# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on FFY 2021

# Oklahoma



PART C DUE February 1, 2023

U.S. DEPARTMENT OF EDUCATION WASHINGTON, DC 20202

#### Introduction

#### Instructions

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

# Intro - Indicator Data

#### **Executive Summary**

IDEA Part C requires the SoonerStart Program to report eleven state accountability indicators found in the State Performance Plan (SPP) to the Office of Special Education Programming (OSEP) annually. Last year (FFY 2020) SoonerStart reviewed its SPP as required every six years by IDEA, Part (Sections 616(b)(1) and 642) and amended the plan with input from stakeholders representing the Interagency Coordinating Council (ICC), Oklahoma Parent Center staff, parents of children currently or previously served in Part C services, early intervention staff, and other community, early childhood and disability advocates from childcare and head start programs and state agencies. For FFY 2021 (2021-2022), aggregated SoonerStart data are compared to the new targets for each of the eleven SPP performance indicators and reported to OSEP in the Annual Performance Report (APR). Again, the program's results are shared with the aforementioned stakeholders for feedback and suggestions for improvement.

Local SoonerStart sites are responsible to OSDE (lead agency) for meeting the target for each indicator, just as the State is responsible to OSEP. SoonerStart uses a Site Data Profile tool to share results with each of the 27 sites annually. For FFY 2021, 96% of SoonerStart sites were determined to meet the requirements of IDEA Part C. The statewide structure of the SoonerStart program is changing from eight Regions with 27 local sites statewide to 12 Districts. In FFY 2022, Part C APR data will be disaggregated by District instead of by local sites to issue determinations.

During FFY 2021, SoonerStart had to make difficult decisions about providing early intervention services in natural environments while COVID-19 remained a health risk to both staff and families in Oklahoma. With everchanging COVID-19 procedures implemented, SoonerStart's child count remained static for this year.

Last year, SoonerStart reported in the APR that Oklahoma was developing a new State Systemic Improvement Plan (SSIP) focusing on improving the social and emotional developmental outcomes for infants and toddlers. In 2022, SoonerStart began the implementation of the Pyramid Model framework at three local pilot sites, however implementation at one site was discontinued due to local staffing issues beyond the control of the program. Early Intervention providers at the remaining sites received intensive training on coaching families in the use of evidence-based practices to support children's social emotional development. Practitioner coaches were selected and trained to provide support to staff throughout the implementation process. Overview

- The percentage of early intervention services provided in the natural environment (home or a community setting, either in-person or via a virtual visit) decreased to 94.1% and did not meet the target of 96%. SoonerStart determined that providers frequently met families in local health departments (service provider locations) at sites experiencing high vacancy rates in order to reduce travel time in an effort to increase providers' capacity to serve more children (Indicator 2).
- The percentage of children who exhibited improved growth in social/emotional skills, skills and knowledge, and appropriate behaviors from program entry to exit improved slightly from the previous year and all three child outcomes met the FFY 2021 target of 85%. The percentage of children who exited SoonerStart with peer-level child outcomes decreased less than 1% but did not meet the revised targets (Indicators 3A, 3B and 3C).
- Parent approval ratings in two of three family outcome statements increased by 5% or greater from last year and met the FFY 2021 targets. One family outcome statement did not meet the target. There were 1142 family survey responses for FFY 2021 which was almost three times the number of responses in FFY 2020 (Indicators 4A, 4B, and 4C).
- The percentage of children served by SoonerStart ages birth to one, and the percentage of all children served (ages birth to three) compared to Oklahoma's birth to three population increased slightly and met the state's revised target for FFY 2021 (Indicators 5 and 6).
- Oklahoma continues to work well with families, as evidenced by the zero counts of complaints (measured through the counts of resolution and mediation sessions in Indicators 9 and 10).
- Oklahoma did not meet the federally required target of 100% on any of the five compliance indicators. However, it increased or maintained its rates for timely initiation of services (1); timely initiation of transition (8A) and timely transmittal of notice to the LEA (8B) (Indicators 1, 7, 8A, 8B and 8C).
- SoonerStart utilizes the ASQ:SE-2 questionnaire as the measurement for the state-identified measurable result (SIMR) reported for Indicator 11. This assessment of social emotional development is completed for children enrolled at the two Pyramid Model pilot sites who have received six months or more of early intervention services. ASQ:SE-2 results indicated that 58.09% of children at the Stillwater and Oklahoma County pilot sites displayed no social emotional concerns meeting the FFY 2021 target of 58% (Indicator 11).

#### Additional information related to data collection and reporting

Oklahoma's data collection period for the FFY 2021 APR occurred between July 1, 2021 and June 30, 2022. The state collects and maintains all Part C data in a statewide database. The child's official educational record is housed in a real-time, web-based data system called EdPlan. The electronic record contains demographic information; evaluation/eligibility information; IFSP, including the transition plan; contact logs; service logs for delivered services; and an accounts payable section for reimbursement of delivered services. All data related to the child and his or her early intervention services are entered directly into the electronic record by SoonerStart staff at each local site. The Part C Data Specialist creates data reports in EdPlan that pull child information as well as services and timeline data directly from the electronic record for all children in the SoonerStart program. Additionally, SoonerStart can formally identify all instances of systemic and single-occurrence non-compliance through EdPlan's data reporting tools. Staff are required to enter the date of all early intervention timeline activities in the child's EdPlan record. If an activity did not meet the compliance timeline (First Intervention Service Visit, IFSP completion, Transition Steps and Services, Notification to the LEA, and Transition Planning Conference), the reason for the delay in meeting the timeline is required to be entered into the child's record and subsequently displays on the specialized data reports. Child level data specific to each Part C compliance and performance indicator are aggregated and reported in the annual APR.

EdPlan is also the source of data utilized for reporting the annual Exiting Report in November of each year and reporting the annual Child Count on December 1st of each year. Dispute Resolution data is maintained separately with the Executive Director of SoonerStart. SoonerStart has not reported any Dispute Resolution sessions in over 10 years.

The EdPlan database is maintained by a private vendor. Systems are in place through a contractual agreement for periodic upgrades and revisions to data collection functionality and content.

# **General Supervision System**

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

The Oklahoma Early Intervention Act designated the Oklahoma State Department of Education (OSDE) as the lead agency and the Oklahoma State Department of Health (OSDH) as the primary partner agency for administering the SoonerStart Early Intervention Program. OSDE is responsible for monitoring progress and providing oversight for early intervention services at 27 sites for infants and toddlers and their families to ensure statewide implementation of the Individuals with Disabilities Education Act (IDEA). Oklahoma's general supervision system is reliant on data collection and

reporting. SoonerStart compiles, analyzes, and utilizes all data submitted by local SoonerStart sites. Part C personnel in Oklahoma are state employees, and SoonerStart implements procedures to promote consistency in data entry and utilization of the EdPlan data system. EdPlan, the State's Part C database which houses all child records electronically, is maintained by an outside vendor. The system is effective in collecting and sorting data for reporting purposes. SoonerStart administrators work closely with the database vendor to implement continuous improvements that greatly enhance the State's ability to report all compliance data and support evidence-based practices accurately. EdPlan's main-menu page hosts user instructions, with real-time assistance available during the workday through the online message board.

Oversight by the OSDE includes the use of various accountability processes. The OSDE collects both compliance and performance data for the Annual Performance Report through the EdPlan database. Oklahoma's General Supervision activities include on-site program improvement visits with the local sites and monitoring for compliance with IDEA Part C regulations. On-site visits occur on a three-year cycle (nine local site visits per year). SoonerStart administrators and program managers from both OSDE and OSDH meet with early intervention staff to learn about local challenges and successes. Staff receive updates on state and federal Part C procedures or changes and are encouraged to share ideas for program improvement with SoonerStart administrators. In person monitoring visits resumed in the Spring of 2022 following virtual visits due to COVID-19 precautions last year. The nine local sites visited during March, April and May of 2022 were Okmulgee, Tulsa, Durant, Poteau, McAlester, Norman. El Reno, Ardmore and Chickasha. SoonerStart onsite monitoring visit cycle will be revised in 2023 due to the geographic restructuring of service areas into twelve districts instead of 27 local sites.

Oklahoma's compliance monitoring process verifies that each local SoonerStart Early Intervention site with non-compliance is correctly implementing the specific regulatory requirements and has corrected any untimely individual records. All 27 SoonerStart sites are monitored annually for each APR indicator. The State's database, EdPlan, can formally identify all instances of systemic and single-occurrence non-compliance through its data reporting tools. EdPlan contains the child's electronic record, and the data reports pull child information and timeline data directly from that record for each child in the SoonerStart program. The electronic record reflects the date that early intervention activities occur and, if not timely, requires staff to enter the reason for missing the timeline. However, non-compliance identification may also come through parent surveys, informal complaints, local/peer feedback, and other periodic reports submitted to the State. Following the formal identification, SoonerStart issues a written finding of non-compliance to the local site for any individual cases of non-compliance identified. The State's APR reports all non-compliance, even if the non-compliance is corrected before the finding is issued. SoonerStart tracks data on every child in Oklahoma by a unique identifier number in the EdPlan database. The monitoring plan includes an annual review of child and site-level compliance data. Steps to implement corrective action plans and action plan tracking and monitoring are defined. Security processes for electronic documents concerning findings of non-compliance are well established. Oklahoma has selected the 4th quarter of the fiscal year (April, May, and June) as the APR reporting period. These results are representative of a full year of the State's data because it includes all areas of the state, all provider types, and all categories of eligible children.

Additionally, the Part C Data Specialist examines data reported for this period and compares them to data for the full year (FFY 2021) to ensure that they are representative of all quarters of the year. The data review for this reporting period occurs in the first two weeks of September for the prior fiscal year. Using EdPlan database reports, the State developed standardized statewide data reports containing all relevant records from all sites. SoonerStart has procedures to review data, identify non-compliance, issue findings, and implement correction of non-compliance at both the child and local site level.

Oklahoma requires verification of child-specific correction of non-compliance and long-term compliance with the regulatory requirements (based on a review of subsequent data reflecting 100% compliance). Verification of correction of non-compliance happens through review of the child's electronic record, and subsequent data reports to ensure that the prescribed corrective action is occurring and is effective. Local site supervisors ensure that correction of non-compliance occurs timely with follow-up verification by the Part C Data Specialist one year from the finding's issuance. The State assures correction of all instances of non-compliance within one year of identification at both the child level and site level.

For Part C, Oklahoma has adopted the Part B due process hearing procedures under 34 CFR 303.430(d)(2), administered through the OSDE Special Education Services.

#### **Technical Assistance System:**

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

The SoonerStart State Leadership Team is responsible for ensuring the timely delivery of high quality, evidence-based technical assistance and support to SoonerStart staff at the 27 local sites across the State. The State Leadership Team is comprised of the SoonerStart Executive Director and Assistant Executive Director with the Oklahoma State Department of Education (lead agency) and the Allied Health Director and Early Intervention Manager with the Oklahoma State Department of Health (partner agency). The Leadership Team, individually and collectively, provides technical assistance to each local site through the monitoring process, scheduled program improvement visits, and staff's responses. Technical assistance includes:

- Support for identifying underlying causes of low performance and non-compliance
- Developing appropriate strategies for improvement
- Troubleshooting issues with the SoonerStart EdPlan database; and
- Providing explanation and clarification of SoonerStart operational procedures and IDEA, Part C regulations.

The Regional Early Intervention Coordinator (REIC) and Health Department Lead Clinician at each SoonerStart site work together to implement policies, procedures, and regulations per IDEA, Part C, and the lead agency. They assure correction of all non-compliance and that procedures are put into place to address child level and systemic non-compliance. The Leadership Team provides technical assistance to identify underlying causes of low performance and non-compliance and help local teams develop appropriate strategies for improvement. Additional resources from the Early Childhood Technical Assistance Center (ECTA Center) and National Center for Systemic Improvement (NCSI) are utilized as needed.

Oklahoma's Part C program has greatly benefitted from the development of the SoonerStart data system which was the result of infrastructure improvement strategies outlined in the FFY 2014 – FFY 2019 SSIP. The EdPlan database has improved monitoring of children's needs and services, reduced data entry errors, and has been established as a sustainable way to ensure accurate and timely long-term data collection. SoonerStart uses both web-based training and local supervisors to provide the initial training and ongoing support for the EdPlan database, which contains the electronic record for children enrolled in the Part C program. An outside vendor maintains the SoonerStart EdPlan database, but all EI staff have access to the Message Board to request information or assistance with features of the system. Detailed database "Tip Sheets" to improve data entry and data report access procedures are posted on the database's Main Menu page. The Assistant Executive Director works with the outside vendor to improve EdPlan and regularly provides staff with updates on new processes and procedures.

SoonerStart continues implementing the revised family interview process with web-based training and technical assistance provided by the REICs and Lead Clinicians at the local site level. The purpose of the revised process is to ensure family engagement and leadership in selecting IFSP outcomes and services, resulting in improved infant and toddler outcomes. The local supervisors monitor fidelity to the process through observation or provider self-assessment with support from the Leadership Team as needed.

The SoonerStart Operations Manual is available on the SoonerStart page of the Oklahoma State Department of Education website. This document is used to support the program's policies and procedures by operationalizing each step of the SoonerStart process. A standing multi-agency task group reviews the Manual regularly to ensure that all guidelines reflect current state and federal regulations/policies as well as current OSDE and OSDH agency practices. Where applicable, operational guidelines link to the new SoonerStart EdPlan database procedures. The Leadership Team announces updates to the Operations Manual in program-wide emails. The SoonerStart Assistant Executive Director has the primary responsibility to respond to staff's questions across the State and provide guidance and written feedback to local SoonerStart sites regarding IDEA, Part C regulations.

COVID-19 continued to impact the availability of face-to-face services in the Fall of 2021. Newly referred families often chose to postpone enrollment until SoonerStart could provide all services in person. Some families grew fatigued with virtual services and exited the program. In January 2022, SoonerStart published the SoonerStart Program Guidance for Early Intervention Services during COVID-19 with updated program procedures for resuming face-to face services following Center for Disease Control (CDC) procedures for masking and social distancing. SoonerStart continued virtual services to provide flexibility in meeting the needs of families and staff. These revised procedures helped the program meet timelines and ensure that documentation of exceptional circumstances for exceeded timelines was completed as indicated in prior OSEP guidance (OSEP QA 21-02).

#### **Professional Development System:**

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

Oklahoma provides professional personnel development to all SoonerStart staff to comply with the IDEA Part C requirement that a state system must include a comprehensive personnel development system. SoonerStart professional development activities ensure accountability and promote the use of recommended evidence-based practices. The goal of SoonerStart's ongoing professional development is to provide EI professionals (service coordinators, service providers, and EI program administration) with the tools, confidence, and competence to equip them to support families. Professional development is crucial in helping SoonerStart staff promote evidence-based practices that assist families in helping their child develop and learn.

To meet this goal, SoonerStart employs a dedicated Professional Development Specialist to develop activities to support providers in meeting program requirements. The Professional Development Specialist ensures that staff are trained to provide quality services to families of eligible infants and toddlers in an individualized, culturally sensitive, and ethical manner. The SoonerStart professional development system is supported and advised by stakeholders serving on the personnel development subcommittee of the ICC and operates in tandem with the TA system. As a component Oklahoma's Part C general supervision system, SoonerStart's professional development system is designed to:

- Be responsive to identified agency/provider/family needs
- Inform the system when new procedures and policies are required
- · Address practice change to improve child and family outcomes, and
- Implement evidence-based practices.

SoonerStart's professional development system includes:

- Entry-level online training modules
- · Information sharing and resource sharing
- Posting trainings and information on the OSDE website-SoonerStart page for families
- Face-to-face professional development activities provided by early intervention content experts.

The identification of professional development needs manifest through a variety of methods including review of local program and statewide data; information from compliance monitoring and quality assurance reviews; new research and current evidence-based practices and initiatives in early intervention; input from local site supervisors; results from training surveys; and national and state-level policy changes. Oklahoma continues to utilize its online learning platform designed by the same vendor that supports the SoonerStart EdPlan database to provide online learning, interactive communities, and a tracking system. The "SoonerStart New Employee Orientation" training series, developed in FFY 2019 continues to be utilized to offer blended learning modules. Online training modules are also available for EdPlan database navigation which covers staff competency requirements for applicable data entry of all SoonerStart children from program entry to exit.

When all face-to-face training was suspended at the beginning of the COVID-19 pandemic, SoonerStart quickly adapted by building an online professional development clearinghouse utilizing Microsoft TEAMS. The program continues to utilize this online system to maintain a master calendar informing staff of both in-house trainings, and trainings provided by outside organizations or community partners. During the pandemic, SoonerStart held all trainings, in-services and even staff meetings virtually and recognized the benefit of providing these activities online. Early Intervention staff received ongoing virtual training and support for providing teleservice visits to families. SoonerStart also provided resources, training, and discussion regarding staff mental health and self-care as personnel navigated working from home amid other stressors. SoonerStart anticipates virtual trainings will be the primary method to provide professional development activities to early intervention staff indefinitely. Virtual options reduce costs for travel and meeting spaces, can accommodate a small or large number of participants, and can be provided with short preparation time to address immediate employee needs. However, SoonerStart also recognizes the value of in-person participation to strengthen co-worker relationships, promote engagement and foster problem solving skills.

Peer-to-peer training on a variety of early intervention topics have been provided by SoonerStart staff. Trainings are recorded and available to new and existing staff members on a permanent basis. Many recorded trainings are also converted to courses in the on-line learning management system to allow more interaction and the tracking of knowledge acquisition that are not available in a recorded Zoom format.

Collaboration with agency partners such as the Oklahoma Assistive Technology Center, the Oklahoma State Department of Health Family Support and Prevention Services, and the Oklahoma Health Care Authority continues to offer new opportunities for staff training. Staff mentoring and peer-to-peer collaborations provide informal training at the local site level across the State.

The newest component of SoonerStart's professional development system is a series of trainings on the Pyramid Model framework and practices. SoonerStart coordinated with the Pyramid Model Consortium (PMC) to lead these trainings in early 2022. Under the tutelage of PMC, the SoonerStart Professional Development Specialist and the SSIP Specialist developed the skills necessary to train new staff in order to provide long term sustainability. The SoonerStart trainers are scheduled to provide Pyramid Model practices training in January, 2023.

SoonerStart's Professional Development Specialist uses state and local resources as well as other leadership personnel to develop a wide array of professional development activities that promote:

- Statewide coordination of training activities related to infants and toddlers and their families;
- Greater access to learning opportunities for families and service providers;
- · A balanced and coordinated schedule of training activities in terms of topics, locations, and dates throughout the State available year-round;
- · On-line and face-to-face training; and
- Specialized training opportunities bringing together families and professionals from different fields, including early education and childcare service providers.

Some of the professional development activities completed in FFY 2021 include:

- Working with our EdPlan database vendor to create tools to track, measure and report on all usage of the courses on the learning management system;
- Designing a series of short trainings to help with fidelity drift by targeting key processes outlined in IDEA Part C to help staff and their supervisors identify and reinforce these vital skills;

- Providing a 2-day statewide conference for SoonerStart service providers and resource coordinators in November of 2022. Twelve experts in the field of early intervention provided breakout sessions. Two keynote sessions on Family Coaching and Primary Service Provision were provided by Dathan Rush, Ed.D., CCC-SLP.
- Creating a sustainable ECO/COS training for all staff on our learning management system,
- Certifying two staff members as trainers for the ASQ 3 and ASQ SE2 screening tools. Following the initial series of trainings for all SoonerStart staff, quarterly trainings are scheduled as a component of onboarding for new staff.
- Creating Communities of Practice for Pyramid Model practitioner coaches and behavior specialists to facilitate discussion and learn new skills in a less formal setting. Communities of Practice foster peer-to-peer support and encouragement while informing the Professional Development Specialist on future training needs.

SoonerStart remains committed to ensuring service providers are equipped to effectively provide services that continually improve the outcomes of infants and toddlers with disabilities and their families.

#### **Broad Stakeholder Input:**

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

The Oklahoma Interagency Coordinating Council (ICC) serves as the primary stakeholder group providing ongoing guidance and input into the SPP/APR and SSIP. Information and updates are provided regularly at each ICC meeting regarding progress towards the achievement of targets, the child outcome data process, selection of targets, training initiatives, and public reporting of program status. SoonerStart provides the ICC sub-committees and special task groups ongoing opportunities for input throughout the year. Each sub-committee follows specific by-laws for the membership that reflects the State's diversity, with sub-committees including Personnel Development, Public Awareness, Program Planning and Evaluation, and Financial Planning. The SoonerStart lead agency identifies broad-based stakeholders (per §303.601) and provides the information about prospective members to the Oklahoma Governor's office for approval and appointment to the council. Members represent service providers, families of children with disabilities under the age of 12, child development instructors, and representatives from state agencies providing services to families of infants and toddlers with disabilities. In December 2022, the Governor appointed fourteen members to the ICC. All appointees except two were new members and included six parents of children under age 12. The new members were provided with an ICC orientation to inform them about ICC structure, history and current issues/activities so that they would be well informed when discussions occur. Members are provided multiple opportunities to share their input throughout the year. Lead Agency personnel provide programmatic updates regularly via email and at each quarterly ICC meeting. The ICC Chair certification provided with the APR submission confirms that the ICC has reviewed Oklahoma's Part C FFY 2021 SPP/APR for accuracy and completeness.

SoonerStart submits the APR for review by the ICC in their December meeting each year. Following the clarification period for the FFY 2020 APR submission, OSEP stated in the Required Actions for Indicator #3 Early Childhood Outcomes, that Oklahoma could not use different baseline years for Statement 1 and Statement 2. In addition to a review of the FFY 2021 data, SoonerStart revisited the FFY 2020 data used to develop the targets for this indicator with the ICC and obtained their recommendation for revising the baselines. Input was also solicited from the APR stakeholders who are not ICC members at an end of the year meeting. Based on consensus from both groups, SoonerStart set the baseline year for Statement 1 as FFY 2020, instead of FFY 2013 to align with the previously approved baseline year for Statement 2.

SoonerStart stakeholders—some of whom have been engaged with strategic planning and program improvement for many years—continued to be included in stakeholder updates regarding the program's performance compared to the newly developed targets in Oklahoma's FFY 2020 – FFY 2025 State Performance Plan (SPP) including the new SSIP. The group consisted of ICC members, early intervention staff, parents of children enrolled or formerly enrolled in SoonerStart, and community early childhood advocates (Head Start, Child Care, Preschool). Many of these participants also serve on the SSIP Stakeholder Advisory Committee. Other participants included representatives from the Oklahoma Parent Center; the Oklahoma Family Network and other disability advocates; state agencies including Oklahoma Department of Mental Health Services; Oklahoma Department of Health, and the Oklahoma Regents for Higher Education, along with other stakeholders representing various state programs and school districts.

Following stakeholder meetings in 2020-2021 to analyze data, set targets, and develop improvement strategies for the FFY 2020 – FFY 2025 SPP and SSIP (reported in FFY 2020 APR), SoonerStart continued to engage stakeholders in improvement discussions at the end of 2021 and throughout 2022. Stakeholder meetings were held on the following dates:

December 1, 2021

January 13, 2022

February 9, 2022

March 5, 2022

June 8, 2022

June 20, 2022

August 15, 2022

September 7, 2022

November 7, 2022 December 7, 2022

SoonerStart holds all meetings via Zoom except ICC meetings which are held in person but also offer a Zoom link to allow participation in discussions to occur virtually. Stakeholders represent all geographic areas of the state so virtual meetings allow participation without the burden and expense of travel to a central location. Invitations are emailed to all stakeholders for each meeting scheduled and includes a registration link. To increase participation, SoonerStart sends a reminder to registered participants one week before the scheduled meeting.

In FFY 2021, SoonerStart added the distribution of a quarterly newsletter as another mechanism to solicit broad stakeholder input. The newsletter includes SPP/APR/SSIP updates, highlights of EI programs around the state, family stories, updates on policies, highlights of the quarter, and a recap of ICC subcommittee work. Each newsletter contains a feedback link so suggestions and questions can be provided back to the SoonerStart administrative team. Stakeholders access the newsletter via an emailed link.

SoonerStart continues to review the "Quick Reference Guide: Working with Stakeholders to Identify Potential Improvement Strategies for Program Improvement (Including the SSIP)" as a resource for stakeholder engagement. This quick reference guide developed by the Early Childhood Technical Assistance Center (ECTA), The Center for IDEA Early Childhood Data Systems (DaSy) and the Regional Resource Center Program (RRCP) is designed to assist states in understanding what information needs to be available in order for stakeholders to assist in selecting potential improvement strategies that will help programs improve results for infants, toddlers and their families with disabilities.

SoonerStart surveyed stakeholders in December 2022 for input on how meetings could be improved as well as feedback on their experience serving as program stakeholders. With a response rate of 33%, most respondents (90%) expressed satisfaction with the frequency of meetings, and the opportunities to ask questions and share ideas with SoonerStart program staff. The program will continue to seek opportunities to solicit new parent stakeholders as well as stakeholders from community advocacy organizations and early childhood programs for their valuable support, insight, and resources.

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

# **Number of Parent Members:**

43

#### **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.

SoonerStart increased efforts to engage parents of children with disabilities to fully participate in the stakeholder process last year and retained 31 of the 40 parent stakeholders in FFY 2021. Along with the new parent members of the ICC (6), SoonerStart solicited additional parents (6) with the help of the Oklahoma Family Network (statewide advocacy organization for families of children with health care needs or disabilities) and the Oklahoma Parent Center.

Parent stakeholders along with stakeholders from community organizations, state agencies and early childhood programs continued to meet bi-monthly from late 2021 throughout 2022 to receive updates on program activities and provide feedback on improvement strategies. The SoonerStart website was updated to include a dedicated page outlining the work completed by stakeholders in FFY 2021. It provides various resource links to specifically help new parent stakeholders gain a better understanding of the processes required for developing targets in a new State Performance Plan (SPP)

Stakeholder meetings are offered via Zoom to enable families from across the state to participate in providing input and evaluating progress toward improvement strategies. As indicated previously, utilizing Zoom significantly reduces the cost of transportation and the travel time to and from a meeting destination. All stakeholders report that virtual meetings offer more flexibility for them to participate from any location using their mobile devices. Additionally, parents with small children at home or who do not have transportation to attend an in-person meeting are not excluded from participating.

In FFY 2021, SoonerStart successfully added a parent stakeholder to the Pyramid Model Local Leadership Team at one of the original SSIP pilot sites. Engaging parents to participate with leadership teams in their communities was a strategy intended to facilitate buy-in and long-term commitment to systemic change. However, due to circumstances beyond the program's control, the Pyramid Model local leadership team discontinued meeting when the SoonerStart site had to withdraw as an SSIP pilot site. Fortunately, that parent remains an active participant in statewide stakeholder meetings and is willing to resume a role on a local leadership team in the future. To mitigate obstacles for family members to attend a local leadership meeting held in person, SoonerStart has allocated funding for travel reimbursement and paying parent participants a childcare stipend.

In all stakeholder engagement, SoonerStart seeks to create an open environment for parents to share their thoughts on program improvement with each other and program administration throughout the stakeholder input process. An agenda for each meeting is shared in advance via an email invitation along with the presentation from the previous stakeholder meeting. This attachment is helpful for stakeholders who were unable to attend the prior meeting or as a reminder of the information shared for stakeholders who were present. At each meeting, data are presented with visual demonstrations using charts and graphs. Stakeholder input is collected through the chat feature of Zoom, or using the Ideaz Board website tool which provides a virtual "sticky note" when parents want to share their thoughts, ideas and questions anonymously.

# **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.

SoonerStart conducted activities to increase the ability of parents to be engaged in the development of implementation activities. SoonerStart utilized information from The Center for IDEA Early Childhood Data Systems Stakeholder Knowledge Toolkit to help stakeholders meaningfully participate in discussions of SPP/APR indicators and review program performance data. SoonerStart also used several outreach mechanisms to ensure that parents from all backgrounds would have the opportunity to participate in stakeholder feedback sessions, including updated website resources for the SPP/APR including the SSIP, notifications and invitations sent through social media and email, and information shared through parent and advocacy organizations across the state. The state worked with the Oklahoma Parent Center and the Oklahoma Family Network (an advocacy organization for families of children with developmental disabilities) to increase outreach to parents. Information on the purpose and process for developing the SPP/APR and SSIP was made available on the SoonerStart website for everyone to review. The program utilized the demographic information collected for Part C enrollment to identify under-represented and minority parents and reached to them via email to encourage their participation in stakeholder discussions. In addition to advance information, participants were provided detailed explanations of each indicator in the APR, how it is measured, and the degree and explanation of slippage or improvement for FFY 2021 during the stakeholder meetings held throughout the year.

In all stakeholder engagement, SoonerStart sought to create an open environment for parents to share their thoughts on program improvement with each other and program administration throughout the stakeholder input process. All communication from SoonerStart as well as meeting presentations was designed to ensure that participants would have the knowledge they would need to meaningfully participate in defining future plans and improvement outcomes as well as revising targets for program performance as applicable. To ensure the state had broad stakeholder input in making the OSEP required revisions to the FFY 2020 baselines and targets for Statement 1 of Part C Indicator 3A, 3B and 3C, SoonerStart sought parent stakeholder feedback as well as that of the ICC. Previous presentations, including visual displays of historical results and targets for Indicator 3, were provided to review the information from the FFY 2020 target-setting discussions. Stakeholders were provided a detailed explanation of the indicator, how it is measured and the reason behind OSEP's requirement for making the revision. Facilitated discussion as well as question and answer opportunities ensured that parent stakeholders had adequate information to make the decision to reset the baseline year for Statement 1 of Indicator 3A, 3B, and 3C as FFY 2020, instead of FFY 2013 to align with the previously approved baseline year for Statement 2.

SoonerStart continues to provide resources and engagement opportunities designed to strengthen the capacity of parent stakeholders and build opportunities to further collaborate and better serve diverse groups of families and children in order to improve outcomes for infants and toddlers with disabilities and their families.

#### **Soliciting Public Input:**

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

In addition to feedback received during stakeholder meetings, SoonerStart ensures that information presented is available for comment from those unable to directly participate. The primary method used to solicit additional public input for developing improvement strategies, and evaluating progress, is to publish all resources on a public forum, specifically the SoonerStart website: https://sde.ok.gov/soonerstart-apr-stakeholder-engagement. Each stakeholder discussion about the SPP/APR targets and goals has been posted there, as well as each SSIP presentation. Presentations include polls with stakeholder selection of targets and methodologies. Solicitation of public input was initiated for the SSIP beginning in November 2020 in emails to parents, staff and community advocates. Solicitation of public input was initiated for APR Target Setting in August 2021. Links to information posted on the website related to both the SSIP and the APR Target Setting efforts were included in the email invitations.

SoonerStart presented the stakeholder selected targets for the FFY 2020 – FFY 2025 State Performance Plan for ICC approval in December 2021. The presentation was included in the meeting agenda which was publicly posted in advance of the ICC meeting inviting persons interested to attend. Additionally, the public was welcomed to attend the ICC meeting in December, 2022 when progress was evaluated by the comparison of program data to targets for the submission of the FFT 2021 Annual Performance Report (APR).

#### Making Results Available to the Public:

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

The results of the target setting, data analysis, development of the improvement strategies, and evaluation were posted on the Soonerstart website. https://sde.ok.gov/soonerstart-apr-stakeholder-engagement before the FFY 2020 SPP/APR was submitted February 1, 2022. Stakeholder presentations for FFY 2021 containing information regarding any new improvement strategies as well as evaluating progress by comparing program data to targets in the APR are also posted and available to the public. The same information is included as a discussion item on the official ICC agenda to be reviewed at quarterly ICC meetings. ICC meetings are open to the public and agendas are posted in advance per state open meeting regulations. The results were also emailed to stakeholders who participated in any of the discussions throughout the year.

#### Reporting to the Public:

How and where the State reported to the public on the FFY 2020 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2020 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

SoonerStart has made its FFY 2020 SPP/APR and its Part C Annual Determination Letter for FFY 2020 available to the public on the OSDE website: http://ok.gov/sde/datareporting-part-c/

SoonerStart Site Data Profiles for FFY 2020 and FFY 2021 of each program in the state are posted on the OSDE website:

http://ok.gov/sde/datareporting-part-c/

For FFY 2020, Site Data Profiles were provided to the local sites on December 1, 2021 and for FFY 2021, Site Data Profiles were provided to the local sites on December 1, 2022. Site Data Profiles are posted on the OSDE website at http://ok.gov/sde/datareporting-part-c/ before the February 1st SPP/APR submission each year.

### Intro - Prior FFY Required Actions

None

# Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support the State lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report.

OSEP accepts the SICC form, which will not be posted publicly with the State's SPP/APR documents.

#### Intro - Required Actions

# **Indicator 1: Timely Provision of Services**

#### **Instructions and Measurement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

#### **Data Source**

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

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

# 1 - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data
2005	96.74%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.07%	97.88%	98.62%	99.07%	98.97%

#### **Targets**

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

#### FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
950	1,132	98.97%	100%	99.03%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

171

#### Provide reasons for delay, if applicable.

SoonerStart reported that 171 children did not receive timely initial IFSPs due to exceptional family circumstances. These exceptional family circumstances included when the child was unavailable to complete the first intervention visit because the parent cancelled or no-showed the appointment. SoonerStart also documented exceptional family circumstances when repeated attempts to contact the family to schedule the first intervention visit were unsuccessful in a timely manner.

Eleven children did not receive timely first intervention visits due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling conflict.

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).

Oklahoma defines "timely" receipt of early intervention services as 15 working days from the date of parent consent on the IFSP to the date of the first intervention service provided to the family.

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

State database

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

Data were collected during the time period between April 1, 2022 and June 30, 2022 (4th quarter of FFY 2021)

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

Program data for this indicator are collected from Oklahoma's Part C program's online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff create an electronic record in EdPlan for each infant and toddler that enters the program with a referral. For children who are evaluated and determined eligible for an IFSP, the date of the first intervention service following parental consent on the IFSP is entered by the service provider in the electronic record. EdPlan allows for a direct flow of information from each local SoonerStart site to OSDE as the lead agency, enabling centralized monitoring and oversight. The dates of the first intervention service for all initial and subsequent IFSPs completed during the time period reported are reviewed by SoonerStart supervisors at each local site. Any data missing or appearing to be incorrect that is identified using the First Intervention Visit database report created by the Part C Data Specialist are verified by comparing it to the child's electronic record in EdPlan. Delays attributed to Exceptional Family Circumstances are documented in the child's electronic record as are delays attributed to staff reasons. The child's electronic record contains all necessary information to monitor timeline compliance.

Oklahoma has chosen to utilize the first intervention service data associated with IFSPs completed in the fourth quarter (April 1, 2022 to June 30, 2022) to report in the FFY 2022 APR, as it has done the past five years. The SoonerStart Part C Data Specialist examined data that were reported for this time period and compared them to data for the full year (FFY 2021). Based on the number and percentages of completed IFSPs for the entire year, Oklahoma determined the 4th quarter data are not representative of all quarters for FFY 2021 due the increased number of IFSPs completed in the 4th quarter. However, the data are valid and reliable. The 4th quarter results accurately reflect data for the full reporting period because all areas of the state, all provider types and all categories of eligible children are included.

1st Quarter -	846 IFSPs	22.33%
2nd Quarter	834 IFSPs	22.01%
3rd Quarter -	977 IFSPs	25.79%
4th Quarter -	1132 IFSPs	29.87%

Provide additional information about this indicator (optional)

# Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Verified as Corrected Within One Year		Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	5	0	0

### FFY 2020 Findings of Noncompliance Verified as Corrected

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

In FFY 2020, Oklahoma's Part C lead agency issued five findings of noncompliance for Indicator 1. In September 2022, the Part C Data Manager conducted verification of correction of noncompliance to ensure systemic compliance for each of the five SoonerStart sites identified with findings of noncompliance. Oklahoma defines timely services as occurring within 15 working days of parent consent on the Initial or Annual IFSP.

Utilizing the First Intervention Visit Report, the Part C Data Manager pulled subsequent data from the Part C database, EdPlan, for all children actively enrolled at each of the five sites on September 1, 2022. The first intervention visit date of each child with an initial or annual IFSP completed in the prior three months was compared to the calculated first intervention visit target date (15 working days from the date of parent consent on the IFSP) to ensure

that the first intervention visit occurred timely and that the site was correctly implementing the regulatory requirements for timely services. Following this review of subsequent data, the five SoonerStart sites issued findings in FFY 2020 were found to be in 100% compliance. Systemic compliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

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

The Oklahoma Part C Lead Agency annually monitors 100% of the local SoonerStart sites to determine if all sites are in compliance for the timely initiation of early intervention services (Indicator 1). Noncompliance is identified using the EdPlan database with data pulled from the active records of all children enrolled in the SoonerStart program during the fourth quarter of each fiscal year.

In FFY 2020, individual instances of noncompliance were identified in five local SoonerStart sites and each site was issued a letter of finding on December 1, 2021. The findings were issued even though the first intervention visit, although late, had been completed (unless the child was no longer within the jurisdiction of the SoonerStart Part C program) by the time the noncompliance was identified. The Part C Data Manager verified that each individual instance of noncompliance was corrected by looking at each child's electronic record maintained in the EdPlan database. Correction in each individual case of noncompliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

### Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

# 1 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

#### Response to actions required in FFY 2020 SPP/APR

In the FFY 2021 SPP/APR, Oklahoma verified that each local program site with noncompliance identified in FFY 2020 for Indicator 1 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02.

# 1 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2021- June 30, 2022). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

### 1 - Required Actions

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

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

#### Indicator 2: Services in Natural Environments

# **Instructions and Measurement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

#### 2 - Indicator Data

# **Historical Data**

Baseline Year	Baseline Data
2005	95.52%

FFY	2016	2017	2018	2019	2020
Target>=	95.50% 95.50% 96.00		96.00%	96.00%	96.00%
Data	97.29%	96.53%	95.06%	96.30%	98.33%

# **Targets**

FFY	2021	2022	2023	2024	2025
Target >=	96.00%	96.00%	96.00%	96.00%	96.00%

#### **Targets: Description of Stakeholder Input**

In FFY 2020, SoonerStart shared detailed explanatory and contextual information with stakeholders in the discussion of each APR indicator. SoonerStart provided stakeholders with the definition of natural environment and examples of service locations in the community that fit the definition. Data analysis for Indicator #2 indicated that over 95% of children with IFSPs received services in their natural environment over the past five years. With the historical data above 95%, stakeholders chose to set the same target for each year of the six year SPP at 96%. SoonerStart and stakeholders agreed that families should have the latitude to choose the location of early intervention services even if outside of the child's natural environment. In reviewing the data for FFY 2021 with stakeholders, it was noted that IFSP services in the natural environment decreased below the target. SoonerStart shared with stakeholders that more early intervention services were offered in service provider locations in the reporting year and the reasons this occurred. (See slippage statement below). Despite SoonerStart not meeting the FFY 2021 target, stakeholders agreed that 96% is a rigorous target for services in the natural environment that still allows for service locations to be individualized to the family's needs and circumstances.

# **Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age		Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,138
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	2,271

#### FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,138	2,271	98.33%	96.00%	94.14%	Did not meet target	Slippage

# Provide reasons for slippage, if applicable.

Oklahoma did not meet its target for Indicator 2 and experienced significant slippage in the number of children who primarily received early intervention services in the home or community-based setting for the reporting period. Child Count data from December 1, 2021 (used in the FFY 2021 APR) indicated that three times more children were served in other settings (non-natural environments) as compared to the previous year. SoonerStart's analysis of child count data for FFY 2021 determined that 80% of the services setting reported as "other" was for the "service provider location." Additional analysis indicates that "service provider location" was most frequently used at sites experiencing high vacancy rates (with a corresponding increase in the use of contracted provider agencies). The rationale at the affected sites was to reduce travel time in an effort to increase providers' capacity to serve more children while efforts were underway to hire staff for vacant positions. Contracted provider agencies were also heavily utilized to ensure children received appropriate services; however, these agencies did not serve families in a natural environment.

### Provide additional information about this indicator (optional).

Data for Indicator 2 (Services in the Natural Environment) were taken from Child Count data collected December 1, 2021, and submitted April 1, 2022. The 2021 child count remained static following the 2020 child count which was significantly lower than prior years due to the impact of the COVID-19 pandemic.

# 2 - Prior FFY Required Actions

None

# 2 - OSEP Response

# 2 - Required Actions

# **Indicator 3: Early Childhood Outcomes**

#### **Instructions and Measurement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

#### **Data Source**

State selected data source.

#### Measurement

Outcomes:

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

#### Progress categories for A, B and C:

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

#### **Summary Statements for Each of the Three Outcomes:**

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

### **Measurement for Summary Statement 1:**

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

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

#### **Measurement for Summary Statement 2:**

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

#### Instructions

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

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

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

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

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

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

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

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

#### 3 - Indicator Data

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

NC

### **Targets: Description of Stakeholder Input**

In FFY 2020, SoonerStart shared detailed explanatory and contextual information with stakeholders in the discussion of each APR indicator. As a result of data analysis and discussion, stakeholders settled on using the historic trendline in setting interval and final targets for each Early Childhood Outcome's Statements 1 and 2. Based on year over year results, stakeholders decided to keep baselines for Statement 1 unchanged but revised baselines for Statement 2 to address a multi-year trend of decreasing peer-level outcomes that was exacerbated during the pandemic. In the final FFY 2020 APR, OSEP stated that Oklahoma must revise baselines to use data from the same year across Early Childhood Outcome summary Statements 1 and 2 in the FFY 2021 SPP/APR, and with stakeholder input, revise any targets as appropriate to ensure the FFY 2025 targets reflect improvement over baseline.

Stakeholders reconvened to review OSEP's required action. SoonerStart briefly reviewed data points from prior meetings and led the discussion to determine whether to keep the FFY 2013 baselines for ECO summary statements 1 and 2 or revise the baselines for Statement 1 using FFY 2020 data to match the baseline year previously agreed upon for Statement 2. Stakeholder consensus remained that the baselines revised for Summary Statement 2 in the FFY 2020 APR were appropriate. Stakeholders agreed with SoonerStart that the negative trend in peer-level outcomes is due to the increasing severity of need in the children it serves and the short timeframes of service provision (most children stay in the program less than one year). With this decision, the baselines for Summary Statements 1 were revised based on FFY 2020 data and targets updated for each specific child outcome. The ICC provided the final stakeholder approval for aligning baselines for both Summary Statements to FFY 2020 and the subsequent target updates required to show improvement over baseline by FFY 2025.

#### **Historical Data**

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2020	Target>=	78.50%	78.50%	79.00%	79.00%	79.00%
A1	84.38%	Data	84.99%	83.35%	84.69%	84.96%	84.38%
A2	2020	Target>=	52.50%	52.50%	53.00%	53.00%	48.50%
A2	48.58%	Data	53.50%	54.01%	52.09%	50.20%	48.58%
B1	2020	Target>=	83.50%	83.50%	84.00%	84.00%	84.00%
B1	85.10%	Data	85.01%	86.10%	88.26%	86.09%	85.10%
B2	2020	Target>=	46.50%	46.50%	47.00%	47.00%	39.50%
B2	39.83%	Data	45.15%	45.55%	44.30%	41.19%	39.83%
C1	2020	Target>=	84.50%	84.50%	85.00%	85.00%	85.00%
C1	85.82%	Data	87.03%	86.81%	86.90%	87.68%	85.82%
C2	2020	Target>=	47.50%	47.50%	48.00%	48.00%	43.50%
C2	43.56%	Data	48.53%	49.78%	48.37%	47.23%	43.56%

# **Targets**

FFY	2021	2022	2023	2024	2025
Target A1>=	84.00%	84.50%	84.50%	84.50%	85.00%
Target A2>=	48.50%	49.00%	49.00%	49.50%	49.50%
Target B1>=	85.00%	85.50%	85.50%	85.50%	86.00%
Target B2>=	40.00%	40.00%	40.50%	40.50%	41.00%
Target C1>=	85.00%	85.50%	85.50%	85.50%	86.00%
Target C2>=	43.50%	44.00%	44.00%	44.50%	44.50%

### FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

1,487

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	7	0.47%

Outcome A Progress Category	Number of children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	185	12.44%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	584	39.27%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	582	39.14%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	129	8.68%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,166	1,358	84.38%	84.00%	85.86%	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	711	1,487	48.58%	48.50%	47.81%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	3	0.20%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	182	12.24%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	730	49.09%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	529	35.57%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	43	2.89%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,259	1,444	85.10%	85.00%	87.19%	Met target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	572	1,487	39.83%	40.00%	38.47%	Did not meet target	Slippage

# Provide reasons for B2 slippage, if applicable

The FFY 2021 data indicates the percent of infants and toddlers who were functioning within age expectations in the acquisition and use of knowledge and skills by the time they turned three years of age or exited the Part C program was below the target of 40.00 percent by 1.54 percent, a decrease from the previous reporting period (39.83 percent) of 1.37 percent. However, the difference in scores between the two years (P>.42952) is not statistically significant (using a z-test for differences in proportions), suggesting it happened by chance. SoonerStart also did not meet targets in 3A and 3C peer-level outcomes, but the slight percentage decrease did not trigger slippage. SoonerStart will review ECO completion procedures to determine if updates are needed and also follow up with local site supervisors to ensure new staff are receiving timely training on the ECO completion procedures.

#### 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	5	0.34%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	187	12.58%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	650	43.71%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	571	38.40%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	74	4.98%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,221	1,413	85.82%	85.00%	86.41%	Met 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	645	1,487	43.56%	43.50%	43.38%	Did not meet target	No Slippage

### 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	2,438
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.	762

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

Program data for this indicator comes from Oklahoma's Early Intervention online database, EdPlan. SoonerStart maintains an electronic record for each infant and toddler in the program, including an electronic version of the Child Outcome Summary Form. Service provider staff are responsible for inputting entry ratings in the electronic COS form within 30 days following the initial IFSP's development. Exit ratings and progress statements are entered for each child exiting SoonerStart if he or she received services for at least a 180-day period from the date of the IFSP to the date of the child's exit from the program. Staff enter the COS ratings and progress information within 30 days of the child's third birthday or 30 days following the child's exit from the program if the child leaves the program before age 3. Periodically, the Part C Data Specialist generates an Early Childhood Outcome report from the EdPlan database to review data completeness. After data are validated for completeness annually in September, Oklahoma uses the Early Childhood Technical Assistance Center (ECTA) COS Calculator to convert the raw data into federal reporting categories included in the Annual Performance Report and disaggregated for local site profiles.

Provide additional information about this indicator (optional).

# 3 - Prior FFY Required Actions

The State has provided baselines using data from FFY 2013 for A1, B1, and C1, and using data from FFY 2020 for A2, B2, and C2. The State must revise baselines to use data from the same year across summary statements in the FFY 2021 SPP/APR, and with stakeholder input, revise any targets as appropriate to ensure the FFY 2025 targets reflect improvement over baseline.

# Response to actions required in FFY 2020 SPP/APR

Stakeholders reconvened to review OSEP's required action. Stakeholder consensus remained that the baselines revised for Summary Statements 2 in the FFY 2020 APR were appropriate; therefore, baselines for Summary Statements 1 were revised based on FFY 2020 data and targets updated to ensure the FFY 2025 targets reflected improvement over baseline. The revised baseline and year for ECO Summary Statements 1 has been entered in the Historical Data table in Indicator 3. Revised targets for Summary Statements 1 for FFY 2020 - FFY 2025 have been entered in the Targets table.

# 3 - OSEP Response

The State has revised the baselines for sub-indicators A1, B1, and C1 for this indicator, using data from FFY 2020, and OSEP accepts those revisions.

The State revised its FFY 2021 through FFY 2025 targets for sub-indicators A1, B1, and C1 for this indicator, and OSEP accepts those targets.

# 3 - Required Actions

# **Indicator 4: Family Involvement**

### **Instructions and Measurement**

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

Beginning with the FFY 2022 SPP/APR, due February 1, 2024, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race and ethnicity in its analysis. In addition, the State's analysis must also include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another demographic category approved through the stakeholder input process.

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

#### 4 - Indicator Data

### **Historical Data**

Measure	Baseli ne	FFY	2016	2017	2018	2019	2020
А	2020	Target>	94.00%	95.00%	96.00%	96.00%	85.25%
А	85.75 %	Data	98.67%	97.59%	99.31%	98.33%	85.75%
В	2020	Target>	94.00%	95.00%	96.00%	96.00%	87.50%
В	###C0 4BBA SEDA TA###	Data	98.23%	99.12%	99.31%	99.76%	87.96%
С	2020	Target>	94.00%	95.00%	96.00%	96.00%	97.00%

С	97.54 %	Data	97.12%	99.67%	97.58%	99.52%	97.54%
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#### **Targets**

FFY	2021	2022	2023	2024	2025
Target A>=	86.00%	87.00%	88.00%	89.00%	90.00%
Target B>=	88.00%	88.50%	89.00%	89.50%	90.00%
Target C>=	97.00%	97.50%	97.50%	97.50%	98.00%

#### Targets: Description of Stakeholder Input

In FFY 2020, SoonerStart, with stakeholder discussion and agreement, revised the scoring calculation for all survey responses so that a response of "highly disagree" receives a score of "0" and "highly agree" receives a score of 3. This change was made to set a true zero value for a respondent who highly disagrees on all questions. Additionally, stakeholders recommended that the percentage or cut-off score that defines an individual's response as one that SoonerStart helped the family (a response of approval) should be increased from 50% of the total possible score to 66% or better. With input from stakeholders, SoonerStart determined new baselines and annual targets for each Family Outcome statement due to the scoring calculation changes.

SoonerStart shared the FFY 2021 results for Indicator 4 with stakeholders who commended SoonerStart staff for their successful efforts in increasing the number of survey responses from the prior year by almost 36%. However, stakeholders questioned the slight slippage from last year in affirmative responses that early intervention services have helped the family help their children develop and learn (4C). Review of family responses to the openended question, "Please tell us anything you would like SoonerStart to know about your experiences this past year" provided some insight into possible reasons for the slippage. There were ten or more responses expressing frustration with SoonerStart COVID-19 protocols restricting face-to-face services during community outbreaks or when someone in the child's home was ill. Two or three responses were highly critical of virtual services and indicated early intervention visits were declined until in-person services could be resumed. Parent stakeholders expressed an understanding of this sentiment and agreed that if additional families felt the same way they may have selected a less than affirmative survey response to statement 4C.

Stakeholders indicated that they were appreciative of the SoonerStart staff and the work they do with families. They easily recognized that the FFY 2021 Family Outcomes Survey results reveal overall family satisfaction with the SoonerStart program staff and the services received.

#### FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	2,271
Number of respondent families participating in Part C	1,142
Survey Response Rate	50.29%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,046
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,139
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	1,052
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,138
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,085
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,142

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	85.75%	86.00%	91.83%	Met target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	87.96%	88.00%	92.44%	Met target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	97.54%	97.00%	95.01%	Did not meet target	Slippage

# Provide reasons for part C slippage, if applicable

SoonerStart did not meet their target of 97.00% for Statement 4C and experienced slippage from FFY 2020 results. As explained in the Stakeholder section above, a review of family responses to the open-ended question, "Please tell us anything you would like SoonerStart to know about your experiences this past year" provided some insight into possible reasons for the slippage. There were ten or more responses expressing frustration with

SoonerStart COVID-19 protocols restricting face-to-face services during community outbreaks or when someone in the child's home was ill. Two or three responses were highly critical of virtual services and indicated early intervention visits were declined until in-person services could be resumed. SoonerStart hypothesizes that if additional families felt the same way they may have selected a less than affirmative survey response to statement 4C resulting in slippage from FFY 2020.

Sampling Question	Yes / No
Was sampling used?	NO

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

If not, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. Please see below for our analysis of the response rate and representativeness, and our recommended strategies to improve.

#### **Survey Response Rate**

FFY	2020	2021
Survey Response Rate	13.43%	50.29%

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 response rate increased more than four-fold in FFY 2021, when the SoonerStart state office provided local units monthly updates on the number of survey responses received to date. With this information, local teams were more focused on efforts to encourage families to complete surveys, especially if the number of responses were low for the month. This approach was added to a multitude of other strategies currently implemented by SoonerStart to increase family survey response rates which include:

- 1. Ensuring all families receive information on accessing the survey within three months following the initial IFSP meeting, at the Annual IFSP meeting and when exiting SoonerStart
- 2. Partnering with the Oklahoma Parents Center to disseminate Family Surveys
- 3. Providing a detailed brochure explaining the Family Survey to each family at the initial IFSP meeting
- 4. Requiring Resource Coordinators to record on the IFSP document that they provided survey information to the family at the IFSP meeting
- 5. Providing multiple options for completing the survey which includes online, by telephone or mailing in a paper copy
- 6. Assisting families in completing surveys online by providing access to a laptop or smartphone for the parent to use while SoonerStart staff are in the home.
- 7. Emailing families upon exiting the program to ask them to respond to the family survey (an active hyperlink is included in the email).
- 8. The family survey response rate is included as a measurement for the local site annual determination. The metric awards points based on the number of family survey responses as a percentage of the local site's one-day child count.

SoonerStart provides all families access to the survey on multiple occasions and does not target families for responses based on a demographic category (child race/ethnicity, gender or age). SoonerStart cannot guarantee that the response pool will ever be perfectly representative (as it could be if responses were solicited using a weighted sample) because completing the survey is totally voluntary. Nevertheless, SoonerStart will continue to explore new strategies to increase the survey response rate of all families at all sites, without demographic preference or bias.

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.

Oklahoma's survey response rate was 50.29%. Respondents identifying as White had a 44.92% response rate, followed by Two or More Races at 21.9%, American Indian at 9.80%, Hispanic at 9.72%, Black at 5.34%, Asian at 1.48% and Pacific Islander at 0.43%. The analysis that Oklahoma completed identified Asian and Pacific Islander as the lowest race demographic in response rates, however the P-value calculated for the percent of surveys received versus the percent of families identified in these demographic categories in the 2021 Child Count indicated no statistically significant difference. The response rate for two or more races was double that demographic reported by families when enrolling in the SoonerStart program. It is difficult to surmise the reason respondents may identify as two or more races when completing the survey but chose only one race category at enrollment. Historically, the lowest response rate was for the Hispanic population, however targeted efforts to increase responses in this group has resulted in the response rate being representative of the Hispanic population served.

The survey response rate analyzed by gender and age was determined to be representative of the service population with the exception of over-representation in responses from families of children age birth to one. In response to OSEP's request that the state survey families of children who have received services for a minimal period of time to ensure that data is collected from families of eligible children who are birth to one (Oklahoma's FFY 2016 APR), SoonerStart modified the program's survey collection procedures. Families are offered surveys at each IFSP meeting held beginning at the Initial IFSP. The result has been a significant increase on survey responses from families of children ages birth to one.

SoonerStart family surveys are completely anonymous and offered to all families enrolled at each of the 27 local sites at each IFSP meeting. Through the analysis of the survey data, SoonerStart did not identify any non-response bias. However, the state has taken the following steps to decrease any possible future non-response as follows:

- •Send reminders to potential families: Sending reminder emails throughout the data collection period has been shown to effectively increase the response rate. The State will look into sending reminder emails midway through the collection period and near the end of the collection period.
- Ensure confidentiality: SoonerStart staff will assure families that all information will be kept confidential. In addition, staff will inform families who will view the survey results and how their data is utilized.
- Promote alternate means of distribution and collection: The SoonerStart family survey is available to be completed online via Survey Monkey, by telephone through the Oklahoma Parent Center and by mailing a paper survey to the Oklahoma Parent Center. The survey is available in both English

and Spanish. SoonerStart staff will be more intentional in their reminders of the multiple ways currently available for survey completion.

• Express commitment: SoonerStart families should feel that the survey is valuable and that their responses are valued. If families feel the survey is important, they may feel more committed to completing and returning the survey. SoonerStart staff will reassure the family that their response is vital to the program's success.

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.

Respondent children's gender, age, and race are compared to those reported and collected in the December 1, 2021 Child Count.

As reported in the description of demographic representation that follows, the response pool varies from the service population with regard to race and ethnicity.

SURVEY RESPONSES: (1142)	2021 CHILD C	OUNT: (2271) DIFFERENCE	P-VALUE
		0.0258	
Asian 1.48%	2.38%	0.009	0.08186 (not significantly different)
Black 5.34%	8.01%	0.0267	0.00424 (significantly different)
Hispanic 9.72%	9.78%	0.006	0.95216 (not significantly different)
Pacific Islander 0.43%	0.44%	0.001	0.9681 (not significantly different)
		0.119	
White 44.92%	62.18%		0.00001 (significantly different)
Prefer not to answer 6.30%	0	0.063	0.00001 (significantly different)

SoonerStart recognizes that its survey response pool does not match the child count demographics by racial identification. Four race groups are represented at significantly different rates among survey respondents compared to the child count. Native Americans and those identifying as "Two or more races" are over-represented among respondents, while Black and White respondents are-under represented. SoonerStart does not have an explanation for these disparities except to hypothesize that when enrolling, families are less likely to indicate that their child identifies with multiple races compared to when responding to an anonymous survey. Oklahoma has seen this phenomenon on past surveys. SoonerStart hypothesizes that the anonymity of the survey presents respondents an opportunity to mark racial identity differently than at enrollment in the program,. An example is if a child lives with two parents - one who identifies as American Indian and one who identifies as White, the race selected at enrollment may be marked as White, or American Indian or Two or More Races depending on which caregiver completes it. This may be entirely different than the race reported on the survey, especially if the other parent completes it. Caregivers of a child may easily mark only one race at enrollment and choose "two or more" when completing the family survey at a later date. The program has not tested nor verified this conjecture, however.

Efforts to increase Hispanic family responses over the past several years have been successful, contributing to this group's over-representation last year. In FFY 2021, the percentage of responses from families identifying as Hispanic (9.72%) is representative of the service population identifying as Hispanic (9.78%).

Age group variation also exists, with two age groups showing significant differences between the rates among respondents and those in the service population (child count). Because of efforts to increase response rates among families of very young children in past years due to low representativeness, the rate of responses has increased to reflect a higher percentage of this group compared to the SoonerStart service population. The program believes that the best way to re-balance the response pool is to increase the response rate and encourage all families to respond, especially those with older children. A small portion, 2.4%, preferred not to report their child's age at the time of response.

Age Group	Survey Responses (11	42) 2021 Child Count (2271	l) Difference	P-value
Birth to 1	20.05%	15.24%	0.0481	0.0004 (significantly different)
1 to 2	32.22%	31.00%	0.0122	0.47152 (not significantly different)
2 to 3	45.35%	53.76%	0.0841	0.00001 (significantly different)
More than 3	7 added to above	ve for %		, -
Prefer Not to an	nswer2.36%	0		

As shown in the comparisons below, respondents reported align very closely with the overall child count demographics for gender. A small portion, 2.2%, preferred not to report their child's gender at the time of response.

Note: positive difference indicates over-representation in the survey response pool; negative difference indicates under-representation.

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

The State uses a statistical formula (Z-test for two population proportions) to determine if two proportions (i.e., % of surveys received versus % of families in the target population) should be considered statistically different. A p-value less than 0.05 indicates a statistically significant difference between the proportions (non-representativeness).

#### Provide additional information about this indicator (optional).

SoonerStart also compared the respondent children's gender, age, and race with the same demographic categories for Oklahoma's population. The population estimates were retrieved from the CDC Wonder website. Bridged-Race Population Estimates are only available through 2020 and do not contain data for Pacific Islander and Two or More Races. As a general observation, the demographic characteristics of children whose families completed a survey do not appear to be representative of all Oklahoma children with the same demographic characteristics. SoonerStart has no expectation or intention of achieving representativeness in the comparison of survey respondents children's gender, age, and race with the same categories of the state's population.

	- F-F-memorn		
RACE	SURVEY RESPONSES	2021 CHILD COUNT	OKLAHOMA POPULATION
American Indian	9.80%	7.22%	11.61%
Asian	1.48%	2.38%	2.98%
		8.01%	
Hispanic	9.72%	9.78%	9.17%
Pacific Islander	0.43%	0.44%	Not Available
Two or more races	21.9%	10.00%	Not Available
White	44.92%	62.18%	54.89%
Prefer not to answer	6.30%	0	

AGE	SURVEY RESPONSES -	2021 CHILD COUNT	OKLAHOMA POPULATION
Birth to 1	20.05%	15.24%	32.79%
1 to 2	32.22%	31.00%	33.31%
2 to 3	45.35%	53.76%	33.90%
Prefer Not to answer	2.36%	0	
GENDER	SURVEY RESPONSES	2021 CHILD COUNT	OKLAHOMA POPULATION
Female	38.35%	38.27%	48.79%
Male	59.46%	61.73%	51.21%
Prefer not to answer	2.19%	0	

# 4 - Prior FFY Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 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.

# Response to actions required in FFY 2020 SPP/APR

In response to OSEP's required actions stated in the FFY 2020 SPP/APR, SoonerStart has indicated in several sections above whether its FFY 2021 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and the actions the program is taking to address this issue. SoonerStart has also included the extent to which the demographics of the families responding are representative of the population in the section labeled "Provide Additional Information About this Indicator."

# 4 - OSEP Response

# 4 - Required Actions

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

# Indicator 5: Child Find (Birth to One)

# **Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find **Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs.

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

#### 5 - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data
2013	0.81%

FFY	2016	2017	2018	2019	2020
Target >=	0.86%	0.88%	0.90%	0.90%	0.63%
Data	0.71%	0.80%	0.83%	0.77%	0.63%

#### **Targets**

FFY	2021	2022	2023	2024	2025
Target >=	0.65%	0.70%	0.75%	0.80%	0.85%

### **Targets: Description of Stakeholder Input**

In FFY 2020 detailed contextual and explanatory information was shared with stakeholders in the discussion of each indicator. Due to the decrease in enrollment during the COVID-19 pandemic, Stakeholders decided to set the FFY 2020 target for Indicator #5 to match the FFY 2020 result, with gradual increases over the next five years.

In reviewing FFY 2021 data for Indicator 5 with stakeholders, SoonerStart shared that the percentage of children ages 0-1 increased from the previous year although overall Child Count remained static. The program also met the FFY 2021 target. As stakeholders expressed last year, they have a strong desire to see SoonerStart increase the number of children receiving services, Stakeholders were also in agreement with SoonerStart that improvement strategies in the coming year should focus on keeping children in the program in addition to increasing public awareness of the availability of early intervention services.

#### **Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	346
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 1	46,696

#### FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
346	46,696	0.63%	0.65%	0.74%	Met target	No Slippage

# Provide additional information about this indicator (optional)

Data for Indicator 5 (Child Find - Birth to One) were taken from Child Count data collected December 1, 2021, and submitted April 1, 2022. The 2021 child count for children 0-1 rose slightly from the 2020 child count which was significantly lower than prior years due to the impact of the COVID-19 pandemic.

# 5 - Prior FFY Required Actions

None

- 5 OSEP Response
- 5 Required Actions

# Indicator 6: Child Find (Birth to Three)

# **Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / Child Find **Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs.

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

# 6 - Indicator Data

Baseline Year	Baseline Data	
2013	1.66%	

FFY	2016	2017	2018	2019	2020
Target >=	1.66%	1.68%	1.70%	1.70%	1.50%
Data	1.65%	1.67%	1.73%	1.75%	1.53%

#### **Targets**

FFY	2021	2022	2023	2024	2025
Target >=	1.55%	1.60%	1.65%	1.70%	1.75%

# Targets: Description of Stakeholder Input

In FFY 2020 detailed contextual and explanatory information was shared with stakeholders in the discussion of each indicator. Due to the decrease in enrollment during the COVID-19 pandemic, Stakeholders decided to set the FFY 2020 target for Indicator #6 to match the FFY 2020 result, with gradual increases over the next five years.

In reviewing FFY 2021 data for Indicator 6 with stakeholders, SoonerStart shared that the percentage of children ages 0-3 increased slightly from the previous year although overall Child Count remained static. The program also met the FFY 2021 target. As stakeholders expressed last year, they have a strong desire to see SoonerStart increase the number of children receiving services, Stakeholders were also in agreement with SoonerStart that improvement strategies in the coming year should focus on keeping children in the program in addition to increasing public awareness of the availability of early intervention services.

# **Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	2,271
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/28/2022	Population of infants and toddlers birth to 3	144,145

### FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,271	144,145	1.53%	1.55%	1.58%	Met target	No Slippage

# Provide additional information about this indicator (optional).

Data for Indicator 6 (Child Find-Birth to Three) were taken from Child Count data collected December 1, 2021, and submitted April 1, 2022. The 2021 child count remained static following the 2020 child count which was significantly lower than prior years due to the impact of the COVID-19 pandemic.

# 6 - Prior FFY Required Actions

None

- 6 OSEP Response
- 6 Required Actions

# **Indicator 7: 45-Day Timeline**

### **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / Child Find

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

#### **Data Source**

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

# 7 - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data
2005	96.75%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	96.59%	95.56%	95.40%	99.84%	99.28%

#### **Targets**

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

# FFY 2021 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
474	848	99.28%	100%	93.04%	Did not meet target	Slippage

#### Provide reasons for slippage, if applicable.

Oklahoma did not meet their target for Indicator 7 and experienced significant slippage in the number of timely Initial IFSPs completed in the reporting period. SoonerStart reported on the timeliness of initial IFSPs completed from April 1, 2022 through June 30, 2022 in the FFY 2021 APR. Disaggregated data for the same collection period is displayed on each local site's data profile. Review of the local site data revealed that three sites had lower compliance results for timely IFSPs than the average of the rest of the sites statewide. The Part C Data Manager contacted supervisors at each of the three sites and learned that all were experiencing multiple service provider vacancies significantly impacting the availability of staff to conduct eligibility

evaluations in a timely manner. Delayed eligibility determination directly impacted the timeliness of the initial IFSP. The highest number of vacancies statewide occurred during the 4th quarter of FFY 2021 which unfortunately corresponded with highest number of initial IFSPs due.

All sites with vacancies are working to hire staff to meet timely evaluation and IFSP requirements as well as correctly implement the regulatory requirements of IDEA, Part C.

#### 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.

### Provide reasons for delay, if applicable.

SoonerStart reported that 315 children did not receive timely initial IFSPs due to exceptional family circumstances. These exceptional family circumstances included when the child was unavailable to complete an initial evaluation, assessment or IFSP meeting because the parent cancelled or no-showed the appointment. SoonerStart also documented exceptional family circumstances when repeated attempts to contact the family to obtain consent for an evaluation or assessment were unsuccessful in a timely manner.

Fifty-nine children did not receive a timely initial IFSP due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling.

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

State database

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

Data were collected during the time period between April 1, 2022 and June 30, 2022 (4th quarter of FFY 2021).

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

Program data for this indicator are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff uses the system to create an electronic record for each infant and toddler that enters the program with a referral. For children who are evaluated and determined eligible for an IFSP, the date of the Initial IFSP is entered by the service coordinator in the electronic record. EdPlan allows for a direct flow of information from each local SoonerStart site to OSDE as the lead agency, enabling centralized monitoring and oversight. The date of the Initial IFSP completed during the time period reported are reviewed by SoonerStart supervisors at each local site. Any data missing or appearing to be incorrect that is identified using the IFSP Timeline database report created by the Part C Data Manager are verified by comparing it to the child's electronic record in EdPlan. Delays attributed to Exceptional Family Circumstances are documented in the child's electronic record as are delays attributed to staff reasons. The child's electronic record contains all necessary information to monitor timeline compliance.

Oklahoma has chosen to utilize the Initial IFSP data from the fourth quarter (April 1, 2022 to June 30, 2022) to report in the FFY 2022 APR, as it has previously done the past five years. The SoonerStart Part C Data Manager examined data that were reported for this time period and compared them to data for the full year (FFY 2021). Counts of completed IFSPs varied each quarter in FFY 2021, with the highest number in the 4th quarter. We are not able to explain the variation across quarters during the year. We have determined the data are valid and reliable. The 4th quarter results accurately reflect data for the full reporting period because all areas of the state, all provider types and all categories of eligible children are included.

Initial IFSP#	Initial IFSP %
1st Quarter:591	21.10%
2nd Quarter:619	22.10%
3rd Quarter: 742	26.50%
4th Quarter:848	30.28%

Provide additional information about this indicator (optional).

# Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	5	0	0

# FFY 2020 Findings of Noncompliance Verified as Corrected

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

In FFY 2020, Oklahoma's Part C lead agency issued five findings of noncompliance for Indicator 7. In September 2022, the Part C Data Manager conducted verification of correction of noncompliance to ensure systemic compliance for each of the five SoonerStart sites identified with findings of noncompliance.

Utilizing the IFSP Timeline Report, the Part C Data Manager pulled subsequent data from the Part C database, EdPlan, for all children actively enrolled at each of the five sites on September 1, 2022. The completed IFSP meeting date of each child with a recent referral was compared to the calculated IFSP 45-day target date to ensure that the IFSP meeting occurred timely and that the site was correctly implementing the regulatory requirements for timeliness of the completion of the IFSP. Following this review of subsequent data, the five SoonerStart sites issued findings in FFY 2020 were found to be in 100% compliance. Systemic compliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

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

The Oklahoma Part C Lead Agency annually monitors 100% of the local SoonerStart sites to determine if all sites are in compliance for the timely completion of each child's initial evaluation, assessment and initial IFSP meeting (Indicator 7). Noncompliance is identified using the EdPlan database with data pulled from the active records of all children enrolled in the SoonerStart program during the fourth quarter of each fiscal year.

In FFY 2020, individual instances of noncompliance were identified in five local SoonerStart sites and each site was issued a letter of finding on December 1, 2021. The findings were issued even though the Initial IFSP meetings, although late, had been completed (unless the child was no longer

within the jurisdiction of the SoonerStart Part C program) by the time the noncompliance was identified. The Part C Data Manager verified that each individual instance of noncompliance was corrected by looking at each child's electronic records maintained in the EdPlan database. Correction in each individual case of noncompliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

#### Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

### 7 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

### Response to actions required in FFY 2020 SPP/APR

In the FFY 2021 SPP/APR, Oklahoma verified that each local program site with noncompliance identified in FFY 2020 for Indicator 7 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02.

# 7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2021- June 30, 2022). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

### 7 - Required Actions

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

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

# **Indicator 8A: Early Childhood Transition**

#### **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

#### **Data Source**

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

#### 8A - Indicator Data

# **Historical Data**

Baseline Year	Baseline Data	
2005	97.82%	

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	96.93%	99.51%	96.83%	99.52%	97.39%

#### **Targets**

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

#### FFY 2021 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
331	340	97.39%	100%	99.71%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

8

#### Provide reasons for delay, if applicable.

SoonerStart reported that 8 children did not receive timely transition steps and services on their IFSP due to exceptional family circumstances. These exceptional family circumstances included when the parent was unable to initiate transition services on the IFSP because the parent cancelled or no-showed the IFSP meeting. One child did not receive timely transition steps and services on their IFSP due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling.

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

State database

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

Data were collected during the time period between April 1, 2022 and June 30, 2022 (4th quarter of FFY 2021).

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

Program data for this indicator are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff uses the system to create an electronic record for each infant and toddler that enters the program with a referral. The dates of critical transition events are recorded permanently in the electronic record. These dates include the date of LEA notification, the date of the IFSP with transition steps and services initiated, and the date of the TPC with the LEA for children potentially eligible for Part B services. EdPlan allows for a direct flow of information from each local SoonerStart site to OSDE as the lead agency, enabling centralized monitoring and oversight.

The dates of the IFSP with timely transition steps and services completed during the time period reported are entered in the EdPlan records and reviewed by SoonerStart supervisors at each local site. Any data missing or appearing to be incorrect identified using the Transition Timeline Monitoring report created in the EdPlan database is verified by comparing it to the child's electronic record in EdPlan. Delays attributed to Exceptional Family Circumstances are documented in the child's electronic record.

Oklahoma has chosen to utilize transition initiation data from the fourth quarter (April 1, 2021, to June 30, 2022) to report in the FFY 2021 APR, as it has previously done the past five years. Early Intervention records for toddlers with third birthdays between April 1, 2022, and June 30, 2022, were reviewed for timely transition initiation utilizing the EdPlan database. After review by local supervisors, the SoonerStart Part C Data Manager examined data reported for this time period and compared them to data for the full year (FFY 2021). Based on the number and percentages of children exiting Part C at age 3 for the entire year, Oklahoma determined that the 4th quarter data are representative of FFY 2021. Additionally, the 4th quarter results are representative of a full year of the state's data because all areas of the state, all provider types, and all categories of eligible children are included.

/0 OI O	Children aged out
;	-at 3 years of age
	26.77%
	24.38%
	23.48%
	25.35%
	26.77% 24.38% 23.48%

#### Provide additional information about this indicator (optional)

#### Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	5	0	0

#### FFY 2020 Findings of Noncompliance Verified as Corrected

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

In FFY 2020, Oklahoma's Part C lead agency issued five findings of noncompliance for Indicator 8A. In September 2022, the Part C Data Manager conducted verification of correction of noncompliance to ensure systemic compliance for each of the five SoonerStart sites identified with findings of non-

compliance.

Utilizing the Transition Timeline Report, the Part C Data Manager pulled subsequent data from the Part C database, EdPlan on September 1, 2022, for all children turning three years old within the following three months enrolled at each of the five sites. The date that transition steps and services were initiated on the IFSP for each child was compared to the calculated transition target date (90 days prior to the child's third birthday) to ensure that transition initiation occurred timely. The Part C Data Manager used the Transition Timeline Report to verify that the site was correctly implementing the regulatory requirements for the timely completion of IFSPs with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months prior to the child's third birthday.

Following this review of subsequent data, the five SoonerStart sites issued findings in FFY 2020 were found to be in 100% compliance. Systemic compliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

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

The Oklahoma Part C Lead Agency annually monitors 100% of the local SoonerStart sites to determine if all sites are in compliance for the timely completion of IFSPs with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months prior to the child's third birthday (Indicator 8A). Noncompliance is identified using the EdPlan database with data pulled from the active records of all children enrolled in the SoonerStart program whose third birthday occurs the fourth quarter of each fiscal year.

In FFY 2020, individual instances of noncompliance were identified in five local SoonerStart sites and each site was issued a letter of finding on December 1, 2021. The findings were issued even if the IFSP with transition steps and services, although late, had been completed (unless the child was no longer within the jurisdiction of the SoonerStart Part C program) by the time the noncompliance was identified. The Part C Data Manager verified that each individual instance of noncompliance was corrected by looking at each child's electronic record maintained in the EdPlan database. Correction in each individual case of noncompliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 199-02

### Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

### 8A - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

### Response to actions required in FFY 2020 SPP/APR

in the FFY 2021 SPP/APR, Oklahoma verified that each local program site with noncompliance identified in FFY 2020 for Indicator 8A is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02.

# 8A - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2021- June 30, 2022). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

# 8A - Required Actions

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

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

# **Indicator 8B: Early Childhood Transition**

### **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

#### **Data Source**

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

#### 8B - Indicator Data

# **Historical Data**

Baseline Year	Baseline Data	
2005	100.00%	

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	92.91%	98.54%	96.15%	96.14%	95.75%

#### **Targets**

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

#### FFY 2021 SPP/APR Data

#### Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
330	341	95.75%	100%	96.77%	Did not meet 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.

n

#### Provide reasons for delay, if applicable.

SoonerStart does not have an opt-out policy, so no delays affected the timely Notification to the LEA due to exceptional family circumstances. Eleven children did not have a timely Notification to the LEA due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling.

#### Describe the method used to collect these data.

Program data for this Indicator 8B are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff use the system to create an electronic record for each infant and toddler that enters the program with a referral. The dates of critical transition events are recorded permanently on the Transition Page of the IFSP in the electronic record. These dates include the date of LEA notification, the date of the IFSP with transition steps and services initiated, and the date of the TPC with the LEA for children potentially eligible for Part B services.

Early Intervention staff are required to input the date written notification is sent to the LEA. Using the Transition Timeline Monitoring report created in the EdPlan database, the Part C Data Manager verifies that the Notification to the LEA occurred and, if past the target date requirement, determines whether the toddler was considered a late referral (referred less than 90 days before the child's third birthday). If the date of the Notification to the LEA is missing from the Transition Timeline Monitoring report, the local site supervisor must verify that a copy of a timely LEA notification is on file and enter the date in the child's electronic record. The Oklahoma SEA is notified of toddlers potentially eligible for Part B services through SoonerStart EdPlan, under the SoonerStart MOU with the Oklahoma State Department of Education 619 program. EdPlan allows for a direct flow of information from each local SoonerStart site to OSDE as the lead agency, enabling centralized monitoring and oversight and statewide child find.

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

NO

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

State database

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

Data were collected during the time period between April 1, 2022 and June 30, 2022 (4th guarter of FFY 2021).

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

Oklahoma has chosen to utilize transition data from the fourth quarter (April 1, 2022, to June 30, 2022) to report in the FFY 2021 APR, as it has previously done the past five years. Early intervention records for toddlers with third birthdays between April 1, 2022, and June 30, 2022, were reviewed for timely notification to the LEA utilizing the Transition Timeline Monitoring report from the EdPlan database. The SoonerStart Part C Data Manager examined data reported for this time period and compared them to data for the full year (FFY 2021). Based on the number and percentages of children transitioning from SoonerStart at age 3 for the entire year, Oklahoma determined that the 4th quarter data are representative of all quarters for FFY 2021 APR reporting. Additionally, the 4th quarter results are representative of a full year of the state's data because all areas of the state, all provider types, and all categories of eligible children are included.

# Children aged out	% of Children aged out
at 3 years of age	at 3 years of age
1st Quarter360	26.82%
2nd Quarter327	24.36%
3rd Quarter314	23.39%
4th Quarter341	25.40%

Provide additional information about this indicator (optional).

# Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
6	6	0	0

# FFY 2020 Findings of Noncompliance Verified as Corrected

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

In FFY 2020, Oklahoma's Part C lead agency issued six findings of noncompliance for Indicator 8B. In September 2022, the Part C Data Manager conducted verification of correction of noncompliance to ensure systemic compliance for each of the six SoonerStart sites identified with findings of noncompliance.

Utilizing the Transition Timeline Report, the Part C Data Manager pulled subsequent data from the Part C database, EdPlan on September 1, 2022, for all children turning three years old within the following three months enrolled at each of the six sites. The date that the Notification to the LEA/SEA was transmitted for each child potentially eligible for Part B services was compared to the calculated transition target date (90 days prior to the child's third birthday) to ensure that the notification was provided timely. SoonerStart does not have an opt-out option for the LEA/SEA Notification. The Part C Data Manager used the Transition Timeline Report to verify that the site was correctly implementing the regulatory requirements for the timely notification to the LEA/SEA of children potentially eligible for Part B services at least 90 days prior to the child's third birthday.

Following this review of subsequent data, the six SoonerStart sites issued findings in FFY 2020 were found to be in 100% compliance. Systemic compliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

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

The Oklahoma Part C Lead Agency annually monitors 100% of the local SoonerStart sites to determine if all sites are in compliance for the timely notification to the LEA/SEA of children potentially eligible for Part B services at least 90 days prior to the child's third birthday (Indicator 8B). Noncompliance is identified using the EdPlan database with data pulled from the active records of all children enrolled in the SoonerStart program whose third birthday occurs the fourth quarter of each fiscal year.

In FFY 2020, individual instances of noncompliance were identified in six local SoonerStart sites and each site was issued a letter of finding on December 1, 2021. The findings were issued even if the notification to the LEA/SEA for children potentially eligible for Part B, although late, had been transmitted (unless the child was no longer within the jurisdiction of the SoonerStart Part C program) by the time the noncompliance was identified. The Part C Data Manager verified that each individual instance of noncompliance was corrected by looking at each child's electronic record maintained in the EdPlan database. Correction in each individual case of noncompliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

### Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

### 8B - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Response to actions required in FFY 2020 SPP/APR

In the FFY 2021 SPP/APR, Oklahoma verified that each local program site with noncompliance identified in FFY 2020 for Indicator 8B is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02.

### 8B - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2021- June 30, 2022). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

# 8B - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory

requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

#### 8C - Indicator Data

## **Historical Data**

Baseline Year	Baseline Data
2005	99.42%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	92.94%	95.61%	96.03%	95.69%	97.39%

#### **Targets**

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

#### FFY 2021 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
177	348	97.39%	100%	96.96%	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.

85

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.

78

#### Provide reasons for delay, if applicable.

SoonerStart reported that 78 children did not receive a timely TPC with the LEA due to exceptional family circumstances. These exceptional family circumstances included when the parent was unable to complete a timely TPC with the LEA because the parent cancelled or no-showed the TPC meeting. The majority of untimely TPCs with the LEA were due to parents initially declining to give approval to convene the TPC and then changing their minds and providing consent after the 90 day timeline. These occurances were documented as exceptional family circumstances. Eight children did not receive timely TPCs due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling conflict.

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

State database

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

Data were collected during the time period between April 1, 2022 and June 30, 2022 (4th quarter of FFY 2021).

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

Program data for this indicator are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff use the system to create an electronic record for each infant and toddler that enters the program with a referral. The dates of critical transition events are recorded permanently in the electronic record. These dates include the date of LEA notification, the date of the IFSP with transition steps and services initiated, and the date of the TPC with the LEA for children potentially eligible for Part B services. EdPlan allows for a direct flow of information from each local SoonerStart site to OSDE as the lead agency, enabling centralized monitoring and oversight.

The Transition Planning Conference (TPC) dates completed during the time period reported are entered in the child's EdPlan record and reviewed by SoonerStart supervisors at each local site. Any data missing or appearing to be incorrect identified using the Transition Timeline Monitoring report created in the EdPlan database is verified by comparing it to the child's electronic record in EdPlan. Delays attributed to Exceptional Family Circumstances are

documented in the child's electronic record.

Oklahoma has chosen to utilize TPC data from the fourth quarter (April 1, 2022, to June 30, 2022) to report in the FFY 2021 APR, as it has previously done the past five years. Early Intervention records for toddlers with third birthdays between April 1, 2022, and June 30, 2022, were reviewed for timely TPCs with the LEA utilizing the EdPlan database. After review by local supervisors, the SoonerStart Part C Data Manager examined data reported for this time period and compared them to data for the full year (FFY 2021). Based on the number and percentages of children transitioning from SoonerStart at age 3 for the entire year, Oklahoma determined that the 4th quarter data are representative of all quarters for FFY 2021 APR reporting. Additionally, the 4th quarter results are representative of a full year of the state's data because all areas of the state, all provider types, and all categories of eligible children are included.

# of Children aged out	% of Children aged out
at 3 years of age	at 3 years of age
1st Quarter362	26.67 %
2nd Quarter330	24.32%
3rd Quarter317	23.36%
4th Quarter348	25.64%

Provide additional information about this indicator (optional).

#### Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
6	6	0	0

#### FFY 2020 Findings of Noncompliance Verified as Corrected

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

In FFY 2020, Oklahoma's Part C lead agency issued six findings of noncompliance for Indicator 8C. In September 2022, the Part C Data Manager conducted verification of correction of noncompliance to ensure systemic compliance for each of the six SoonerStart sites identified with findings of noncompliance.

Utilizing the Transition Timeline Report, the Part C Data Manager pulled subsequent data from the Part C database, EdPlan on September 1, 2022, for all children turning three years old within the following three months enrolled at each of the six sites. The date that the transition planning conference (TPC) was held for each child potentially eligible for Part B services was compared to the calculated transition target date (90 days prior to the child's third birthday) to ensure that the TPC was held timely. The Part C Data Manager used the Transition Timeline Report to verify that the site was correctly implementing the regulatory requirements for timely TPCs at least 90 days, and at the discretion of all parties, not more than nine months prior to the child's third birthday for children potentially eligible for Part B services.

Following this review of subsequent data, the six SoonerStart sites issued findings in FFY 2020 were found to be in 100% compliance. Systemic compliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

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

The Oklahoma Part C Lead Agency annually monitors 100% of the local SoonerStart sites to determine if all sites are in compliance for holding timely TPCs at least 90 days, and at the discretion of all parties, not more than nine months prior to the child's third birthday for children potentially eligible for Part B services (Indicator 8C). Noncompliance is identified using the EdPlan database with data pulled from the active records of all children enrolled in the SoonerStart program whose third birthday occurs the fourth quarter of each fiscal year.

In FFY 2020, individual instances of noncompliance were identified in six local SoonerStart sites and each site was issued a letter of finding on December 1, 2021. The findings were issued even if the TPC for each child potentially eligible for Part B services, although late, had been completed (unless the child was no longer within the jurisdiction of the SoonerStart Part C program) by the time the noncompliance was identified. The Part C Data Manager verified that each individual instance of noncompliance was corrected by looking at each child's electronic record maintained in the EdPlan database. Correction in each individual case of noncompliance was achieved less than 12 months from issuing the finding and the local site was notified in writing that the finding had been closed. Verification of correction of both child and site-level noncompliance findings was completed according to OSEP Memorandum 09-02.

## Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

## **8C - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

## Response to actions required in FFY 2020 SPP/APR

In the FFY 2021 SPP/APR, Oklahoma verified that each local program site with noncompliance identified in FFY 2020 for Indicator 8C is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02.

## **8C - OSEP Response**

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2021- June 30, 2022). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## **8C - Required Actions**

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

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

## **Indicator 9: Resolution Sessions**

## **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

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

#### 9 - Indicator Data

#### Not Applicable

Select yes if this indicator is not applicable.

NO

Select yes to use target ranges.

Target Range not used

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

NO

#### **Prepopulated Data**

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

## **Targets: Description of Stakeholder Input**

Stakeholders were provided a detailed explanation of each compliance and performance indicator in the APR. In the discussion of Indicator #9, SoonerStart shared with stakeholders that there was no historical data to review because there have been no hearing requests resulting in resolution sessions in Oklahoma Part C for the past 10 years. Targets were not discussed because states are not required to establish baseline or targets if the number of resolution sessions is less than 10.

#### **Historical Data**

Baseline Year	Baseline Data

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

## **Targets**

FFY	2021	2022	2023	2024	2025
Target>=					

## FFY 2021 SPP/APR Data

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

#### Provide additional information about this indicator (optional)

The State reported fewer than ten resolution sessions held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

## 9 - Required Actions

## **Indicator 10: Mediation**

#### **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

#### **Data Source**

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

#### Measurement

Percent = [(2.1(a)(i) + 2.1(b)(i))] divided by 2.1] times 100.

#### Instructions

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

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

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

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

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

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

### 10 - Indicator Data

#### Select yes to use target ranges

Target Range not used

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

NO

#### **Prepopulated Data**

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

#### **Targets: Description of Stakeholder Input**

Stakeholders were provided a detailed explanation of each compliance and performance indicator in the APR. In the discussion of Indicator #10, SoonerStart shared with stakeholders that there was no historical data to review because there have been no mediation sessions in Oklahoma Part C for the past 10 years. Targets were not discussed because states are not required to establish baseline or targets if the number of mediations is less than 10.

#### **Historical Data**

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

## **Targets**

FFY	2021	2022	2023	2024	2025
Target>=					

## FFY 2021 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

## Provide additional information about this indicator (optional)

The State reported fewer than ten mediations held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 10 - Required Actions

## **Indicator 11: State Systemic Improvement Plan**

#### **Instructions and Measurement**

Monitoring Priority: General Supervision

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

#### Measurement

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

#### Instructions

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

Targets: In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

**Updated Data:** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

#### Overview of the Three Phases of the SSIP

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

#### Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

#### Specific Content of Each Phase of the SSIP

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

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

#### Phase III: Implementation and Evaluation

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

#### A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

## B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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

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

#### C. Stakeholder Engagement

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

#### Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

#### 11 - Indicator Data

#### Section A: Data Analysis

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

Oklahoma SoonerStart will increase the percentage of infants and toddlers who demonstrate positive social emotional skills.

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

NC

#### 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 data collected and reported for the SIMR each year will represent only children served at the implementation sites. For the first three years (through FFY 2022), only data from the original implementation sites are being reported as the SIMR. Once additional sites begin implementation, their child data will be included in SIMR results. Over time, the SIMR will reflect all children statewide once implementation is fully scaled-up.

## 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://sde.ok.gov/sites/default/files/Theory-of-Change-Part-C-2022.pdf

#### Progress toward the SiMR

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

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

NO

### **Historical Data**

Baseline Year	Baseline Data
FFY 2020	58.06%

#### **Targets**

FFY	2021	2022	2023	2024	2025
Target>=	58.00%	59.00%	61.00%	63.00%	65.00%

### FFY 2021 SPP/APR Data

Number of children scoring below cut-off (showing no S-E concerns)	Number of children assessed using ASQ:SE-2	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
61	105	58.06%	58.00%	58.10%	N/A	N/A

## Provide the data source for the FFY 2021 data.

Ages and Stages Questionnaire - Social Emotional - 2 (ASQ: SE-2)

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

BASELINE DATA: Oklahoma collected baseline data in the Fall of 2021 prior to the implementation of improvement strategies and evidence-based practices at the SSIP implementation sites. The Ages & Stages Questionnaire: Social-Emotional -2 (ASQ:SE-2) was selected as the tool to obtain baseline and subsequent SIMR data. The ASQ:SE-2 has age-range questionnaires that are scored to obtain a result of:

Below Cut-off - indicating no concerns in social emotional development,

At Risk - indicating children who may need monitoring of social emotional development and

Above Cut-off - indicating children with social emotional developmental concerns.

To ensure fidelity to the administration of the screening tool, all staff were required to attend training provided by the publisher of the ASQ:SE-2 before using the tool in the collection of data for the SSIP. Resource Coordinators were the first staff trained in June 2021. Service providers were trained on the administration of the ASQ:SE-2 in August 2022.

FFY 2021 DATA: In Year Two, the SiMR was measured by assessing all children at the SSIP implementation sites who received at least six months of IFSP services following the implementation of improvement strategies and evidence-based practices. These results were obtained using the appropriate age-range ASQ:SE-2 questionnaire at the six-month Periodic IFSP Review and the Annual IFSP Review. The answers to the questions on the ASQ:SE-2 were entered into the ASQ Online system for each child assessed. The results of the most recent questionnaire administered for each child were used for the SiMR measurement. The percentage of children scoring below the cut-off indicating no social emotional concerns were compared to the annual SSIP target.

105 children were administered the ASQ:SE-2 with 61 children scoring below the cut-off, which signaled no concerns in their social emotional development. Data for the FFY 2021 SiMR were collected from the Oklahoma County and Stillwater implementation sites only. Due to local site challenges outside of the control of SoonerStart, the Clinton site was discontinued as a SSIP implementation site. (Additional information provided in a separate section).

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, that 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.

The SLT is concerned about a lack of subsequent ASQ-SE2 assessments being completed for all children in the program. A substantial number of children in the pilot sites leave the program before completing six months of service. Consequently, the number of children with entry assessments is substantially higher than the number of children who have been assessed at least twice. This negatively affects the SiMR data by reducing the total population included in the SiMR measure. SoonerStart does not have any control over families choosing to discontinue services early or failing to be available for EI visits after multiple attempts to contact. Subsequent SiMR data for Year 3 and Year 4 will help SoonerStart determine the true impact of early exiting.

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.

https://sde.ok.gov/sites/default/files/Oklahoma%20FFY%202020%20-

%20FFY%202025%20Part%20C%20SSIP%20Evaluation%20Plan%20v.2.1%201.30.23.pdf

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

YES

## If yes, provide a description of the changes and updates to the evaluation plan.

SoonerStart developed the evaluation plan with the adoption of a new SSIP and SiMR in FFY 2020. The plan was written from the perspective of the theory of change (ToC) and its five components. Each ToC component must be completed with high quality for the SSIP to be successful, and the evaluation plan focuses on assessing whether each component has been achieved as designed. In FFY 2021, SoonerStart reviewed the evaluation plan and made the changes indicated below:

ToC Component One: SoonerStart implements a structured approach for the provision of early intervention evidence-based practices supporting social emotional development.

- --Outcome 1.1 Establish sustainable high quality SSIP state leadership team.
- --Outcome 1.2 Revise SoonerStart processes and procedures to align with SSIP infrastructure changes and support Pyramid Model implementation.
- --Outcome 1.3 Allocate resources to the long-term implementation of the SSIP.
- --Outcome 1.4 Establish procedures to launch and maintain implementation sites.
- --Outcome 1.5 Create or select data collection and storage tools and systems.
- --Outcome 1.6 Implement all components of the PM Early Intervention Benchmarks of Quality (BoQ).

SoonerStart made no changes to the evaluation plan for ToC component one.

ToC Component Two: Provide training, coaching and monitoring of specific PM evidence-based practices

- --Outcome 2.1 Pyramid Model levels of support are clearly defined and implemented. (NEW)
- --Outcome 2.2 Train staff in PM practices, including coaching and other EBPs.
- --Outcome 2.3 Adopt Practice-Based Coaching (PBC) to support practitioners' use of Pyramid Model practices.
- --Outcome 2.4 Put system in place to monitor that evidence-based practices are implemented with fidelity.

SoonerStart added Outcome 2.1 along with short-term, mid-term, and long-term measurements to evaluation plan for ToC component two.

ToC Component Three: El providers develop and utilize their acquired knowledge and skills in providing services to families

- --(DELETED) Leadership personnel (state and local) demonstrate knowledge of and capacity to implement PM Framework.
- --Outcome 3.1 El providers demonstrate knowledge gains in PM EBPs.
- --Outcome 3.2 El providers demonstrate fidelity to implementation of PM EBPs.
- --Outcome 3.3 Practitioner coaches demonstrate ability to support and monitor EI providers.

SoonerStart deleted the original Outcome 1 and its associated short-term, mid-term, and long-term measurements from the evaluation plan for ToC component three.

SoonerStart added ToC Components Four and Five along with the associated outcomes and short, medium, and long-term measurements to the evaluation plan for FFY 2021.

ToC Component Four: Families' knowledge about SE development will increase to support their child's SE growth.

--Outcome 4.1 Caregivers demonstrate knowledge of SE development shared through program implementation of PM EBPs and other activities.

ToC Component Five: Families will recognize their child's SE strengths and manage challenging behavior successfully.

--Outcome 5.1 Caregivers report successful management of children's challenging behavior and identification of strengths.

Oklahoma will evaluate whether ToC components were implemented as initially designed or revised; monitor maintenance and quality in the mid-term; and assess sustainability in the long-term. A full description of the revised evaluation plan, including all performance measures, is posted as a document at the link provided.

#### If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.

The evaluation plan developed in Year 1 (FFY 2020) included a table of outcomes and measures for each of the first three components in the theory of change. The first two are infrastructure improvements, while the third reflects the use of evidence-based practices. Several changes were made to ToC component two. A new outcome was added in order to define a process to monitor implementation of the PM framework. Mid-term measurements were revised for Outcome 2.3 and 2.4 due to Year 2 challenges with the training and retention of Practitioner Coaches.

When the FFY 2020 SSIP was submitted, Oklahoma had not yet begun implementing evidence-based practices, therefore those elements in the evaluation plan were still in development. The changes in the evaluation plan associated with ToC component three reflect updated short-term, midterm, and long-term measurements aligned with the implementation of evidence-based practices at the pilot sites in Year 2. One outcome in the original evaluation plan was deleted because it is measured as an indicator of the Pyramid Model Early Intervention Benchmarks of Quality which is listed as Outcome 1.6 under ToC Component one.

Oklahoma reported in FFY 2020 that outcomes and measurements would be added to the evaluation plan for the fourth and fifth ToC components that focus on family engagement and participation in practice implementation in Year 2 .SoonerStart was unable to define outcomes and measurements for these components until essential infrastructure work was initiated. The current plan reflects the newly defined evaluation elements.

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

In FFY 2021, Oklahoma continued to implement the infrastructure improvement strategies initiated in the prior year. Below is a summary of activities implemented during Year 2 to support the development of the new SSIP, described in alignment with each ToC outcome.

ToC Component One:

Outcome 1.1

The SSIP State Leadership Team (SLT) met monthly throughout Year 2 to develop and review policies and practices to support local PM implementation sites. The SSIP Specialist facilitated each meeting and provided updates on local challenges. The state PM data coordinator provided data reports to monitor process and practice fidelity, and progress toward the SiMR. The SLT uses the PM state leadership BoQ to assess structural sustainability every six months. In 2022, the SLT members attended the National Training Institute and the Division of Early Childhood conferences to support SSIP implementation.

Outcome 1.2

In Year 2, procedures for embedding the ASQ:SE-2 in the intake process were added to the SoonerStart Operations Manual. EI Providers have completed the ASQ:SE-2 as an ongoing assessment tool every 6 months at the IFSP review to inform the IFSP team of new or continued SE concerns. These results assist the IFSP team in determining the PM level of support most appropriate for continued services.

SoonerStart developed several processes and procedures to support the implementation of the PM framework:

- A) The PM Supports Algorithm was developed to identify the level of support (universal, targeted, or Intensive) needed to address a child's SE needs. B) SoonerStart added the Early Intervention Implementation Checklist (EIIC) as a tool to monitor fidelity to EBPs. The EIIC is a self-evaluation tool used to record EBP usage. EI providers can access the EIIC on any electronic device and complete the survey in 5-7 minutes. The checklist is required one time per week following an EI visit. The Early Interventionist Pyramid Practices Fidelity Instrument (EIPPFI) will be used by Practitioner coaches to record the use of EBPs observed during coaching sessions.
- C) Program and Practitioner coaches support the implementation of the PM framework. Program coaches are trained PM experts supporting local leadership teams (LLT) to implement best practices. The Program coaches assist the LLT to complete the PM BoQ, action planning and goal setting, and provide general guidance. The Program coaches also provide LLT training to new onboarding sites.

Practitioner coaches use practice-based coaching (PBC) to guide El providers to implement PM practices with fidelity. PBC is an evidence-based approach for coaching that is cyclical and involves collaborative partnership; shared goals and action planning; focused observation; reflection and feedback. Practitioner coaches participate in a monthly Community of Practice (CoP) to support their coaching work.

D) Pyramid Model Consortium (PMC) trainers conducted Practices training for all EI providers. All new EI staff are required to attend the first training scheduled following their employment. SoonerStart will offer the required 12-hour training every six months. On-going trainings are provided by the SoonerStart SSIP/PM Specialist and Program coaches with technical assistance and support from the PMC.

Outcome 1.3

In Year 2, SoonerStart hired a full-time SSIP Specialist to direct the implementation of the framework at the local implementation sites and to coordinate the scale-up over time. The SLT renewed the contract with PMC for another year of technical assistance and support. To build capacity for practice-based coaching, SoonerStart partnered with the State Personnel Development Grant (SPDG) to fund a temporary, part-time Practitioner coach. The Practitioner coach will be hired in 2023 and will support implementation sites with practice-based coaching and group coaching. Additionally, SoonerStart obtained a contract with the TORSH online coaching platform to support the coaching process.

Outcome 1.4

In FFY 2020, SoonerStart reported that three local sites were selected as PM implementation (pilot) sites. In May 2022, the Clinton pilot site was unable to continue as a PM implementation site due to circumstances beyond the control of the PM SLT and SoonerStart administration. Implementation of the PM framework continued at the remaining two sites. Moving forward, the SLT and SSIP Specialist will use implementation science to identify and address barriers related to scale-up at new mplementation sites.

Outcome 1.5

SoonerStart is using several data systems to collect, monitor and report implementation data. The ASQ:SE-2 assessment results are recorded and stored in the online system that can produce data reports. The EIPPFI is not used to collect implementation fidelity data. Instead, the data are collected and monitored through the EIIC, where fidelity to EBPs is self-reported by providers. The EIIC was chosen as an alternative to the EIPPFI due to the more usable format and the ease of data collection. The third system is SoonerStart's online child record system. The child's electronic record contains identification of the level of support (universal, targeted or intensive) the child is receiving.

#### Outcome 1.6

The Pyramid Model Early Intervention (Part C) BoQ outlines the quality indicators of the critical elements associated with implementing program wide. Beginning in Year 2, LLTs meet monthly to work towards their action plan goals developed from the BoQ. To support staff buy-in, El providers are offered opportunities to participate in decision-making and problem-solving with the LLT. The PM newsletter builds staff capacity as each monthly newsletter focuses on the use of one EBP. Behavior Specialists, trained in Prevent-Teach-Reinforce for Families (PTR-F), provide support to El providers working with families whose children have challenging behaviors.

ToC Component Two

SoonerStart completed the following activities in Year 2 to support the second component of the ToC— training, coaching and monitoring professional development.

Outcome 2.1

SoonerStart developed the Pyramid Model Supports Algorithm to identify the level of support (universal, targeted, or intensive) needed to address the child's social and emotional needs and/or the family's concerns.

Outcome 2.2

Outcome 2.4

In 2022, training was provided by the PMC to support SoonerStart implementation of the framework.

- Pyramid Model Early Intervention Practices (12 hours) required for all El providers, recorded for virtual training
- Data Coordinator (2 hours) required for one person per implementation site and state PM Data Coordinator
- Practice-Based Coaching required for staff volunteering to be Practitioner Coaches at implementation sites
- Prevent-Teach-Reinforce for Families required for specialized staff volunteering to be Behavior Specialists at implementation sites
- Local/State Leadership Team Training required for local and state staff volunteering to serve on the leadership team Outcome 2.3

In Year 2, after practitioner coaches completed training provided by the PMC, SoonerStart learned that the volunteers were not the appropriate EI staff to serve as Practitioner coaches because they also served in a supervisory role. Using the trained staff in a dual role put the fidelity of the coaching process at risk. In mid-2022, new coaches were selected and trained. A Coaching CoP met monthly to support the coaches to provide effective practice-based coaching. In December 2022, the program experienced a major set-back in the implementation of PBC when all but one trained Practitioner coach resigned from SoonerStart or decided against continuing in that role.

SoonerStart selected the EIIC as the monitoring tool to ensure EBPs are implemented with fidelity. SoonerStart requires EI staff at the PM implementation sites to complete the EIIC one time per week following an early intervention visit with a family.

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 recounted previously, the first two components of the SSIP ToC are infrastructure improvements. The evaluation plan has incorporated short, medium and long-term measures of each major outcome to enable the evaluation team to monitor outcome achievement at several levels over time. In FFY 2020, SoonerStart reported the short-term measures (objectives) achieved for the first year of Oklahoma's new SSIP. With the continued implementation of infrastructure improvement strategies outlined in ToC components one and two, SoonerStart has moved closer to or achieved some mid-term measurements. See the posted evaluation plan for a description of all measures of outcome achievement. Note that the evaluation reporting period is the full prior calendar year.

ToC Component one:

Outcome 1.1 Establish sustainable high quality SSIP state leadership team (Governance)

SoonerStart achieved the short-term objective in Year 1 through the creation of the SLT to guide long-term implementation of the PM and oversee all system changes. The SLT continues to incorporate stakeholder input into all decision-making regarding policies and procedures, funding, and allocation of employee resources for the implementation of the SSIP. The SLT also serves as the PM Leadership Team (PMLT). In order to maintain a sustainable, high-quality state leadership team, SoonerStart's SLT utilizes the PM State Leadership BoQ to guide statewide implementation of the PM framework. The BoQ assesses progress and guides future planning so that PM practices are available for providers and families statewide. The Benchmarks are grounded in the science of implementation which bridges the gap between an EBP and the actual high-fidelity implementation of that practice. The BoQ is reviewed and updated every six months by the SLT. At the end of Year 1, the SLT BoQ indicated that 39% of the indicators were "emerging" or "in place" (19 of 49 indicators). The most recent BoQ completed by the SLT revealed that 82% of the indicators were "emerging" or "in place" (40 of 49 indicators). This result indicates that the target Year 3 mid-term measurement (55% "in place" or "emerging") was met and exceeded in Year 2.

Outcome 1.2 Revise processes and procedures to align with SSIP infrastructure changes and support PM implementation (governance and quality standards)

In Year 2, SoonerStart expanded on the completion of the short-term measure of aligning assessment procedures with the program's needs by adding a training requirement for service providers in the administration of the assessment at each six-month IFSP review and subsequent data entry in the ASQ online system. These procedures are applicable to all EI providers statewide.

In FFY 2021, SoonerStart also developed operational procedures outlining requirements for personnel at local PM implementation sites in the utilization of the EIIC. These procedures require EI providers to complete the EIIC at the conclusion of one EI family visit per week to self-monitor their implementation of EBPs. The written procedures, which include instructions for data collection, have been distributed to PM EI providers. The mid-term measure for this outcome is partially achieved.

Outcome 1.3 Allocate resources to the long-term implementation of the SSIP (finances)

In FFY 2021, SoonerStart has allocated funding to support the program as described in the previous section.

Outcome 1.4 Establish procedures to launch and maintain implementation sites (governance)

At the end of Year 1, leadership personnel at the original three sites were oriented to the framework and El providers were scheduled to begin training the following year. Onboarding continued into Year 2, with all El providers at the implementation sites attending the required 12-hour Pyramid Model Practices training in January 2022. In FFY 2021, the mid-term measure for this outcome was partially achieved with the selection of the second SoonerStart cohort to receive training and onboarding in Year 3.

Outcome 1.5 Create or select data collection and storage tools and systems (data and accountability/monitoring)

In FFY 2021, SoonerStart made the decision to change the practice fidelity monitoring tool from the EIPPFI to the Early Intervention Implementation Checklist (EIIC). SoonerStart re-created the paper checklist as a survey using the Qualtrics online software. EI providers can access the EIIC on any electronic device and complete the survey in 5-7 minutes. The data are stored in Qualtrics and are readily available for analysis and reporting. In Year 2, SoonerStart accomplished the second part of the short-term measure by establishing data storage and a reporting tool for ongoing SSIP evaluation. Qualtrics will also be used to collect, store and report data on personnel accountability and family usage in Years 3-5.

Outcome 1.6 Implement all components of the PM Framework in SoonerStart (governance)

In FFY 2021, the LLTs each completed the BoQs two times, six months apart. The Stillwater site had 83% of the BoQ indicators (25 of 30) either "partially in place" or "in place" which exceeded the mid-term measure expected for year three. The Oklahoma County implementation site had 70% of the BoQ indicators (21 of 30) either "partially in place" or "in place," approaching the mid-term measure.

#### ToC Component two:

Outcome 2.1 Pyramid Model levels of supports are clearly defined and implemented (governance)

This is a new outcome for FFY 2021. SoonerStart developed the Pyramid Model Supports Algorithm to identify the level of support needed to address the child's SE needs and/or the family's concerns. The short-term measure was met in Year 2.

Outcome 2.2 Train staff in PM practices (professional development)

In Year 2, all necessary PM trainings were completed as described in the previous section. SoonerStart achieved the short-term measurement for this outcome.

Outcome 2.3: Adopt PBC to support practitioners' use of PM practices (quality standards, professional development)

In FFY 2021, the Practitioner coaches complete training provided by the PMC. After the training was completed, SoonerStart learned that the volunteers were not the appropriate EI staff to serve as Practitioner coaches. In mid-2022, new Practitioner coaches were selected and trained over the course of four months. SoonerStart met the short-term measurements for this outcome.

Outcome 2.4: Implement a system to monitor that evidence-based practices are implemented with fidelity (accountability/monitoring)
This outcome has been achieved. SoonerStart selected the EIIC to record the implementation of EBPs. See the prior description of adopted procedures to systematically monitor fidelity.

Summary: Adoption of the PM framework is a fundamental change to the operations of SoonerStart. It is systems change to the program's approach to identifying and addressing SE delays among the children it serves. The infrastructure improvements described in previous sections are essential for the achievement of the SIMR. If the PM framework is not implemented with fidelity and fully integrated into the structure, processes and procedures of SoonerStart, children's SE development will not improve. Nor will it improve if all personnel are not trained with integrity to the model so that EBPs can be used with fidelity.

Similarly, both are essential for the sustainability of system improvement efforts and scale-up, although the program will not realize these goals for several years. To make those happen, foundational work in leadership development, program change, resource allocation and professional development must begin. More details about the accomplishments of this past year in respect to the stated objectives can be found in prior sections.

Did the State implement any <u>new</u> (newly identified) infrastructure improvement strategies during the reporting period? (yes/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.

All activities are described from the perspective of the SSIP Theory of Change (ToC) and its various components that must be accomplished to realize SIMR improvement.

ToC Component one

In year three, SoonerStart will begin to expand implementation of the PM framework. Improvement activities will continue at the initial implementation sites and begin at the new implementation location.

Outcomes 1.1, 1.3, 1.5, 1.6 The SLT will continue to meet on a monthly basis to oversee the SSIP, guide changes to processes and procedures according to the action plan created from the BoQ, devise PM professional development, and support the local implementation sites. The SLT will continue to ensure funding and resources are allocated for personnel and technical supports to maintain and expand SSIP activities at local SoonerStart sites. Data collection tools have been selected and the SLT will monitor the collection, storage and reporting process.

Additionally, two SoonerStart staff have been credentialed as certified trainers for the ASQ:SE- 2. An additional SoonerStart EI provider will be credentialed as a certified trainer to ensure sustainability of training for new employees and future scale-up. New EI providers will be trained to administer the ASQ:SE-2, building the site's capacity to conduct the assessment at the annual and semi-annual IFSP reviews for the SIMR data collection and informing appropriate levels of service for continued IFSP services.

SoonerStart anticipates achieving most of the mid-term measures in 2023.

Outcome 1.2 The SLT will ensure that operational procedures are written to dictate how to support the SIMR data collection and project implementation. Some of the specific updates include the following:

- A) SoonerStart created a Pyramid Model Supports Algorithm in Year 2. In 2023, the implementation sites will use the Algorithm to identify the level of support needed to meet the social and emotional needs of the child according to the family's priorities and IFSP outcomes.
- B) The child's level of service will be documented in the child's electronic record by the EI provider when the completed IFSP data is entered. The level of service may change as a result of subsequent IFSP reviews based on the service delivery decisions of the IFSP team.
- C) Additional procedures may be developed and written to support data collection and project implementation.

SoonerStart will achieve the mid-term measures in 2023.

Outcome 1.4 As SoonerStart begins the scale-up of SSIP activities in 2023, the program will use implementation science to identify and address barriers related to adding new implementation sites. The implementation science process starts with exploration. SoonerStart District 9 has agreed to explore being a new implementation site in Year 3. During exploration, sites/districts will have the opportunity to understand the requirements, ask questions, build buy-in and talk with their teams. After the team agrees to be an implementation site/district, training installation will begin. LLTs are designed in accordance with the Pyramid Model Early Intervention (Part C) Benchmarks of Quality. Each site is assigned a Program coach by the SLT to support implementation. To maintain implementation sites/districts in the short-term, the process will move between exploration, installation, initial implementation until reaching full implementation. Full implementation with minimal support will be the long-term goal. SoonerStart expects to achieve the mid-term measure in 2023 with the launch of an additional implementation site.

#### ToC Component two

Outcome 2.1 In 2023, SoonerStart implementation sites will continue to use the Pyramid Model Supports Algorithm to identify the level of support needed to address the child's social and emotional needs and/or the family's concerns. Following the development of the IFSP with the child's family, the EI members of the IFSP team determine if the services to be provided reflect af universal, targeted or intensive level of support based on the Algorithm. SoonerStart will work toward the mid-term measurement to develop a process to monitor progress of children whose identified needs do not align with the services provided via the IFSP.

Outcome 2.2 Beginning in year three, the SoonerStart SSIP Specialist and Professional Development Specialist will provide PM Part C practices training, with technical support from PMC, twice each year for new employees and onboarding districts. By using local staff as trainers for PM practices instead of contracting with the PMC, SoonerStart will advance toward long term sustainability of PM implementation statewide. SoonerStart will continue to complete achievement of all mid-term measures by the end of 2023.

Outcome 2.3 In Year 3, a part-time state Practitioner Coach will be hired to support implementation sites and other practitioner coaches. The SSIP Specialist will train the new Practitioner Coach in PM practice-based coaching. The SSIP Specialist and state Practitioner Coach will recruit and train new volunteer practitioner coaches at the current and new implementation sites. Training will be provided within a designated Practitioner Coach Community of Practice. SoonerStart's focus for training new practitioner coaches will be to build coaches' capacity and confidence without rushing implementation.

Sustainability of the PM improvement strategies depends on implementation of PM practices with fidelity. Because practitioner coaches are crucial in meeting this objective, SoonerStart is committed to equipping and supporting the volunteer coaches with expanded training time. SoonerStart has purchased an online coaching platform, TORSH, that will be utilized for virtual coaching. With this platform, El providers will upload videos of visits with families into the secure coaching platform to be reviewed by their designated Practitioner Coach. The Practitioner Coach provides feedback on observed (or unobserved) evidence-based practices completed by the El Provider with the family and/or child. Practice-based coaching supports the use of EBP. Short-term measures were initially achieved in Year 2 but due to multiple staff resignations or staff choosing to no longer serve, a new cohort of practitioner coaches will be trained in 2023. SoonerStart will work toward meeting revised mid-term measures by the end of Year 3.

Outcome 2.4 In Year 3, El providers will continue to use the EIIC as a self-assessment to monitor that evidence-based practices are implemented with fidelity. Guidelines for completion requirements as well as data collection have been developed and included in written procedures. Program coaches complete a program coach log and submit it monthly to the PM state data coordinator. The program coach log documents the activities and time spent providing support for their respective PM implementation sites. This data is valuable to the SLT when discussing funding and allocation of resources for scale-up. Practitioner coaches will use the EIPPFI to measure the fidelity of implementation of Pyramid Model practices by EI providers during family coaching sessions. The purpose of the EIPPFI is to identify coaching goals, provide feedback, and show growth in practice implementation. Mid-term measures are partially met, and work will continue to complete achievement of all mid-term measures by the end of 2023.

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

Pyramid Model evidence-based practices were implemented in 2022. The PM EBPs are outlined in the Early Interventionist Pyramid Practices Fidelity Instrument and the Early Intervention Implementation Checklist.

Responsive Relationships

- Building Partnerships with Families
- Supportive Conversations
- Dyadic Relationships

Family Coaching

- · Family-centered Coaching
- Teaching Social Emotional Skills
- Social Emotional Development
- Social Emotional Assessment
- · Children with Challenging Behaviors

In 2022, SoonerStart engaged in several activities to implement and support the use of EBPs in the program. These are described here as related to the ToC Component 3 and the associated outcomes.

ToC Component three: EI providers develop and utilize their acquired knowledge and skills in providing services to families Outcome 3.1 EI providers demonstrate knowledge gains in PM EBPs

El Providers at the PM implementation sites received 12 hours of training on PM practices in 2022. The pre-and post training survey asked El providers the five primary principles for using the Pyramid Model EBPS in Part C. The pre-training survey results were 87.6% and the post-training survey results were 94.9%. These results indicate a slight knowledge gain however, the prior knowledge of EBPS is evident in the high pre-training survey results. SoonerStart met the short-term and mid-term measure for this outcome in Year 2.

Outcome 3.2 EI providers demonstrate fidelity to implementation of PM EBPs

El providers at the PM implementation sites began using the EIIC self-assessment tool to monitor fidelity to the implementation of PM EBPs in October, 2022. Preliminary data indicates that El providers have self-reported using EBPs related to Building Partnerships with Families at 94% to 98% of their intervention visits with families. Recognizing that not all EBPs in the checklist are applicable for every family or every visit, SoonerStart will do further review in the coming year to determine the EBPs that should be universally demonstrated and monitored for fidelity. The short-term measure for this indicator was met in Year 2.

Outcome 3.3 Practitioner coaches demonstrate ability to support and monitor EI providers.

El Providers at the PM implementation sites who volunteered to serve as practitioner coaches were trained on practice-based coaching in May 2022. These providers were asked to rate themselves in their understanding of Practice-Based Coaching and how it supports early intervention providers in using Pyramid Model practices with families on a scale from 1 to 7 following PBC training. Across ten participants, the average was 4.6 and the range was 3 to 6. Due to issues described in previous sections, SoonerStart recruited new El providers as practitioner coaches in mid-2022. The post-training survey results from the initial practitioner coach training was the catalyst for expanding the training time and methodology of training for the new practitioner coaches. The short-term measure was only partially achieved. More work is needed to ensure practitioner coaches have knowledge of the procedures and content for supporting providers.

## Provide a summary of each evidence-based practice.

Responsive Relationships

Building Partnerships with Families focuses on supporting the family and their unique needs. The EI practitioner schedules visits during convenient and purposeful times that support the family's goals. The caregiver is provided with community resources based on the caregiver's priorities and needs. The EI provider considers the caregiver and child's preferred name. This preferred name is used during greetings and throughout the visit. Materials from the natural environment are used to support interventions. Family characteristics like beliefs, family activities and routines are considered in development of IFSP outcomes. Caregivers are invited to share their thoughts, ideas, perspectives, and preferences on priorities for each visit. EI providers explain EI services and what a visit would look like.

Supportive Conversations incorporates how to support better understanding between the EI provider and caregiver. The first practice is to use a calm, positive, and supportive voice. Limit jargon to provide clarity for the caregiver. Checking for understanding can help to identify any areas that the caregiver might not understand. When families are multilingual, use key words in their language, use translator if needed, and use a variety of strategies to communicate. Ask caregivers how they like to communicate such as text, email, or phone. Use active listening skills to encourage communication.

Dyadic Relationships primary focus is to support caregiver and caregiver's interactions with their child using a strength's-based approach. This is achieved by providing supportive feedback to the caregiver about caregiver-child interactions by focusing the caregiver on the child's initiations, responses, cues, and expressions. Support in this area can be done through collaboration with the caregiver to identify predictable routines and how the EI provider can help with routines. The EI provider can provide opportunities for the caregiver to practice new skills such as communication attempts, predictable routines, and social emotional development. A variety of strategies can be used to support dyadic relationship. These include modeling, specific feedback, and commenting. Caregivers should have choices of strategies to use to support children. Ask caregiver open-ended questions about child's emotional responses, communication attempts, behaviors, and/or cues. EI provider offers information about ignoring or redirection when responding to challenging behaviors.

## Family Coaching

Family-centered Coaching is a strength's-based approach that supports caregivers in reaching their child's IFSP outcomes. Caregiver strengths are frequently identified and used as a starting point for development. Information is provided in caregiver's preferred language. The caregivers preferred learning style is considered during EI visits. EI providers use active listening to understand caregiver's ideas. Open-ended questions are used to respond to caregiver comments, questions, or concerns. Opportunities for caregiver to practice are created throughout the visit. Reflective and/or guiding questions are used to help caregivers make connections. Performance-based feedback is used after observing caregiver-child interactions to support growth. EI provider asks permission before using modeling as a strategy. EI providers assist caregivers in identifying opportunities to practice new skills throughout the day during routines and activities that occur between visits.

## Teaching Social Emotional Skills

Social Emotional Development encompasses how caregivers can support their child's development of social emotional skills. El provider observes and asks caregiver questions to identify their child's social and emotional abilities. The caregiver's knowledge and perspectives around social emotional development are considered. When caregivers choose to address social and emotional development, El providers collaborate with the caregiver to write specific, measurable outcomes using family-friendly language. When strategies are used to address social and emotional development, El providers observe and ask about caregiver's confidence and competence in implementing the strategies. Specific feedback is used to support positive caregiver behaviors that support positive social and emotional outcomes for their child. El providers support caregivers in scaffolding or expanding on their child's expressions, interactions, play, communication, and autonomy. Social and emotional assessments are shared with caregivers.

Social Emotional Assessment are used to identify areas of need. The EI provider can describe the purpose of the screening tools. The caregiver has the opportunity to ask questions about the entire process. The caregiver's preferences for the assessment are taken into consideration. In collaboration with the EI provider, the assessment, and the family's preferences, priorities, and needs are used to develop IFSP outcomes.

Children with Challenging Behaviors supports caregivers in describing, identifying, and defining the challenging behavior(s). EI providers inquiry about routines, activities, environments, or with what people the behavior is most likely to occur. Behavior support specialist can help to support the caregiver and child. In some cases, a functional behavior assessment (FBA) can be used to identify the function of the challenging behavior. When a behavior support plan is needed, the EI provider will ask questions to identify family priorities and preferences. The behavior support plan or IFSP outcome includes routines and strategies that are meaningful to the family. Strategies are developmentally appropriate and easy for caregiver and child to implement. Caregivers are provided the opportunity to practice new skills and strategies with specific and positive feedback from the EI provider that supports caregiver confidence and competence. EI providers use reflective discussion to support caregiver use of new strategies. Easy mechanisms to document challenging behavior and new skills are identified through collaboration between EI provider and caregiver. Ask questions to check for caregiver understanding of data or progress. Make changes as needed.

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.

SoonerStart is implementing the Pyramid Model framework as the SSIP. The PM provides a tiered framework for implementing supports and interventions that help families promote their infant's or toddler's healthy social, emotional, and behavioral development. Implementing this framework with fidelity will impact the SiMR by changing SoonerStart policies, procedures and practices at the program and provider levels, while also improving parent/caregiver outcomes by increasing their capacity to meeting the SE needs of their children. As a result of these improvements, childrens' outcomes will be enhanced.

At the universal tier (level of support), practices are intended to promote the development of all infants and toddlers. Early interventionists implement practices as a first response with all infants and toddlers and fluidly provide targeted prevention and/or intensive interventions as needed.

At the targeted tier (level of support), targeted prevention practices support infants and toddlers who are identified at risk for social emotional delays or challenging behavior. SoonerStart uses a linked system of screening and assessment to identify children at risk. The Ages and Stages Questionnaire, Social-Emotional, 2nd edition (Squires, Bricker, & Twombly, 2015; ASQ:SE-2) is administered for all children at entry and every six months, and the Social-Emotional Assessment/Evaluation Measure (Squires, Bricker, Waddell, Funk, Clifford, & Hoselton, 2014; SEAM) for children who score at-risk on the ASQ:SE-2 and/or caregiver expressed concern. The SEAM is used to identify concerns about social emotional development, develop IFSP outcomes, and monitor and evaluate progress.

At the intensive tier (level of support), intensive interventions support children with persistent, challenging behaviors. Prevent, Teach-Reinforce for Families (Dunlap, Strain, Lee, Joseph, Vatland, & Fox, 2017; PTR-F) practices are used to guide assessment, intervention, and monitoring of progress. PTR-F is an evidence-based practice situated in applied behavior analysis and positive behavior supports.

The EBPs highlighted by the PM framework align with the Division of Early Childhood (DEC) Recommended Practices (2014) and the Principles of Early Intervention (Workgroup on Principles and Practices in Natural Environments, 2008). Independent research supports PMpractices (e.g., Hemmeter, Snyder, Fox, & Algina, 2016; Hemmeter et al., 2021). Each tier of the PM is informed by science and comprises evidence-based practices that promote and support social emotional development of young children (Hunter & Hemmeter, 2009). For example, at the universal tier evidence-based practices focus on supporting responsive, nurturing relationships between caregivers and their young children in supportive environments (Shonkoff & Phillips, 2000). At the targeted tier, practices target teaching self-regulation skills that begin developing during infancy and are thought to be crucial for a child's evolving independence and social functioning (Hunter & Hemmeter, 2009; Shonkoff & Phillips, 2000). The skills are taught and reinforced during meaningful, predictable everyday routines. At the intensive tier, individualized, intensive interventions are designed and implemented to reduce

persistent, challenging behaviors and teach new skills. PTR-F is the recommended evidenced-based practice for children in high need of interventions, as it is situated in applied behavior analysis and positive behavior supports. It has been identified through a literature review to be an appropriate intervention for children younger than 3 years (Conroy, Dunlap, Clarke, & Alter, 2005).

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

In mid-2022, the SLT re-evaluated using the data collection tool originally selected to monitor evidence-based practice implementation. SoonerStart determined that the Early Interventionist Pyramid Practices Fidelity Instrument (EIPPFI) was specifically developed as a tool to be used by Practitioner Coaches in practice-based coaching cycles with EI providers. While this is a helpful tool for its purpose, it will not be used frequently enough to monitor daily fidelity to implementation. The SLT concluded that the Early Intervention Implementation Checklist (EIIC) was a more appropriate instrument to measure the use of evidence-based practices by the early interventionist on a regular basis.

In late 2022, the SLT enacted procedures requiring EI providers to complete the EIIC one time per week as a self-assessment of the evidence-based practices they demonstrated during an intervention visit with one family. The data is collected electronically, and reports are generated as needed. In Year 2, the SLT reviewed the data to monitor fidelity of implementation to completing the EIIC weekly at the PM implementation sites. Based on the number of EI providers employed at each site during the reporting period (October, November and December 2022), with consideration of staff vacation time, SoonerStart expected 410 EIICs to be completed. The data retrieved from the online system indicated there were 312 EIICs recorded, resulting in a 76.10% rate of fidelity to implementation of completion.

In 2023, SoonerStart will continue to monitor fidelity to implementation of the EIIC. Practice change will be assessed through the analysis of evidence-based practices reported as completed on the EIIC.

# 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.

IFSP teams utilize the ASQ-SE-2 completed at intake and at the 6-month and 12-month IFSP reviews to inform IFSP outcomes and services to address social and emotional needs. For the SiMR, SoonerStart reported that 58.09% of children at the PM implementation sites (after six months of IFSP services) scored Below Cut-off indicating no social-emotional concerns. Further analysis indicates that 29.5% (18 of 61) of the children scoring Below Cut-off had improved from prior At-Risk or Above Cut-off scores they received for their initial ASQ:SE-2 at intake. Although EI providers have had a very limited time to implement focused PM practices, SoonerStart believes this progress data supports the decision to continue the ongoing use of all evidence-based practices as designed in the PM framework..

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

SoonerStart will continue implementation of the third component of the Theory of Change (EI providers develop and utilize their acquired knowledge and skills in providing services to families). The anticipated outcomes include:

#### Outcome 3.1 El providers demonstrate knowledge gains in PM EBPs

New staff at implementation sites will be trained in PM practices by.SoonerStart personnel (the SSIP Specialist and PD Specialist). SoonerStart will use pre and post training surveys to assess knowledge gains. A follow-up survey will be conducted for personnel who were trained in PM practice in 2022 to assess long-term knowledge gains. These results will be reported and used to measure outcome achievement.

#### Outcome 3.2 El providers demonstrate fidelity to implementation of PM EBPs

Service providers are monitored to ensure they are demonstrating fidelity to PM implementation and the use of EBPs. SoonerStart will use the EIIC to monitor fidelity to implementation processes, procedures and practices. Data obtained from the EIIC will be used to inform additional training in the provision of evidence-based practices as needed.

## Outcome 3.3 Practitioner coaches demonstrate ability to support and monitor EI providers

Practitioner coaches will demonstrate their ability to support early intervention staff in their provision of services to families. SoonerStart has committed to expanded training time for the new cohort of Practitioner Coaches to build capacity and confidence. Practitioner Coaches will begin coaching cycles

with EI providers to support and monitor evidence-based practices when training is completed. Data will be recorded on the EIPPFI by the Practitioner Coach and used by the coachee to set goals and inform practice change. SoonerStart will hire a state Practitioner Coach to provide support to local Practitioner Coaches and monitor the coaching process.

SoonerStart met the short-term measures associated with the major outcomes identified for this third component of the ToC in Year 2. Work will continue toward achieving mid-term measures by the end of Year 3.

SoonerStart added ToC Components four and five along with the associated short, medium, and long-term outcome measurements to the evaluation plan for FFY 2021.

ToC Component four: Families' knowledge about SE development will increase to support their child's SE growth

Outcome 4.1 Caregivers demonstrate knowledge of SE development shared through program implementation of PM EBPs and other activities. In year three, SoonerStart will utilize the parent portal feature of a child's electronic early intervention record to share social and emotional developmental resources with families. This information will be provided to all families enrolled in Oklahoma's Part C program and will not be limited to the PM implementation sites. SoonerStart will partner with the Oklahoma Parent Center (OPC) to develop a virtual training for families related to SE development in young children.

ToC Component five: Families will recognize their child's SE strengths and manage challenging behavior successfully.

Outcome 5.1 Caregivers report successful management of children's challenging behavior and identification of strengths SoonerStart will survey caregivers of children receiving EI services at the PM implementation sites for their feedback on the efficacy of the PM evidence-based practices provided to their family. This will collect data on their use of the EBPs and the benefits they realize as a result of using the EBPs. The survey will be developed by the SSIP Specialist with input from the SLT and stakeholders. The survey will be distributed to families annually between their child's 6-month IFSP periodic review and the annual IFSP review.

## 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.

Data reflects that progress is being made toward building infrastructure supports at local implementation sites and prospective scale-up sites. SoonerStart has partially or completed achieved short-term measures for all outcomes in ToC components one and two. Short-term measures for ToC component three outcomes supporting the implementation of evidence-based practices have been met.

#### Section C: Stakeholder Engagement

## **Description of Stakeholder Input**

Stakeholder feedback and support for the SSIP informs and drives all aspects of the work moving forward. SoonerStart has engaged with stakeholders throughout the SSIP development process to ensure high quality planning, implementation, and evaluation of SSIP efforts. The ICC serves as the primary stakeholder group providing ongoing guidance and input into SSIP development. Information and updates are provided regularly at each ICC meeting regarding progress towards the SiMR. Local teams have engaged with staff and families to gather feedback for use in planning, implementation, and evaluation. SoonerStart worked with the Oklahoma Parent Center to increase outreach to parents, as well as the Oklahoma Family Network (an advocacy organization for families of children with developmental disabilities). Feedback is broadly solicited from early intervention staff through a monthly newsletter. Stakeholder engagement has been a key factor in the success of preparing for and implementing the Pyramid Model.

Stakeholders representing multiple state and community programs, state agencies, early intervention service providers and parents of children currently or formerly enrolled in the SoonerStart program participated in the development and implementation of the SSIP. These include the following entities or roles, with counts of representatives in ().

Sooner Success – OU Health Sciences Center (2)

Oklahoma AbleTech (Assistive Technology Center) - Oklahoma State University (1)

Infant Mental Health - Oklahoma Department of Mental Health and Substance Abuse (1)

Special Education Services - Oklahoma State Department of Education (2)

SoonerStart Early Intervention Service Providers (75)

SoonerStart Early Intervention Service Coordinators (45)

SoonerStart State Leadership Team (8)

Parents of Children with Developmental Disabilities - SoonerStart (43)

Oklahoma State Regents for Higher Education (1)

Oklahoma Parent Center (2)

Oklahoma Commission on Children and Youth (1)

Oklahoma Partnership for School Readiness (1)

Oklahoma Deaf/Blind Project (1)

Oklahoma Head Start Collaboration Agency (1)

Community Head Start Providers (4)

Early Childhood Education - Oklahoma State Department of Education (2)

Oklahoma State Department of Health (3)

Oklahoma Part C Interagency Coordinating Council (ICC)

Oklahoma Family Network (2)

Oklahoma Health Care Authority (1)

Oklahoma Department of Human Services (2)

Sunbeam Family Services (1)

Community Development Support Association (1)

Oklahoma School for the Deaf (1)

Oklahoma Public School Teachers (3)

Community Preschools/Child Care Programs (5)

In FFY 2021, SoonerStart was excited to engage with new stakeholders representing the Oklahoma Commission on Children and Youth and the

Oklahoma Partnership for School Readiness (OPSR). The OPSR facilitates the work of Oklahoma's Pyramid Model State Leadership Team. SoonerStart representatives also serve as members of Oklahoma's Pyramid Model State Leadership Team.

It is important to Oklahoma that stakeholders are not just informed about the SSIP, but they have a voice in continuous efforts to achieve outcomes related to the identified strategies. Through regularly scheduled meetings, surveys, website announcements, and email notifications, Oklahoma seeks input into decisions related to the SSIP strategies.

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

Oklahoma understands that stakeholder involvement leads to a better process, greater community support and buy-in, more creativity, a better understanding of the systems and challenges and, ultimately, a more effective effort to improve outcomes for infants and toddlers. SoonerStart has continued to engage stakeholders in SSIP improvement efforts through bi-monthly meetings designed to provide updates on Pyramid Model implementation activities and seek input on proposed next steps. Stakeholders also receive the Pyramid Model newsletter monthly which describes evidence-based practices promoted at the local Pyramid Model implementation sites.

SoonerStart hosted eight meetings to engage stakeholders in key improvement efforts during 2022. These meetings were held on:

January 13, 2022 February 9, 2022 March 25, 2022 June 20, 2022 August 15, 2022 September 7, 2022 November 7, 2022

December 7, 2022.

Stakeholder meeting agendas are shared in advance via an email invitation that includes the link to the SSIP information pages posted on the SoonerStart website. A brief overview of the SSIP process and Pyramid Model framework is provided at each meeting and stakeholder input continues to be solicited during meetings in multiple ways. SoonerStart frequently uses the Ideaz Board website tool which provides a virtual "sticky note" that allows participants to share their thoughts, ideas, and questions anonymously during virtual meetings. Polls are added to meeting presentations when necessary for voting on improvement strategies and evaluation methods. Stakeholders who are unable to attend a real-time virtual meeting, have the option to view the recorded discussion and email their questions or suggestions.

In December 2022, SoonerStart surveyed stakeholders to learn what they were most interested in receiving more information about in the coming year. With a 33% response rate, stakeholder priorities are listed in order below:

I would like to learn more about universal, targeted and intensive intervention strategies (54%)

I would like to learn more about data results of social and emotional improvement activities and fidelity monitoring (46%)

I would like to learn more about supporting social and emotional development in infants and toddlers (42%)

I would like to learn more about Practice-Based Coaching (35%)

I would like to learn more about SoonerStart's use of the Division of Early Childhood (DEC) recommended practices (27%)

I would like to learn more about scale-up of the Pyramid Model framework to other pilot sites (19%)

I would like to learn more about on-going assessment of social and emotional development using the ASQ:SE2 (15%)

Stakeholders were also asked if they would be interested in receiving occasional program updates or additional information by email (73%); serving on a task group to explore ideas for Family Engagement (54%); and/or participating in training opportunities on social and emotional development and the Pyramid Model (26%).

SoonerStart strives to create an open environment for stakeholders to share their thoughts on program improvement with each other and program administration throughout the stakeholder input process. The survey disseminated to stakeholders in December 2022 asked for feedback on their satisfaction with the stakeholder process. Respondents indicated that they are given enough opportunity to ask questions and share ideas during stakeholder meetings (88%) and feel that their participation in stakeholder meetings is important (85%)

In the upcoming year, SoonerStart will work to improve stakeholder satisfaction and build presentations that focus meeting discussions based on stakeholders' stated priorities. The program intends to be more intentional in ensuring meeting participants have opportunities to ask questions and share their ideas and that the information presented is understandable. SoonerStart will also increase the use of email notifications to provide updates on activities and explore options for stakeholder participation in Pyramid Model trainings and creating a Family Engagement task group.

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

NO

## **Additional Implementation Activities**

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

None

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

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

As mentioned in previous sections, SoonerStart experienced multiple obstacles in launching practice-based coaching. In Year 2. After practitioner coaches completed training provided by the PMC, SoonerStart learned that the volunteers were not the appropriate EI staff to serve as Practitioner coaches because they also served in a supervisory role. Using the trained staff in a dual role could put the fidelity of the coaching process at risk. In mid-2022, new coaches were selected and trained. A Coaching CoP met monthly to support the coaches to provide effective practice-based coaching. In December 2022, the program experienced a major set-back in the implementation of PBC when all but one trained Practitioner coach resigned from SoonerStart or decided against continuing in that role.

In Year 3, funding has been allocated to hire a state Practitioner Coach to assist in the training of local practitioner coaches and to provide support and monitor the coaching process, however an unexpected lead agency hiring freeze has delayed recruitment efforts. The SSIP Specialist and PD Specialist

have re-organized the training process for new practitioner coaches to include peer support and increased interactive learning. SoonerStart has also committed to expanded training time for the new cohort of Practitioner Coaches to build capacity and confidence.

#### Provide additional information about this indicator (optional).

In addition to informing the SiMR, the ASQ:SE-2 data also provide an early opportunity in the Part C process to support families with concerns about their child's social emotional development. As a part of Oklahoma's commitment for continuous improvement, the ASQ:SE-2 was added as a component of the intake for children referred to the program after January 1, 2022. If the results suggest a social emotional developmental concern, but the child is determined not eligible for Part C services, the Resource Coordinator has information to provide appropriate referrals and other resource options to the family. If the child is determined eligible for Part C services, any social emotional concerns identified by the family at the intake can be discussed by the IFSP team when developing outcomes for the initial IFSP. The ASQ:SE-2 results will also assist the IFSP team in determining if a higher level of support (targeted or intensive in the Pyramid Model approach) is indicated for the early intervention services planned in the initial IFSP.

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

## Certification

## Instructions

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

#### Certify

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

## Select the certifier's role

**Designated 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:

LouAnne Mullens

## Title:

Assistant Executive Director-SoonerStart/Part C Data Manager - Oklahoma State Department of Education

#### Email:

louanne.mullens@sde.ok.gov

#### Phone:

405-517-5407

## Submitted on:

04/24/23 12:03:27 PM

## **Determination Enclosures**

## RDA Matrix Oklahoma

# 2023 Part C Results-Driven Accountability Matrix

## Results-Driven Accountability Percentage and Determination<sup>1</sup>

Percentage (%)	Determination
87.50%	Meets Requirements

#### **Results and Compliance Overall Scoring**

	Total Points Available	Points Earned	Score (%)
Results	8	6	75.00%
Compliance	14	14	100.00%

#### 2023 Part C Results Matrix

#### I. Data Quality

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

Number of Children Reported in Indicator C3 (i.e., outcome data)	1,487
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	2,438
Percentage of Children Exiting who are Included in Outcome Data (%)	60.99
Data Completeness Score <sup>2</sup>	1

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

Data Anomalies Score <sup>3</sup>	2
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## **II. Child Performance**

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

Data Comparison Score⁴	2

## (b) Performance Change Over Time: Comparing your State's FFY 2021 data to your State's FFY 2020 data

Performance Change Score <sup>5</sup>	1
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Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2021	85.86%	47.81%	87.19%	38.47%	86.41%	43.38%
FFY 2020	84.38%	48.58%	85.10%	39.83%	85.82%	43.56%

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

<sup>&</sup>lt;sup>2</sup> Please see Appendix A for a detailed description of this calculation.

<sup>&</sup>lt;sup>3</sup> Please see Appendix B for a detailed description of this calculation.

<sup>&</sup>lt;sup>4</sup> Please see Appendix C for a detailed description of this calculation.

<sup>&</sup>lt;sup>5</sup> Please see Appendix D for a detailed description of this calculation.

## 2023 Part C Compliance Matrix

Part C Compliance Indicator <sup>6</sup>	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 1: Timely service provision	99.03%	YES	2
Indicator 7: 45-day timeline	93.04%	YES	2
Indicator 8A: Timely transition plan	99.71%	YES	2
Indicator 8B: Transition notification	96.77%	YES	2
Indicator 8C: Timely transition conference	96.96%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

<sup>&</sup>lt;sup>6</sup> The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: <a href="https://sites.ed.gov/idea/files/2023\_Part-C\_SPP-APR\_Measurement\_Table.pdf">https://sites.ed.gov/idea/files/2023\_Part-C\_SPP-APR\_Measurement\_Table.pdf</a>

## Appendix A

## I. (a) Data Completeness:

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

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

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

## Appendix B

#### I. (b) Data Quality:

#### Anomalies in Your State's FFY 2021 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e<sup>78</sup>. In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

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

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

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

<sup>&</sup>lt;sup>7</sup> Numbers shown as rounded for display purposes.

<sup>&</sup>lt;sup>8</sup> Values based on data for States with summary statement denominator greater than 199 exiters.

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

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

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

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

## Anomalies in Your State's Outcomes Data FFY 2021

Number of Infants and Toddlers with IFSP's Assessed in your State	1,487
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	7	185	584	582	129
Performance (%)	0.47%	12.44%	39.27%	39.14%	8.68%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	3	182	730	529	43
Performance (%)	0.20%	12.24%	49.09%	35.57%	2.89%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	5	187	650	571	74
Performance (%)	0.34%	12.58%	43.71%	38.40%	4.98%
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

#### II. (a) Data Comparison:

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

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

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

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

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

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

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

## Your State's Summary Statement Performance FFY 2021

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	85.86%	47.81%	87.19%	38.47%	86.41%	43.38%
Points	2	1	2	1	2	1

Total Points Across SS1 and SS2(*)	9	
	_	
Your State's Data Comparison Score	2	

<sup>&</sup>lt;sup>9</sup> Values based on data for States with summary statement denominator greater than 199 exiters.

#### II. (b) Performance Change Over Time:

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

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of p<=.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<=.05. The statistical test has several steps.

- Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.
  - e.g., C3A FFY2021% C3A FFY2020% = Difference in proportions
- Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on<sup>10</sup>
  - Sqrt[([FFY2021% \* (1-FFY2021%)] / FFY2021N) + ([FFY2022% \* (1-FFY2022%)] / FFY2022N)] = Standard Error of Difference in Proportions
- Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.
  - Difference in proportions /standard error of the difference in proportions = z score
- Step 4: The statistical significance of the z score is located within a table and the p value is determined.
- Step 5: The difference in proportions is coded as statistically significant if the p value is it is less than or equal to .05.
- Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria
  - 0 = statistically significant decrease from FFY 2020 to FFY 2021
  - 1 = No statistically significant change
  - 2= statistically significant increase from FFY 2020 to FFY 2021
- Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

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

<sup>&</sup>lt;sup>10</sup>Numbers shown as rounded for display purposes.

Summary Statement/ Child Outcome	FFY 2020 N	FFY 2020 Summary Statement (%)	FFY 2021 N	FFY 2021 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	1,536	84.38%	1,358	85.86%	1.49	0.0132	1.1230	0.2614	NO	1
SS1/Outcome B: Knowledge and Skills	1,644	85.10%	1,444	87.19%	2.09	0.0124	1.6823	0.0925	NO	1
SS1/Outcome C: Actions to meet needs	1,615	85.82%	1,413	86.41%	0.59	0.0126	0.4699	0.6384	NO	1
SS2/Outcome A: Positive Social Relationships	1,692	48.58%	1,487	47.81%	-0.77	0.0178	-0.4320	0.6658	NO	1
SS2/Outcome B: Knowledge and Skills	1,692	39.83%	1,487	38.47%	-1.37	0.0173	-0.7886	0.4303	NO	1
SS2/Outcome C: Actions to meet needs	1,692	43.56%	1,487	43.38%	-0.18	0.0176	-0.1033	0.9177	NO	1

Total Points Across SS1 and SS2	6
Your State's Performance Change Score	1

## Data Rubric Oklahoma

## FFY 2021 APR<sup>11</sup>

	Part C Timely and Accurate Data SPP/APR Data	
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	1	1
10	1	1
11	1	1
	Subtotal	13
APR Score Calculation	<b>Timely Submission Points</b> - If the FFY 2021 APR was submitted ontime, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	18

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

Indicator Calculation	
A. APR Grand Total	18
B. 618 Grand Total	18.00
C. APR Grand Total (A) + 618 Grand Total (B) =	36.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	36.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

\*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.

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

## APR and 618 -Timely and Accurate State Reported Data

#### **DATE: February 2023 Submission**

#### SPP/APR Data

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

## Part C 618 Data

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

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

- 2) Complete Data A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. State-level data include data from all districts or agencies.
- 3) Passed Edit Check A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <a href="https://www2.ed.gov/about/inits/ed/edfacts/index.html">https://www2.ed.gov/about/inits/ed/edfacts/index.html</a>).

# **Dispute Resolution**



# **How the Department Made Determinations**

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

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