SEAUs 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 2024 data are based on reviews of records from 133 individual districts representing 100 SEAUs.

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 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 2024 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 2023

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 2023 Findings of Noncompliance Verified as Corrected

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

To verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. The 26 SEAUs with identified noncompliance in FFY 2023 completed a subsequent review of randomly selected records in FFY 2024 as part of MDE’s monitoring process. The subsequent record review confirmed that all SEAUs were correctly implementing the regulatory requirements. In FFY 2024 MDE reviewed updated data from each of the SEAUs with identified noncompliance in FFY 2023 and verified that each SEAU is correctly implementing the regulatory requirements as required by OSEP QA 23-01.

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

The data collection for the FFY 2023 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 SEAU 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 SEAU to verify the successful transition to Part B. If the children were no longer within the jurisdiction of the SEAU, the SEAU was required to 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 has verified that all records with identified noncompliance in FFY 2023 were corrected and the SEAUs are now in compliance or the child is 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.

If procedures have been adopted that permit EIS program or providers to correct noncompliance prior to the State’s issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

n/a

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 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.

Response to actions required in FFY 2023 SPP/APR

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE 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

The State did not demonstrate that each EIS program or provider corrected the findings of noncompliance identified in FFY 2023 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP QA 23-01. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2023 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.

8A - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. In addition, the State must demonstrate, in the FFY 2025 SPP/APR, that the remaining 26 uncorrected findings of noncompliance identified in FFY 2023 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2024 and each EIS program or provider with remaining noncompliance identified in FFY 2023: (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 2025 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 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2024. 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 = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C at age 3 who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{(\# of toddlers with disabilities exiting Part C at age 3)}} \right] \times 100$.
- 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit 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

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

Baseline Year	Baseline Data
2020	100.00%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 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.

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

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 SEAU's.

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 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 2024 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 2023

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

If procedures have been adopted that permit EIS program or providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the *regulatory requirements*; and, (2) each *individual case* of noncompliance was corrected.

n/a

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit 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

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

Baseline Year	Baseline Data
2020	96.97%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	94.12%	96.97%	90.23%	85.52%	89.66%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
238	290	89.66%	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 Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

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, SEAU's 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 SEAU's.

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 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 2024 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 2023

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 2023 Findings of Noncompliance Verified as Corrected

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

To verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. MDE examined each of the findings of noncompliance from FFY 2023 and in FFY 2024 each SEAU completed a subsequent review of randomly selected records as part of MDE's monitoring process. The subsequent record review confirmed that the SEAU's were correctly implementing the regulatory requirements. In FFY 2024 MDE reviewed updated data from each of the SEAU's with identified noncompliance in FFY 2023 and verified that each SEAU is correctly implementing the regulatory requirements, as required by OSEP QA 23-01.

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.

If procedures have been adopted that permit EIS program or providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the *regulatory requirements*; and, (2) each *individual case* of noncompliance was corrected.

n/a

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Accessible format can be found at the Office of Special Education Programs (OSEP): 2026 Determination Letters on State Implementation of IDEA

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 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.

Response to actions required in FFY 2023 SPP/APR

In response to the actions required by OSEP in the FFY 2019 SPP/APR, MDE 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. MDE verified that all SEAU 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 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. In addition, the State must demonstrate, in the FFY 2025 SPP/APR, that the remaining 29 uncorrected findings of noncompliance identified in FFY 2023 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2024 and each EIS program or provider with remaining noncompliance identified in FFY 2023: (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 2025 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 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2024. 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

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS908.

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 2024-25 IDEA Part C Dispute Resolution - Due Process Complaints (EDFacts file spec FS908; Data group 5031)	11/19/2025	3.1 Number of resolution sessions	0
SY 2024-25 IDEA Part C Dispute Resolution - Due Process Complaints (EDFacts file spec FS908; Data group 5031)	11/19/2025	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

Minnesota continues our dedication to doing in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IEIC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

Over the past four years, Minnesota has been actively improving our in-reach and listening within each and every community and partner space supporting Part C families, as well as an ever-growing community of parents and families receiving or who have received Part C services. The learning we are doing through this in-reach and from these partners helps inform our priorities for funding, projects, trainings and webinars, online courses, technical assistance and professional development, and more. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable for in-reach and feedback loop processes in addition to growing the community of voices supporting Part C work. We held three in-reach sessions with varied times including evening and ensured all needs for access were met including adult learning strategies and accessibility options. This year, we accessed social media for the first time and multiple monthly reminders of invitation to the scheduled in-reach sessions. For these in-reach sessions, as well as other opportunities throughout the year, we continued using multiple methods of message-sharing to ensure the most families and caregivers possible heard about and were able to attend in-reach opportunities when they arise. Again this year we also asked local providers for help in directly inviting families, communities, and early childhood partners they are serving in their individual communities.

During the SPP/APR and SSIP in-reach sessions, as well as additional in-reach opportunities during monthly leader calls and multiple interagency partner opportunities across FFY 2024, web-based polls have been effective in virtual and in-person capacities to allow for anonymous in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after in-reach meetings conclude. We have found consistently

that these methods create reciprocity of communication and more easily allow participants access to the anonymous results of the polls through slides, reminder emails, and follow-up communication. All poll results are openly available to anyone else who requests them. 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 FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developtoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IEIC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

Historical Data

Baseline Year	Baseline Data

FFY	2019	2020	2021	2022	2023
Target>=					
Data					

Targets

FFY	2024	2025
Target>=		

FFY 2024 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2024. 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

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS907.

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 2024-25 IDEA Part C Dispute Resolution - Mediation Requests (EDFacts file spec FS907; Data group 5030)	11/19/2025	2.1 Mediations held	1
SY 2024-25 IDEA Part C Dispute Resolution - Mediation Requests (EDFacts file spec FS907; Data group 5030)	11/19/2025	2.1.a.i Mediations agreements related to due process complaints	0
SY 2024-25 IDEA Part C Dispute Resolution - Mediation Requests (EDFacts file spec FS907; Data group 5030)	11/19/2025	2.1.b.i Mediations agreements not related to due process complaints	1

Targets: Description of Stakeholder Input

Minnesota continues our dedication to doing in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IELC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

Over the past four years, Minnesota has been actively improving our in-reach and listening within each and every community and partner space supporting Part C families, as well as an ever-growing community of parents and families receiving or who have received Part C services. The learning we are doing through this in-reach and from these partners helps inform our priorities for funding, projects, trainings and webinars, online courses, technical assistance and professional development, and more. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable for in-reach and feedback loop processes in addition to growing the community of voices supporting Part C work. We held three in-reach sessions with varied times including evening and ensured all needs for access were met including adult learning strategies and accessibility options. This year, we accessed social media for the first time and multiple monthly reminders of invitation to the scheduled in-reach sessions. For these in-reach sessions, as well as other opportunities throughout the year, we continued using multiple methods of message-sharing to ensure the most families and caregivers possible heard about and were able to attend in-reach opportunities when they arise. Again this year we also asked local providers for help in directly inviting families, communities, and early childhood partners they are serving in their individual communities.

During the SPP/APR and SSIP in-reach sessions, as well as additional in-reach opportunities during monthly leader calls and multiple interagency partner opportunities across FFY 2024, web-based polls have been effective in virtual and in-person capacities to allow for anonymous in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after in-reach meetings conclude. We have found consistently that these methods create reciprocity of communication and more easily allow participants access to the anonymous results of the polls through slides, reminder emails, and follow-up communication. All poll results are openly available to anyone else who requests them. 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 FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developtoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IEC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

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

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2019	2020	2021	2022	2023
Target>=					
Data					

Targets

FFY	2024	2025
Target>=		

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
0	1	1			100.00%	N/A	N/A

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2024. 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

Results Indicator: 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 3, 2025). 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 2024 APR, report on anticipated outcomes to be obtained during FFY 2025, i.e., July 1, 2025-June 30, 2026).

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 2024 APR, report on activities it intends to implement in FFY 2025, i.e., July 1, 2025-June 30, 2026) 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/idxplg?IdxService=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	2024	2025
Target A	Data must be greater than or equal to the target	60.30%	60.40%

Target B	Data must be greater than or equal to the target	68.70%	69.50%
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FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	2,202	3,751	56.09%	60.30%	58.70%	Did not meet target	No Slippage
B	3,947	6,343	62.99%	68.70%	62.23%	Did not meet target	No Slippage

Provide the data source for the FFY 2024 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. SEAU's 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 SEAU'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.

Minnesota continues to work with districts on accurate reporting of child enrollment data to the state (a requirement that aids in the creation of child lists associated with each collection). Accurate reporting is a necessary component of ensuring that we have the right children identified for COS collections across our programs. Over the last year, we made additional improvements to our online data submission application that provides cues and real time feedback to districts related to their student enrollment records. In addition to the feedback to our SEAU's, the application now gives real time data completeness feedback to our state team that affords us better real time technical assistance and progress tracking during our collection window.

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

Section B: Implementation, Analysis and Evaluation

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

Theory of Action:

https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD098717&RevisionSelectionMethod=latestReleased&Rendition=primary
Logic Model Operations:

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 children, caregivers, and families furthest from resources.

1. Commitment to further developing sustainable and accessible 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 and engaging virtual calls. 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/SuccessfulLearnerEquationResources/index.htm>).
 - d. Professional development opportunities for leaders, practitioners, and early childhood partners as explained in more detail throughout the SPP/APR are available asynchronously as a way to provide high-quality professional development that meets the needs of the workforce that can be done at the participant's own pace. Many courses also have the ability for participants to receive clock-hour credits for license renewal, Board of School Administrator (BOSA) credits, and credit for professional learning through Develop (a system used by childcare to track professional development). Courses include: a four course series on a trauma-informed approach to early childhood practice; a course focused on reflective practice for early childhood leaders; a course highlighting best practices in early intervention; and a course that houses a variety of MDE-created webinars (also available on the MDE website) so that they are all located in one place for easier access.
 - e. We are also working with a vendor to create a new module for EC/ECSE leaders with three main topics: early childhood history and policy (federal and state), early childhood special education history and policy (federal and state), and disability justice and ableism. The disability justice and ableism part of the module is being designed to meet a new recommendation for teacher licensure. Minn. Stat. § 122A.615, which must include at least two (2) hours of learning content presented by an individual or individuals who identify as having a type of disability or disabilities.
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.

c. We started a segment of our ECSE leader monthly calls addressing specific questions about IDEA laws as identified by patterns from the ECSE mailbox.

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

a. We completed work on our Family Outcomes Survey renewal process in partnership with a family-trusted community partner as well as cultural liaisons, interpreters, and providers who support families within the Part C system.

b. We will be implementing the new FOS survey in FFY 2025 based on recommendations from the Wilder Foundation in-reach. The implementation will be electronic as well as continued paper, with Communities of Practice to support programs and families in ensuring implementation supports families' local and community needs. The opportunity for caregivers to self-select demographic identifiers in the FOS will include a variety of aspects. Translations 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 IECs for data pieces they need to do their public awareness and outreach work more equitably, including access to regional coaches from the ECLDS (<https://eclds.mn.gov/#outreach>).

5. Commitment to the improvement of resources and services available to support family engagement among providers and community partners:

a. The Regional IEC Teams continue their personal and system-level understanding and implementation of work plans for better reaching families, communities, and additional referring partners.

b. 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 provide sustainable and accessible professional development inclusive of practitioners and early childhood leaders that also reflects the communities of families we are supporting across Minnesota and 11 Tribal Nations who share land with us. Additionally, we will build pathways of support through a statewide framework (COMPASS) that are aligned with our K-12 and early care and education partners.

2. Minnesota Part C and Part B/619's co-lead and partnering agencies, MDE and DCYF, will provide Administrative Unit (SEAU) level administrators and early childhood leaders with access to TA 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's co-lead and partnering agencies, MDE and DCYF, will prioritize family, caregiver, and community partnerships in the following ways:

- Implement the Family Outcome Survey renewal and its process with Communities of Practice supporting local programs and families.
- The regional IECs will continue refining their work through ongoing marketing, quantitative, and qualitative data to better meet the needs of specific children and families in their local regions. This year their work included implementing tailored audits based on the work Minnesota did with Dr. Rosemarie Allen and her team in FFY 2023 to ensure we are reaching children and families furthest from resources in ways they want and need. The IECs began a multi-year process through initial completion of the audits and are engaging in deep review with their teams this spring to determine specific actionable goals for FFY 2025 work plans.

4. Minnesota Part C and Part B/619 SEA will design a data literacy plan that will include professional development, improved data dashboards and individual technical assistance to program leaders in building their data literacy capacity in using and responding to their data.

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

- As a follow-up to our four-course series on a trauma-informed approach to early childhood practice, further developments are coming to extend the work in an effort to be responsive to evaluation and feedback surveys from the courses.
- 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 improvement plan continues to promote three distinct sets of evidence-based or evidence-informed practices that were chosen to support practitioners in our 0-3 system who work in homes, classrooms, or who support eligible young children itinerantly: Evidence-based Quality Intervention Practices (EQIP); The Pyramid Model; and Practice-Based Coaching.

As we planned for and moved away from Minnesota's "innovations" (packages of best practices known as EQIP, Pyramid Model, and Classroom Engagement Model) we created a variety of asynchronous professional development opportunities for leaders, practitioners, and early childhood partners that are available statewide. The courses below allow for real time access to evidence-based practices while allowing for program level supports that meet leaders and practitioners where they are.

a) a four-course series focused on best practices in a trauma-informed approach to early childhood in partnership with the Child Health and Development Institute of Connecticut;

- Foundational Course
- Leadership Advanced Course
- Early Intervention Advanced Course
- Classroom-Based Advanced Course

b) a course called "Best Practices in Early Intervention" in partnership with the Family, Infant, and Preschool Program (FIPP);

c) a course called "Reflective Practice for Early Childhood Leaders" in partnership with Center Early Education and Development (CEED) at the University of Minnesota Twin Cities;

d) a course showcasing a variety of current early childhood 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 was a MNCoE innovation that supported practitioners in early intervention to learn and implement Family Centered Practices within Natural Learning Environments, using a Coaching Interaction Style. The essential elements include: coaching, natural learning environment practices, family-centered practices, and teaming and collaboration strategies for implementing the primary service provider approach to teaming. This innovation was changed to be provided via an asynchronous course, "Best Practices in Early Intervention". The course focuses on the same content as the previous EQIP innovation, with the addition of a module focused on capacity-building service coordination.

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.

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 road map 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 2024 we continued to target discretionary federal funds to support local programs implementing one of the evidence-based interventions with the support of the MNCoE PDFs. The allocation process continued to be 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.

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 was 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. These practices are now supported through the Best Practices in Early Intervention course. Facilitation slideshows were also created to support leaders in providing follow-up professional development with their staff that have viewed and engaged in the asynchronous content. Embedded within each of the facilitation slideshows is a place for teams or individuals to action plan around next steps with the learned content.

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.

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.

The Minnesota Innovation Implementation Data (MIID) is a web-based data system for local programs to enter innovation data and generate meaningful reports in real time, to all sites that have participated in an innovation (EQIP and Pyramid Model) 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 have the ability to record coaching log data, fidelity tool data for each specific innovation, and benchmarks of quality that have been established for each innovation. While innovations are not currently supported through MNCoE, the MIID system remains available for those teams that continue to implement the practices.

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.

Through stakeholder engagement, the consensus became that the only way to ensure scalability of these practices was to allow for engagement through readily accessible professional development opportunities offered asynchronously. MDE and DCYF have developed different means to access high quality supports that support the capacity and needs of individual programs while working to support implementation of evidence-based practices through the participation in asynchronous courses.

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.

Continue to support, and guide the use of the "Best Practices in Early Intervention" asynchronous course. This course is available to any early intervention practitioner across the state with additional supportive implementation guides for early intervention leaders.

Continue to provide access to the other asynchronous courses that have been created around trauma-informed practices (four course series), reflective practices for early childhood leaders, and the early childhood webinars available through the webinar course.

With the integration of EC/ESCE positions within COMPASS, we will be building regional networks that 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. Our early childhood programs and their staff will be seen as integral to their districts and cooperatives as well as well as important partners in the early care landscape in which many of our Part C students are supported.

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 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/ldcplg?ldcService=GET_FILE&dDocName=PROD058347&RevisionSelectionMethod=latestReleased&Rendition=primary

Please find our EI/ECSE Operations and Implementation Logic Model at:
https://education.mn.gov/mdeprod/ldcplg?ldcService=GET_FILE&dDocName=PROD058348&RevisionSelectionMethod=latestReleased&Rendition=primary

Section C: Stakeholder Engagement

Description of Stakeholder Input

Minnesota continues our dedication to doing in-reach in ways that center families, caregivers, communities, and programs building what they want and need with us. In addition to continuation of the mechanisms from previous years, we maintain ongoing systems-level in-reach with our 12 regional IEIC teams and our Governor's ICC, both of which intentionally include a large range of people who support children and families in Parts C and B/619. We maintain partnerships for specific in-reach with the Professional Educator Licensing and Standards Board (PELSB) and statewide early childhood special education leadership 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 almost every opportunity of in-reach we hold.

Over the past four years, Minnesota has been actively improving our in-reach and listening within each and every community and partner space supporting Part C families, as well as an ever-growing community of parents and families receiving or who have received Part C services. The learning we are doing through this in-reach and from these partners helps inform our priorities for funding, projects, trainings and webinars, online courses, technical assistance and professional development, and more. At our SPP/APR and SSIP in-reach sessions this fiscal year, we added information about holding our agencies accountable for in-reach and feedback loop processes in addition to growing the community of voices supporting Part C work. We held three in-reach sessions with varied times including evening and ensured all needs for access were met including adult learning strategies and accessibility options. This year, we accessed social media for the first time and multiple monthly reminders of invitation to the scheduled in-reach sessions. For these in-reach sessions, as well as other opportunities throughout the year, we continued using multiple methods of message-sharing to ensure the most families and caregivers possible heard about and were able to attend in-reach opportunities when they arise. Again this year we also asked local providers for help in directly inviting families, communities, and early childhood partners they are serving in their individual communities.

During the SPP/APR and SSIP in-reach sessions, as well as additional in-reach opportunities during monthly leader calls and multiple interagency partner opportunities across FFY 2024, web-based polls have been effective in virtual and in-person capacities to allow for anonymous in-the-moment feedback from in-reach participants, as well as extended time for participant engagement after in-reach meetings conclude. We have found consistently that these methods create reciprocity of communication and more easily allow participants access to the anonymous results of the polls through slides, reminder emails, and follow-up communication. All poll results are openly available to anyone else who requests them. 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 FFY 2024, Minnesota worked to carry on the learning obtained in FFY 2022 with the Family Engagement grants in how we continued prioritizing listening and engagement with families and caregivers, and in our in-reach to additional community partners focused on collaborative problem-solving. We continued in-reach of expanding types of 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 every early childhood partner supporting our young children with disabilities. For example, childcare providers must receive their continuing education credit through DEVELOP (<https://www.developoolmn.org/>), so our state ECSE team at MDE and DCYF has worked to ensure coordination of systems so childcare providers can also receive credit for their engagement in the courses. Additionally, we have interagency collaboration for child protection processes, Healthy Start (a Department of Justice conditional release program) and low-incidence services and supports. Consistent and pivotal engagement also continued as always with multi-year ICC and monthly IEIC meetings, where members were actively engaged in new workgroups and ongoing collaborative co-creation of interagency foci, continued supports for members with aligned statutory requirements, and interactive discussions around continued enhancement of meeting child, family, and community needs within Part C.

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), Statewide low incidence disability specialists, and PACER Center (our Minnesota Parent and Training Information Center, or PTIC) through participation in each CSPD workgroup. Our Leadership Group for the CSPD maintains a regular agenda item of discussion around membership and action items for ensuring we have the needed partners present at all stages of this ongoing work.

Please see additional stakeholder engagement described 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 ongoing development of 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.

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, and annual SPP/APR and SSIP in-reach sessions. 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 partnerships through various workgroups, committees, and family and community engagements.

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 IEC teams responsible for public awareness and outreach, and 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, we continued building ongoing and new relationships with early childhood partners both vertically and horizontally to engage more whole-family foci.

In addition, the ICC and the IECs continued regular interactive meetings and support the work of the SSIP through consistent advisement, assistance, and implementation across all areas. The ICC and IECs have also continued focusing on systems, policy, and programming level changes through humanity foundations going on six 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 as redeveloped at the Minnesota Department of Education and brought along with Part C to DCYF (https://education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&DocName=MDE073769&RevisionSelectionMethod=latestReleased&Render=primary) 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 two years. 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.

The COMPASS EC/ECSE team hosted three virtual engagement sessions in October-November 2025 for early childhood leaders (EC and ECSE district leaders/administrators) throughout the state. During these engagement sessions, leaders were asked to provide feedback around a variety of topics as a data set for the COMPASS EC/ECSE team to use in action planning the work. The COMPASS EC/ECSE team is currently looking at patterns and trends within the data collected to determine next steps for defining the work and creating a system for meeting the identified needs of leaders throughout the state.

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 full population to better serve our families/caregivers historically and currently furthest from resources in Minnesota's Part C programs. While we work to grow our workforce from our communities, we also heard this past year across every region of our state the need for current 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 access for each and every infant, toddler, and family/caregiver in Minnesota and 11 Tribal Nations who share land with us who have been historically and are currently furthest from resources, and the tie between early childhood and graduation rates for each and every child in Minnesota and every 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.

We have begun work through Minnesota's Developmental Screening Taskforce in developing a pilot program to support three counties that have lower screening rates. This work is in the beginning stages and will be updated in the FFY 2025 SPP/APR and SSIP as appropriate.

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 housing concerns, and our children with disabilities. Much of this work is aligned with projects happening through 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.

As of July 1, 2025, the MDE Early Education and DCYF Early Learning Divisions are partnering with the COMPASS [Collaborative Minnesota Partnerships to Advance Student Success] division at MDE, as it is the statewide system for continuous improvement. COMPASS is a collaboration between MDE and the Minnesota Service Cooperatives, and with the addition of early childhood supports, partners at DCYF. 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 is aiming to 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.

The MDE Early Education Division, DCYF Early Learning Services Division, and the Minnesota Service Cooperatives partnered together to hire four COMPASS Early Childhood/Early Childhood Special Education (EC/ECSE) Leads, that are based regionally throughout the state. The COMPASS EC/ECSE team is focused on ensuring that the supports that they are building for EC/ECSE leaders are connected and aligned with statewide and regional needs. The COMPASS EC/ECSE Team has hosted and participated in engagement sessions with EC and ECSE district leaders where they've listened, gathered, and have started looking for patterns and trends as they analyze the feedback data. The team has also begun drafting out its action plans for the remainder of this year and into next year, and beyond, working to make sure that the team is providing support to leaders in a way that meets their identified needs.

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 newly hired a Part C 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 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.

The COMPASS EC/ECSE Team have two main priorities for the 2025-2026 school year. The first is focused on strengthening early childhood integration within the COMPASS system. The team is focused on learning about the current COMPASS system and work that has been done since its creation in July 2024, while making connections with other content areas within COMPASS to highlight the value, uniqueness, and best practices for early childhood. The second main priority is collaborating with early childhood and early childhood special education leaders throughout Minnesota. The COMPASS EC/ECSE team is focused on ensuring that the supports that they are building for EC/ECSE leaders are connected and aligned with statewide and regional needs.

With the addition of a Part C Specialist at DCYF beginning in February of 2026, supports for implementing evidence-based practices in service coordination as well as collaboration with family and community engagement practices will become a significant area of focused support to our SEAs, better supporting the needs of families as well as children.

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

Minnesota is still a new co-lead state as part of our Part C story. Beginning July 1, 2024, the newly formed Department of Children, Youth, and Families (DCYF) 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 continues to bring 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 2025 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).

Provide additional information about this indicator (optional).

n/a

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 2024 submission, use FFY 2023, July 1, 2023 – June 30, 2024)
- # 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

Instructions

Targets must be 100%.

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

Report in Column A, the number of findings of noncompliance made in FFY 2023 (July 1, 2023 – June 30, 2024), as reported in the compliance indicator, and report in Column C1, 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. Report in Column B, the number of additional findings of noncompliance related to the compliance indicator made in FFY 2023 (July 1, 2023–June 30, 2024) and report in Column C2, the number of those additional findings related to the compliance indicator which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance.

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.

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 findings of 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 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%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data					100.00%

Targets

FFY	2024	2025
Target	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 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 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
1	0	1	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

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 1 was identified through the program monitoring Indicator Data Collection (IDC) activity. As reported in Indicator 1, to verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. The 2 noncompliant records from FFY 2023 resulted in findings of noncompliance for 1 SEAU. In FFY 2024, a subsequent review of randomly selected records was completed as part of MDE's monitoring process. The subsequent record reviews confirmed that the SEAU was correctly implementing the regulatory requirements. The subsequent record review confirmed that the SEAU was correctly implementing the regulatory requirements. In FFY 2024 MDE reviewed updated data from the SEAU with identified noncompliance in FFY 2023 and verified that the SEAU is correctly implementing 34 CFR § 303.342(e), as required by OSEP QA 23-01.

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

The data collection for the FFY 2023 IDC record review, used to report on Indicator 1, 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 student noncompliance. For correction of noncompliance, the SEAU needs to submit documentation to MDE to demonstrate correction. Resubmission is required until the SEAU can demonstrate correction. If the student is no longer within the jurisdiction of the SEAU, the SEAU would submit to MDE the reason (e.g., student moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, MDE verified the SEAU submitted correction for both records with identified noncompliance reflected in the data the State reported for this indicator and that correction documentation verified the records are in compliance or the child is no longer within the jurisdiction of the SEAU. All correction of individual student record noncompliance was completed within the one-year timeframe.

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 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 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
36	0	36	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

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 7 was identified through the program monitoring Indicator Data Collection (IDC) activity. To verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. The 48 noncompliant records from FFY 2023 resulted in findings of noncompliance for 36 SEAU. In FFY 2024, a subsequent review of randomly selected records from each of the 36 SEAU was completed as part of MDE's monitoring process. The subsequent record review confirmed that all 36 of the SEAU were correctly implementing the regulatory requirements. In FFY 2024, MDE reviewed updated data from the SEAU with identified noncompliance in FFY 2023 and verified that each SEAU is correctly implementing 34 CFR § 303.310, as required by OSEP QA 23-01.

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

The data collection for the FFY 2023 IDC 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 student 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 student was no longer within the jurisdiction of the SEAU, the SEAU would submit to MDE the reason (e.g., student moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, MDE verified all of the evaluations, 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 student 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 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 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 the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

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 8A was identified through the program monitoring Indicator Data Collection (IDC) activity. To verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. The 26 SEAUs with identified noncompliance in FFY 2023 completed a subsequent review of randomly selected records in FFY 2024 as part of MDE's monitoring process. The subsequent record review confirmed that all SEAUs were correctly implementing the regulatory requirements. In FFY 2024 MDE reviewed updated data from each of the SEAUs with identified noncompliance in FFY 2023 and verified that each SEAU is correctly implementing the regulatory requirements as required by OSEP QA 23-01.

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

The data collection for the FFY2023 IDC 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 student noncompliance. For Part C to Part B transition, when record reviews were completed, the SEAU 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 SEAU to verify the successful transition to Part B. If the student was no longer within the jurisdiction of the SEAU, the SEAU was required to submit to MDE the reason (e.g., student moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, MDE has verified that all records with identified noncompliance in FFY2023 were corrected and the SEAUs are now in compliance, or the student is no longer within the jurisdiction of the SEAU, consistent with OSEP QA 23-01. All correction of individual student 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 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 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 the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

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 8B identified in FFY 2023.

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 8B identified in FFY 2023.

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 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 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 the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.)

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 8C was identified through the program monitoring Indicator Data Collection (IDC) activity. To verify that each SEAU with identified noncompliance in FFY 2023 is correctly implementing the regulatory requirement, MDE required a subsequent review of records to demonstrate compliance. MDE examined each of the findings of noncompliance from FFY 2023 and in FFY 2024 each SEAU completed a subsequent review of randomly selected records as part of MDE's monitoring process. The subsequent record review confirmed that the SEAUs were correctly implementing the regulatory requirements. In FFY 2024 MDE reviewed updated data from each of the SEAUs with identified noncompliance in FFY 2023 and verified that each SEAU is correctly implementing the regulatory requirements, as required by OSEP QA 23-01.

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

The data collection for the FFY 2023 IDC 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 student 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 student was no longer within the jurisdiction of the SEAU, the SEAU would submit to MDE the reason (e.g., student moved) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific student. Based on a review of the data, MDE verified all of the 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 student record noncompliance was completed within the one-year timeframe.

Optional for FFY 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 2023 (7/1/23 – 6/30/24)	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

Please 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 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 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
92	0	92	0	0

FFY 2024 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified in FFY 2023	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
92	92	100.00%	100%	Not Valid and Reliable	N/A	N/A

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

n/a

Summary of Findings of Noncompliance identified in FFY 2023 Corrected in FFY 2024 (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified during FFY 2023 (the period from July 1, 2023 through June 30, 2024).	92
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)	92
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 2023 Not Timely Corrected in FFY 2024 (corrected more than one year from identification of the noncompliance):

4. Number of findings of noncompliance not timely corrected	0
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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

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

12 - Prior FFY Required Actions

None

12 - OSEP Response

OSEP cannot determine whether the data are valid and reliable. The State reported 100% of its findings of noncompliance were corrected within one year of identification. However, the State did not demonstrate that each EIS program or provider corrected the findings of noncompliance identified in FFY 2023 related to: Timely provision of services; 45-Day timeline; Transition steps and services; and Transition conference because it did not report that it verified correction of those findings, consistent with the requirements in OSEP QA 23-01. Specifically, the State did not report that it verified that each EIS program or provider with noncompliance identified in FFY 2023 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.

12 - Required Actions

The State must provide valid and reliable data for FFY 2025 in the FFY 2025 SPP/APR.

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 Hayden

Title:

Early Education Director

Email:

danielle.hayden@state.mn.us

Phone:

6514612-279-3587

Submitted on:

04/21/26 3:06:49 PM

Determination Enclosures

RDA Matrix

Minnesota

2026 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
78.13%	Needs Assistance

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	8	7	87.50%
Compliance	16	11	68.75%

2026 Part C Results Matrix

I. Data Quality

(a) Data Completeness: The percent of children included in your State's FFY 2024 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e., outcome data)	4,340
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	4,487
Percentage of Children Exiting who are Included in Outcome Data (%)	96.72
Data Completeness Score (please see Appendix A for a detailed description of this calculation)	2

(b) Data Anomalies: Anomalies in your State's FFY 2024 Outcomes Data

Data Anomalies Score (please see Appendix B for a detailed description of this calculation)	2
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II. Child Performance

(a) Data Comparison: Comparing your State's FFY 2024 Outcomes Data to other States' FFY 2024 Outcomes Data

Data Comparison Score (please see Appendix C for a detailed description of this calculation)	1
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(b) Performance Change Over Time: Comparing your State's FFY 2024 data to your State's FFY 2023 data

Performance Change Score (please see Appendix D for a detailed description of this calculation)	2
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Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2024	53.29%	47.82%	58.77%	40.87%	56.38%	47.44%
FFY 2023	51.35%	46.56%	56.09%	37.84%	53.50%	45.60%

(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 2026: Part C."

2026 Part C Compliance Matrix

Part C Compliance Indicator (2)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2023 (3)	Score
Indicator 1: Timely service provision	98.95%	NO	2
Indicator 7: 45-day timeline	89.68%	NO	1
Indicator 8A: Timely transition plan	85.94%	NO	1
Indicator 8B: Transition notification	100.00%	N/A	2
Indicator 8C: Timely transition conference	89.66%	NO	1
Indicator 12: General Supervision	Not Valid and Reliable	NO	0
Timely and Accurate State-Reported Data	97.37%		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/FFY2024-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 FFY 2024 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2024 Outcomes Data (C3) and the total number of children your State reported in its FFY 2024 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 2024 in the State's FFY 2024 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 2024 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2024 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 2020 – FFY 2023 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 2024 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 2024

Outcome\ Category	Mean	StDev	-1SD	+1SD
Outcome A\ Category a	1.49	3.27	-1.78	4.76
Outcome B\ Category a	1.29	2.82	-1.52	4.11
Outcome C\ Category a	1.29	2.8	-1.51	4.09

Outcome\ Category	Mean	StDev	-2SD	+2SD
Outcome A\ Category b	24.44	9.04	6.36	42.52
Outcome A\ Category c	22.25	13.92	-5.6	50.09
Outcome A\ Category d	26.34	9.71	6.92	45.76
Outcome A\ Category e	25.48	16.58	-7.68	58.64
Outcome B\ Category b	26.03	9.37	7.29	44.78
Outcome B\ Category c	30.64	13.31	4.01	57.26
Outcome B\ Category d	29.87	8.22	13.44	46.31
Outcome B\ Category e	12.16	9.18	-6.19	30.51
Outcome C\ Category b	22.37	9.63	3.1	41.64
Outcome C\ Category c	24.39	14.01	-3.63	52.41
Outcome C\ Category d	32.05	8.74	14.58	49.53
Outcome C\ Category e	19.89	14.88	-9.87	49.66

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 FFY 2024 Outcomes Data

Number of Infants and Toddlers with IFSP's Assessed in your State	4,340
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	23	1,484	754	965	1,107
Performance (%)	0.53%	34.25%	17.40%	22.27%	25.55%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	27	1,516	1,018	1,181	589
Performance (%)	0.62%	35.00%	23.50%	27.27%	13.60%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	35	1,492	750	1,224	831
Performance (%)	0.81%	34.44%	17.31%	28.25%	19.18%
Scores	1	1	1	1	1

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

Data Anomalies Score	2
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Appendix C

II. (a) Data Comparison:

Comparing Your State's FFY 2024 Outcomes Data to Other States' FFY 2024 Outcome Data

This score represents how your State's FFY 2024 Outcomes data compares to other States' FFY 2024 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 2024

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	48.11%	35.40%	55.43%	29.71%	54.53%	33.99%
90	79.69%	72.29%	81.28%	63.82%	82.81%	75.29%

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 2024

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 (%)	53.29%	47.82%	58.77%	40.87%	56.38%	47.44%
Points	1	1	1	1	1	1

Total Points Across SS1 and SS2	6
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Your State's Data Comparison Score	1
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Appendix D

II. (b) Performance Change Over Time:

Comparing your State's FFY 2024 Outcomes Data to your State's FFY 2023 Outcomes Data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2023) is compared to the current year (FFY 2024) 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 2024 and FFY 2023 summary statements.

e.g., $C3A \text{ FFY}2024\% - C3A \text{ FFY}2023\% = \text{Difference in proportions}$

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

$\text{Sqrt}([(FFY2023\% * (1-FFY2023\%)) / FFY2023N] + [(FFY2024\% * (1-FFY2024\%)) / FFY2024N]) = \text{Standard Error of Difference in Proportions}$

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

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

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

Step 5: The difference in proportions is coded as statistically significant if the p value is 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 2023 to FFY 2024

1 = No statistically significant change

2 = statistically significant increase from FFY 2023 to FFY 2024

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 2023 N	FFY 2023 Summary Statement (%)	FFY 2024 N	FFY 2024 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	2,806	51.35%	3,226	53.29%	1.93	0.0129	1.4983	0.134	NO	1
SS1/Outcome B: Knowledge and Skills	3,220	56.09%	3,742	58.77%	2.68	0.0119	2.2537	0.0242	YES	2
SS1/Outcome C: Actions to meet needs	2,987	53.50%	3,501	56.38%	2.89	0.0124	2.3287	0.0199	YES	2
SS2/Outcome A: Positive Social Relationships	3,737	46.56%	4,333	47.82%	1.26	0.0111	1.1286	0.2591	NO	1
SS2/Outcome B: Knowledge and Skills	3,737	37.84%	4,331	40.87%	3.03	0.0109	2.7810	0.0054	YES	2
SS2/Outcome C: Actions to meet needs	3,737	45.60%	4,332	47.44%	1.84	0.0111	1.6524	0.0984	NO	1

Total Points Across SS1 and SS2	9
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Your State's Performance Change Score	2
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Data Rubric
Minnesota

FFY 2024 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	0	0

APR Score Calculation

Subtotal	13
Timely Submission Points - If the FFY 2024 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	18

(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: 7/30/25	1	1	1	3
Exiting Due Date: 2/18/26	1	1	1	3
Dispute Resolution Due Date: 11/19/25	1	1	1	3

618 Score Calculation

Subtotal	9
Grand Total (Subtotal X 2.11111111) =	19.00

Indicator Calculation

A. APR Grand Total	18
B. 618 Grand Total	19.00
C. APR Grand Total (A) + 618 Grand Total (B) =	37.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	38.00
D. Subtotal (C divided by Denominator) (3) =	0.9737
E. Indicator Score (Subtotal D x 100) =	97.37

(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 2026 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 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	Due Date
Part C Child Count and Setting	FS902, FS903*, FS904*, FS905	7/30/2025
Part C Exiting	FS901	2/18/2026
Part C Dispute Resolution	FS906, FS907, FS908	11/19/2025

* if applicable

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 2024-25

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.	1
(2.1) Mediations held.	1
(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.	1
(2.1) (b) (i) Mediation agreements not related to due process complaints.	1
(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:
11/19/2025

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 2026 will be posted in June 2026. 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 16, 2026

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) 2026 determination under Sections 616 and 642 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Minnesota needs assistance in meeting the requirements 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) 2024 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Minnesota's 2026 determination is based on the data reflected in Minnesota's "2026 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 2026: 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 2026, as it did for Part C determinations in 2016-2025. (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 2026, 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 2024 data. You may access the results of OSEP's review of Minnesota's SPP/APR and other relevant data by accessing the ED Facts Metadata and Process Systems (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) "2026 Data Rubric Part C," which shows how OSEP calculated the Minnesota's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and
- (4) "Dispute Resolution 2024-2025," which includes the IDEA Section 618 data that OSEP used to calculate the Minnesota's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

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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.

As noted above, Minnesota's 2026 determination is Needs Assistance. A State's 2026 RDA Determination is Needs Assistance if the RDA Percentage is at least 60% but less than 80%. A State would also be Needs Assistance if its RDA Determination percentage is 80% or above, but the Department has imposed Specific Conditions on the State's last three IDEA Part C grant awards (for FFYs 2023, 2024, and 2025), and those Specific Conditions are in effect at the time of the 2026 determination.

The Department is committed to transparency, accountability, strong partnerships with States and stakeholders, high expectations, and improved outcomes for children with disabilities. To support these priorities, the Secretary is considering modifications to the factors the Department uses when making determinations, effective June 2027. Potential additional factors include graduation rates and assessment data, such as graduation rates for students with disabilities compared to all students, and Statewide assessment results of students with disabilities compared to all students. Other potential factors include longstanding noncompliance (such as OSEP-identified noncompliance that remains unresolved) as a factor in determinations.

For the FFY 2025 SPP/APR submission due on February 1, 2027, OSEP is providing the following information about the IDEA Section 618 data. The 2025-26 IDEA Section 618 Part C data submitted as of the due date will be used for the FFY 2025 SPP/APR and the 2027 IDEA Part C Results Matrix and data submitted during correction opportunities will not be used for these purposes. The 2025-26 IDEA Section 618 Part C data 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). States and Entities 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 and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in EDPass prior to the applicable due date: 1) revise the uploaded data to address the business rule; or 2) provide a data note addressing why the uploaded data triggered the business rule. States and Entities 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 2024 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,



Erin McHugh
Deputy Director
Office of Special Education Programs

cc: Minnesota Part C Coordinator