

# **STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C**

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

**For reporting on  
FFY 2023**

**Iowa**



**PART C DUE  
February 3, 2025**

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

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

1) Met target and no slippage

Indicator 2: Services in Natural Environments

Indicator 3: Early Childhood Outcomes, Summary Statements 3-A1; 3-C1

Indicator 4: Family Involvement 4-A; 4-B; 4-C

Indicator 6: Child Find (Birth to Three)

Indicator 8: Early Childhood Transition 8-B

Indicator 11: State Systemic Improvement Plan SiMR

Indicator 12: General Supervision (New Indicator FFY23)

2) Did not meet target and no slippage

Indicator 1: Timely Provision of Services

Indicator 7: 45-Day Timeline

Indicator 8: Early Childhood Transition 8-A; 8-C

3) Did not meet target and slippage

Indicator 3: Early Childhood Outcomes, Summary Statements 3-A2; 3-B1; 3-B2; 3-C2

Indicator 5: Child Find (Birth to One)

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

The use of "Early ACCESS service provider" is a synonym for "early intervention service provider." Additionally, Iowa has a statewide system of 9 public agencies, Area Education Agencies (AEA), which are Iowa's Early Intervention Service (EIS) Programs.

Iowa's Early ACCESS Integrated System of Early Intervention Services involves the Lead Agency, Iowa Department of Education, and two signatory agencies, Iowa Department of Health and Human Services, and Child Health Specialty Clinics. An interagency agreement, signed by the Iowa Departments of Education and Health and Human Services and the Child Health Specialty Clinics, outlines each agency's roles and responsibilities in the Early ACCESS system.

ICC Form FFY 2023: The Interagency Coordinating Council (ICC) form was signed by the Iowa Council for Early ACCESS Chairperson on January 14, 2025.

#### General Supervision System

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

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

The Iowa Department of Education, as Lead Agency, designated each Area Education Agency (AEA) as an EIS program, henceforth referred to as an Early ACCESS Grantee, with the fiscal and legal obligation to ensure the provision and equitable implementation of early intervention services under the Individuals with Disabilities Education Act (IDEA) Part C. The Iowa Department of Education (Department) has the single line of responsibility to conduct multifaceted processes to ensure the pursuance of each of the nine Early ACCESS Grantees implements the established purposes and outcomes of IDEA Part C.

Every Early ACCESS Grantee (N=9) is monitored annually to ensure each Grantee meets IDEA Part C requirements and is improving early intervention results and functional outcomes for all infants and toddlers with disabilities and their families. The ACHIEVE System is a primary source used to collect data to monitor program performance and determine compliance with IDEA Part C. The Department provides oversight of the provision of early intervention services with IDEA Part C requirements in the regulatory areas of Comprehensive Child Find; IFSP Service Provision; Early Childhood Outcomes; Family Engagement and Outcomes; State Systemic Improvement Plan (SSIP) and Early Childhood Transition.

Iowa's System of General Supervision represents a multifaceted, integrated system of monitoring which ensures policies, procedures and implementation of evidence-based practices are in compliance and consistent with IDEA Part C and state regulations. Annually, the Department conducts analyses of data beyond the SPP/APR indicators including: children's records and program performance of referrals from primary referral sources, comprehensive evaluations; child and family-directed assessments; IFSP development and implementation of early intervention services; and, seamless transitions when exiting IDEA Part C.

Additionally, the Department's focused monitoring process involves the collection and review of documents, including children's early intervention records, which are analyzed based on sections of regulatory requirements. The focused monitoring process provides specific compliance and performance data beyond the SPP/APR indicators in each of the following areas: Comprehensive Child Find; IFSP Service Provision; Early Childhood Outcomes; Family Engagement and Outcomes; State Systemic Improvement Plan (SSIP) and Early Childhood Transition. The focused monitoring process includes conducting structured interviews with early intervention service providers, service coordinators, families receiving services and families who have exited services.

The Department monitors the sustainability of the State Systemic Improvement Plan (SSIP) by conducting an analysis of early intervention service providers' implementation of Iowa's evidence-based practices, Family Guided Routines Based Intervention (FGRBI). The fidelity of implementation of

FGRBI key indicators are scored by trained and reliable FGRBI coders. Professional learning and coaching support are provided to ensure service providers are implementing interventions which help families help their children develop and learn.

The scheduled monitoring of each Early ACCESS Grantee occurs annually from July through December.

Fiscal monitoring includes an ongoing review process with analyses for funding and spending use. This occurs, at minimum, quarterly and specifically at Early ACCESS Grantees' application submission, receipt of invoices and just prior to end of year reporting activities. Review and analysis may include data and is not limited to the Special Education Fiscal and Data Consultant, Part C Coordinator, Part C Data Manager and the Bureau Chief for Early ACCESS and Early Childhood Education.

Additional monitoring activities include biannual review of services provided for children and families served specifically in the areas of nutrition services, health services and family training, counseling and home visits by the signatory agency, Child Health Specialty Clinics (CHSC); and monthly review and analyses of Child Abuse Prevention and Treatment Act (CAPTA) activities in partnership with the signatory agency, Iowa Health and Human Services. This includes ongoing monitoring of CAPTA referrals as well as referrals leading to initiated early intervention services via an Individualized Family Services Plan (IFSP). Thirdly, monitoring of Early Hearing Detection and Intervention (EHDI) referrals is completed with a review and analysis of monthly data to ensure infants and toddlers with hearing loss receive timely diagnosis and intervention services. Review and analysis may include and is not limited to the Part C Coordinator, Part C Data Manager, Signatory Agency Liaisons and Bureau Chief for Early ACCESS and Early Childhood Education.

At any time during the year, the Department has the authority to identify concerns with any Early ACCESS Grantee which may warrant further investigation of policies, procedures, practices or noncompliance of IDEA Part C or state requirements. The Department will conduct additional data collection and analyses of children's records and program performance to identify areas of concern and issue findings for violations of IDEA Part C.

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

The Department assigns a unique state identification number to children when they are being evaluated for early intervention eligibility. The unique state identification number is associated with child-level data and demographics. The identification number remains the same throughout the child's educational period (Birth to 21) to provide consistency and data accuracy of child records. This also provides opportunities of longitudinal data analysis and study.

The Department calculates the number of child records collected from the ACHIEVE System by applying a confidence level of 95% and a +/- 5% margin of error for all Early ACCESS Grantees through routine data hygiene and analysis activities. This establishes the dataset required for the monitoring of IDEA Part C. The Department ensures the dataset for each Grantee accurately reflects data of the children with IFSPs for the full reporting year.

Furthermore, the Department has the authority to examine additional child records and data files at any time throughout the year as a result of credible allegations, areas of concern or noncompliance. The child records and data files are examined based on the analysis of multiple data elements, which may include IDEA Part C requirements, SPP/APR, early intervention results and outcomes, dispute resolution and the state systemic improvement plan.

The Department operationalizes a six-step monitoring and program improvement process to improve early intervention results and functional outcomes for children and their families and to ensure compliance with IDEA Part C. The six-step process is designed to collect and analyze data from the ACHIEVE system to identify compliance, noncompliance and results; develop and implement improvement strategies; ensure correction of findings of child-specific and systemic noncompliance; and sustain progress to reach established targets.

After the annual monitoring activities have been completed, Early ACCESS Grantees receive electronic notification of the Department's conclusions of performance and findings of noncompliance. The notification provides each Grantee with specific findings of child- and systemic-level noncompliance, analysis of performance, assigned annual determination category and required corrective actions or improvement activities. Each Early ACCESS Grantee must submit a Continuous Improvement and Sustainability Plan focusing on program improvement or a Corrective Action Plan, as applicable, to address findings of noncompliance.

The Early ACCESS Grantees must submit evidence of timely and full correction of every finding of child-specific noncompliance and systemic noncompliance as soon as possible, and no later than one year from the date of the electronic notification. When a child is no longer within the jurisdiction of the Early ACCESS Grantees, the Grantees must provide exit data for child-specific noncompliance findings.

The Department is responsible for the review and verification of each Grantee's completion of a Corrective Action Plan and timely correction of noncompliance. Every Grantee must demonstrate implementation of IDEA requirements with 100% compliance. The Department conducts subsequent verification which may involve collecting and reviewing subsequent data files; child records and information to confirm correction of each finding of child-specific noncompliance; systemic noncompliance and evidence of implementation of regulatory requirements, policies, procedures and practices. To verify the correction of any identified noncompliance, the Department uses real-time data from ACHIEVE to verify correction and compliance with IDEA Part C.

If findings of noncompliance have not been corrected within the specified timeline, the Department will take further action. The Department has the authority to examine additional data to determine the root cause of the continued noncompliance, issue a new finding of noncompliance to the Grantees and order additional corrective action. Sanctions may also be imposed.

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

Iowa's ACHIEVE statewide data system is designed to ensure the SPP/APR data collected and maintained are valid and reliable. The ACHIEVE system provides access to real-time and point-in-time data, and state and local reports aligned with results and compliance consistent with IDEA Part C. Additional data is also used in monitoring activities; both quantitative and qualitative data points are used including and not limited to interviews, observations and document reviews.

As part of Iowa's System of General Supervision, the Department utilizes the ACHIEVE system to generate data files, reports and documentation, including SPP/APR, from each of the nine Early ACCESS Grantees annually for the period from July 1 through June 30 of the state fiscal year.

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

The Department issues findings of noncompliance by each of the nine Early ACCESS Grantees. The Department issues separate findings by the number of instances of noncompliance for each Early ACCESS Grantee, as applicable.

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

Not applicable

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

The Department's System of General Supervision ensures Iowa's early intervention programs for infants and toddlers with disabilities meet the IDEA Part C requirements, state requirements and standards of the Department to improve results and outcomes for eligible children and families. If an Early ACCESS Grantee has not improved and/or noncompliance has not been corrected in a timely manner, a range of formalized strategies and/or sanctions for enforcement with written timelines are utilized.

The Department of Education has the authority to conduct any of the following:

\*Engage in a focused monitoring visit.

\*Refer conduct of the Early ACCESS Grantees to the Office of Attorney General for investigation.

\*Refer financial concerns to the State Auditor for investigation.

\*Recommend removal of accreditation to the State Board of Education.

\*Impose conditions on funding.

\*Withhold payment of state or federal funds, in whole or in part, until noncompliance is corrected.

\*Take any other enforcement mechanism available to the Director of the Iowa Department of Education.

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

In accordance with IDEA, the Iowa Department of Education makes an annual determination regarding compliance with, and performance of, IDEA Part C for each Early ACCESS Grantee.

Early ACCESS Grantees may be identified in one of four Determination Categories. The criteria was established, in collaboration with Iowa's Council for Early ACCESS, to assign the annual Determination Category based upon:

\*Compliance with IDEA Part C requirements;

\*Implementation of procedures and practices;

\*Timely correction of noncompliance within 1 year of finding;

\*Submission of timely and accurate data;

\*Fiscal audit findings.

Each Early ACCESS Grantee receives an electronic notification in December of each year announcing the designated Determination Category:

Meets Requirements

Needs Assistance

Needs Intervention

Needs Substantial Intervention

The IDEA Part C Annual Determinations for the Early ACCESS Grantees are reported to the public at:

<https://educate.iowa.gov/pk-12/special-education/public-reporting#idea-part-b-and-part-c-annual-determinations>

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

The Iowa Administrative Code for the Early ACCESS Integrated System of Early Intervention Services are posted on the Iowa Legislature website:

<https://www.legis.iowa.gov/law/administrativeRules/rules?agency=281&chapter=120>

Iowa's General Supervision Policies are posted on the Iowa Department of Education website: <https://educate.iowa.gov/pk-12/early-childhood/early-access#idea-part-c-policies>

Iowa's Early Intervention Procedures are posted on the i3 website: <https://iowaideainformation.org/early-intervention/>

**Technical Assistance System:**

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

The Comprehensive System of Personnel Development (CSPD) for Early ACCESS has been developed and implemented in collaboration with the Department of Education, Lead Agency, Department of Health and Human Services and Child Health Specialty Clinics, Signatory Agencies, and Early ACCESS Grantees. The Early ACCESS State Team, which is representative of staff from each of the signatory agencies, is responsible for providing professional learning and technical assistance for Early ACCESS leadership, service coordinators and providers.

The technical assistance system is intricately entwined with Iowa's professional development system. The activities and strategies used for technical assistance are defined by Iowa's professional development system. The Iowa Professional Development Model (IPDM) is an integrated continuous improvement cycle of planning, ongoing implementation and evaluation. The IPDM emphasizes ongoing support and feedback for the learning and application of new skills.

The Early ACCESS system of professional learning and technical assistance provides leverage in four ways: (1) Alignment of resources, including fiscal and personnel, focused on the Family Guided Routines Based Intervention (FGRBI) Framework across priority areas to enhance positive outcomes and results for children and families; (2) Collaboration of Iowa's signatory agencies and Early ACCESS Grantees; (3) Identification and development of evidence-based frameworks, strategies and programs by experts in the field regardless of affiliation or location; and (4) Intentional statewide scaling and sustainability based on implementation science.

**Professional Development System:**

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

The Early ACCESS State Team meets with AEA Directors of Special Education and Early ACCESS Grantees Leadership Team to provide technical assistance and obtain input and recommendations regarding priorities, resources and concerns. The Early ACCESS State Team directly supports Early ACCESS Grantees in the completion of corrective action plans and continuous improvement activities. A priority is placed on activities supportive of consistency in communication and implementation of IDEA Part C across the statewide system. Professional learning and technical assistance are

provided to ensure implementation of corrective action plans, improvement activities, SPP/APR indicators and evidence-based intervention practices.

Meetings with the Early ACCESS Grantees provide opportunities for:

- Statewide discussion and collaboration;
- Dissemination of information;
- Activities to support Early ACCESS Grantees administration, leadership and providers;
- Reciprocal learning; and,
- Coordination with the early care, health and education systems.

The Early ACCESS Grantees Leadership Team meets four times per year. Approximately 30 members attend meetings which include Early ACCESS Grantees liaisons and leadership, signatory agency liaisons, Early ACCESS state coordinator, Chief of the Bureau of Early ACCESS and Early Childhood Education, Deaf Education consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education. Meeting minutes, support and guidance documents and video recordings of training and technical assistance are shared with the members.

The AEA Directors of Special Education, Iowa's State Director of Special Education and Department of Education Bureau Chief of Early ACCESS and Early Childhood Education meet monthly to collaborate on the implementation of statewide activities addressing Early ACCESS and special education. The Bureau Chief of Early ACCESS and Early Childhood Education serves as the Early ACCESS liaison with the AEA Directors of Special Education.

Iowa ensures Early ACCESS service coordinators meet established qualifications by successfully completing training. Iowa's Early ACCESS Service Coordination Competency Training consists of six components: 1) Shadowing experienced service coordinators; 2) Successful completion of the five online training modules; 3) Completing and submitting five application activities; 4) One 6-hour face-to-face workshop occurring after service coordinators have had an active caseload for at least 60 days and completed the online modules; 5) Mentoring; and 6) Being observed and receiving feedback on an early intervention home visit. The training process is completed in approximately eight months, though it may take up to one year, depending on when Early ACCESS service coordinators begin employment.

The Early ACCESS Service Coordination Competency Training content is annually reviewed and revised to provide knowledge and skills for service coordinators. Revisions are based upon data and recommendations collected from the AEA Directors of Special Education, Early ACCESS Grantees Leadership, Early ACCESS service coordinators and the Early ACCESS State Team.

#### **Stakeholder Engagement:**

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

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually
  - Early ACCESS IDEA Part C Lead Agency (Department of Education)
  - Early ACCESS Service Providers
  - Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)
  - Early Head Start / Head Start
  - Medical / Health Care Providers
  - Mental Health Providers
  - Parent Training and Information Center
  - Parents of Children with Disabilities
  - Personnel Preparation / Institutes of Higher Education
  - Private Health Insurance / Insurance Commission
  - Special Education / IDEA Part B 619
  - State Legislators

2. AEA Directors of Special Education for the nine Grantees; weekly and monthly meetings.

3. Early ACCESS Grantees Leadership Team; four meetings held annually

- AEA Director of Special Education
- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS State Coordinator
- Early ACCESS Grantees Liaisons and Leadership
- Signatory Agency Liaisons (Department of Health and Human Services and Child Health Specialty Clinics)
- Specialized Lead Consultants

4. Early ACCESS State Implementation Team; held every 2 months

- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS CSPD Consultant
- Department of Education Early ACCESS State Coordinator
- AEA Directors of Special Education

5. Early ACCESS Task Teams; as needed

- ACHIEVE Professional Learning for Early ACCESS
- Child Development Professional Learning
- Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

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

YES

**Number of Parent Members:**

5

**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.**

As a primary means of involvement, parent members of ICEA have been involved in every aspect of engagement. As with all ICEA members, parents analyzed the historical and current data addressing IDEA Part C APR indicators, requirements and performance. The ICEA used the "Look! Think! Act! Using Data for Program Improvement" process developed by the Center for IDEA Early Childhood Data Systems (DaSy) to engage in discussions regarding improvement strategies to reach targets and improve outcomes. Discussions of data were intentionally structured to provide a means for active, two-way dialogue among interested parties, leadership and community collaborators. Furthermore, a family has been invited to share their experiences with Early ACCESS at each ICEA meeting with an opportunity for Council members to ask questions and discuss topics such as evaluation and assessment, eligibility, service provision and transition.

Evaluation of progress is conducted by comparing annual indicator data to identified targets. For any revisions needed prior to any SPP/APR submission, feedback is gathered at least two months ahead, to allow for consideration and additional sessions, if warranted. Additional evaluation methods and data sources may be added as improvement strategies are implemented and progress data are shared and reviewed.

Additionally, the Early ACCESS State Team collaborated with Iowa's ASK (Access for Special Kids) Resource Center (parent training, information and advocacy center) to connect with families for input and feedback in stakeholder activities.

**Activities to Improve Outcomes for Children with Disabilities:**

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

The Early ACCESS State Team engages in a number of ongoing opportunities to increase the capacity of diverse groups of parents participation in systemic planning and implementation of activities to enhance the outcomes for children and their families receiving Early ACCESS services. The activities are tailored to specific topics. Specific activities for increasing capacity of parent involvement and engagement included the Department hosting public webinars, in-person meetings and online surveys.

The ASK Resource Center hosted the Early ACCESS State Team to present three "Ask the Expert Webinars" which provided information and resources about the different services and supports available for families with children, birth to three years of age. The ASK Resource Center's website includes resources about Early ACCESS and a link to Iowa's early intervention Central Directory to make a referral or request Early ACCESS services. Furthermore, the Department significantly expanded a state contract with Iowa ASK Resource Center to provide comprehensive outreach and support to families whose children are served under IDEA. The new coordination efforts increase the number of family service support providers and ensure they are located across the state to support ongoing communication and feedback loops.

The Iowa Family Support Network (IFSN) website hosted the Early ACCESS Central Directory and public awareness program. The IFSN provides information for families, professionals and primary referral sources such as videos of early intervention services, handouts about Early ACCESS, multiple ways to make a referral to Early ACCESS, and contact information members of ICEA, Early ACCESS State Team and Early ACCESS Grantees Leadership in the AEA's.

The Department established a parent group specifically to provide input on family engagement in the IFSP process. The focus of the group was on the development of the ACHIEVE Family Portal to the statewide IFSP/IEP system. Families' ongoing input has been used to directly inform the development of the portal and related ACHIEVE Family Portal User Guide. The portal will allow families real-time access to progress monitoring data as well as all documents related to their child's evaluations, assessments and IFSPs, including transition planning steps and activities. The original date of the launch for the ACHIEVE Family Portal was July 2023; however, the launch has been delayed until February 2025.

**Soliciting Public Input:**

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

The Department engages with constituent groups throughout the year to garner input on current status and progress toward IDEA Part C APR indicator targets, IDEA Part C compliance and SSIP fidelity of implementation. Discussions and input include a review of historical and baseline data, targets and progress on the APR indicators, compliance and corrective actions and the State-identified Measurable Result (SiMR). Discussions center around current data, trendlines toward meeting targets and activities which may be contributing to decreases or increases in results.

Specifically, the ICEA discusses progress of the state's performance on the IDEA Part C SPP/APR indicators, requirements and performance at every ICEA meeting. The ICEA advises and assists the Department by making recommendations for any needed revisions to targets, baseline data and improvement activities. The AEA Directors of Special Education also annually review both state and Grantees data profiles and provide input. Current and future activities include public posting of state and Grantees data on the Department's public reporting webpage as well as routine data reviews with various stakeholder groups. Routines also include stakeholder discussion of current strategies, impact and considerations for improvement. The data and acquired information from stakeholders assist the Department and signatory agencies with adjustments of priorities and activities in Iowa's SPP/APR as components of continuous improvement.

Public engagement, routine data discussions and input provided throughout the year included the following constituent groups:

- AEA Directors of Special Education
- Early ACCESS Grantees Leadership
- Early ACCESS Signatory Agencies' Leadership
- Iowa Council for Early ACCESS

#### **Making Results Available to the Public:**

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

June 2025: A direct link to the final submitted FFY 2023 APR will be provided on the Department of Education's public reporting website for early intervention and special education, which is the conclusion of target setting, data analysis, development of improvement strategies and evaluation activities.

Ongoing: Progress of the State's performance on the APR indicators is shared with Department of Education leadership, Signatory Agencies leadership, AEA Directors of Special Education, Early ACCESS Grantees Leadership and ICEA through scheduled data reviews, which include discussion and making needed revisions to targets or baseline data. Conclusions and additional input regarding decision making and final determinations are provided from each stakeholder group.

#### **Reporting to the Public:**

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

The Department publicly reported performance and progress and/or slippage in meeting the State Performance Plan (SPP)/Annual Performance Report (APR) indicator targets at the state level and at the Early ACCESS Grantees level through the following channels and timelines:

Iowa Part C State Performance Plan (SPP)/Annual Performance Report (APR) are posted on the Iowa Department of Education webpage titled, "State Performance Plan and Annual Performance Report: Part C Early Intervention" no later than 120 days from submission at:  
<https://educate.iowa.gov/pk-12/special-education/public-reporting#state-performance-plan-and-annual-performance-report>

Early ACCESS Grantees Data Profiles are posted on the Iowa Department of Education webpage titled, "Area Education Agency (AEA) Data Profiles: Part C" no later than 120 days from submission at:  
<https://educate.iowa.gov/pk-12/special-education/public-reporting#district-and-area-education-agency-aea-data-profiles>

Iowa Part C SPP/APR and Early ACCESS Grantees Data Profiles are provided electronically to the following constituents no later than 120 days from submission:

- AEA Directors of Special Education
- Department of Education Leadership
- Early ACCESS Grantees Leadership Team
- Early ACCESS Signatory Agencies' Leadership
- Early ACCESS State Team
- Iowa Council for Early ACCESS

#### **Intro - Prior FFY Required Actions**

None

#### **Intro - OSEP Response**

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

#### **Intro - Required Actions**

## Indicator 1: Timely Provision of Services

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

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

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

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	98.26%	Not Valid and Reliable	99.54%	99.85%	92.30%

### Targets

FFY	2023	2024	2025
Target	100%	100%	100%

### FFY 2023 SPP/APR Data



Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1,972	2,090	92.30%	100%	97.03%	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.*

56

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

The reasons for delay attributed to family circumstances included family illness, hospitalization of family members and missed appointments by family. Additionally, reasons for untimely provision of early intervention services included early intervention staff scheduling conflicts, limited interpreters, staff illness, personnel shortages and inadequate documentation of the provision of services.

**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).**

Iowa's criteria for timely provision of early intervention services is when each service on the IFSP is initiated within 30 calendar days from the date in which written parental consent for services is obtained. Data are based on the actual number of days, not the average, between parental consent and the date documented on IFSP service logs for delivery of the first early intervention service.

**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).**

January 1 through June 30, 2024

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

The data for Indicator 1 were collected from the ACHIEVE system. The dataset for each Early ACCESS Grantee included all initial IFSPs and subsequent IFSPs with new early intervention services between January 1, 2024 through June 30, 2024. The Department ensured the dataset for each Early ACCESS Grantee was comparable to the number and demographics of infants and toddlers with IFSPs for the full reporting year.

A confidence level of 95% and a +/- 5% margin of error was used to establish each Grantee's dataset based on the number and demographics of children with IFSPs in the full year. Additionally, the number of children with IFSPs were reviewed to ensure the dataset accurately reflected infants and toddlers with IFSPs for the full reporting period.

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

**Correction of Findings of Noncompliance Identified in FFY 2022**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
210	210	0	0

**FFY 2022 Findings of Noncompliance Verified as Corrected**

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

The ACHIEVE system is designed to calculate the number of calendar days from the date of written parental Consent for Early ACCESS Services to the date of initial receipt of each early intervention service on the Initial IFSP and subsequent IFSPs. Seven Early ACCESS Grantees did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance.

The seven Early ACCESS Grantees were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The Grantees were required to document the implementation of a corrective action plan, conduct a root cause analysis and correct each case of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance completed a professional learning module and received technical assistance about providing and documenting timely delivery of early intervention services from the Early ACCESS State Team.

The Department's Part C Coordinator verified timely corrections of every finding of child-specific and systemic-level noncompliance and implementation of timely provision of early intervention services within 30 calendar days of parental consent at 100% for Indicator 1 within one year. The seven Early ACCESS Grantees provided evidence of correction of every child-specific finding of noncompliance and completion of the corrective action plan to ensure early intervention services were provided within 30 calendar days of the written parental Consent for Early ACCESS Services.

The Department collected a new dataset from the ACHIEVE system of child files from each of the seven Early ACCESS Grantees to conduct additional data reviews. Each dataset included five initial IFSPs and five subsequent IFSPs with new services with dates subsequent to the completion of the corrective actions. The Department determined, based on the review of subsequent data, each of the seven Early ACCESS Grantees demonstrated 100% compliance with the regulatory requirement to provide early intervention service(s) within 30 calendar days of the written parental Consent for Early ACCESS Services for every new service on an IFSP.

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

During FFY 2022, 210 findings of child-specific noncompliance were identified in seven Early ACCESS Grantees.

The seven Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance as soon as possible, and no later than one year after the notification of noncompliance. Every finding of child-specific noncompliance was corrected as soon as possible; every Early ACCESS Grantee had corrected the child-specific noncompliance within 2 months of the notification of noncompliance. The seven Early ACCESS Grantees provided evidence of correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program.

The Department's Part C Coordinator verified corrections of every child-specific noncompliance by reviewing each of the child files to ensure every early intervention service on the IFSP had been provided and reasons for delay were documented. A review of exit reports was conducted to confirm a child was no longer within the jurisdiction, if applicable.

#### Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

### 1 - Prior FFY Required Actions

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

#### Response to actions required in FFY 2022 SPP/APR

### 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, 2023- June 30, 2024). 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	96.10%

FFY	2018	2019	2020	2021	2022
Target>=	96.60%	96.60%	96.60%	96.60%	96.64%
Data	97.76%	98.29%	93.99%	95.37%	98.62%

### Targets

FFY	2023	2024	2025
Target >=	96.68%	96.72%	96.76%

### Targets: Description of Stakeholder Input

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually  
-Early ACCESS IDEA Part C Lead Agency (Department of Education)

- Early ACCESS Service Providers
- Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)
- Early Head Start / Head Start
- Medical / Health Care Providers
- Mental Health Providers
- Parent Training and Information Center
- Parents of Children with Disabilities
- Personnel Preparation / Institutes of Higher Education
- Private Health Insurance / Insurance Commission
- Special Education / IDEA Part B 619
- State Legislators

2. AEA Directors of Special Education for the nine Grantees; weekly and monthly meetings.

3. Early ACCESS Grantees Leadership Team; four meetings held annually

- AEA Director of Special Education
- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS State Coordinator
- Early ACCESS Grantees Liaisons and Leadership
- Signatory Agency Liaisons (Department of Health and Human Services and Child Health Specialty Clinics)
- Specialized Lead Consultants

4. Early ACCESS State Implementation Team; held every 2 months

- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS CSPD Consultant
- Department of Education Early ACCESS State Coordinator
- AEA Directors of Special Education

5. Early ACCESS Task Teams; as needed

- ACHIEVE Professional Learning for Early ACCESS
- Child Development Professional Learning
- Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

#### Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	3,043
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Total number of infants and toddlers with IFSPs	3,070

#### FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
3,043	3,070	98.62%	96.68%	99.12%	Met target	No Slippage

Provide additional information about this indicator (optional).

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

**2 - Required Actions**

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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

### 3 - Indicator Data

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

NO

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

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually
  - Early ACCESS IDEA Part C Lead Agency (Department of Education)
  - Early ACCESS Service Providers
  - Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)
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  - Department of Education Early ACCESS State Coordinator
  - AEA Directors of Special Education
5. Early ACCESS Task Teams; as needed
  - ACHIEVE Professional Learning for Early ACCESS
  - Child Development Professional Learning
  - Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

## Historical Data

Outcome	Baseline	FFY	2018	2019	2020	2021	2022
A1	2018	Target>=	46.63%	46.63%	46.29%	46.29%	48.63%
A1	46.29%	Data	46.29%	45.83%	44.23%	46.83%	47.84%
A2	2018	Target>=	71.90%	71.90%	59.67%	59.67%	59.77%
A2	59.67%	Data	59.67%	54.78%	53.32%	51.68%	56.67%
B1	2018	Target>=	52.33%	52.33%	51.21%	51.21%	54.06%
B1	51.21%	Data	51.21%	51.63%	50.93%	53.03%	57.00%
B2	2018	Target>=	52.09%	52.09%	42.94%	42.94%	43.33%
B2	42.94%	Data	42.94%	36.92%	38.10%	38.96%	45.72%
C1	2018	Target>=	58.08%	58.08%	57.40%	57.40%	59.73%
C1	57.40%	Data	57.40%	53.83%	54.56%	54.84%	55.30%
C2	2018	Target>=	73.24%	73.24%	63.08%	63.08%	63.18%
C2	63.08%	Data	63.08%	58.42%	55.95%	56.44%	61.26%

## Targets

FFY	2023	2024	2025
Target A1>=	50.97%	53.31%	55.65%
Target A2>=	59.87%	59.97%	60.07%
Target B1>=	56.91%	59.76%	62.21%
Target B2>=	43.71%	44.09%	44.47%
Target C1>=	62.05%	64.38%	66.70%
Target C2>=	63.28%	63.38%	63.48%

## 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	4	0.18%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	720	32.70%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	359	16.30%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	411	18.66%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	708	32.15%

Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	770	1,494	47.84%	50.97%	51.54%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in	1,119	2,202	56.67%	59.87%	50.82%	Did not meet target	Slippage



Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
Outcome A by the time they turned 3 years of age or exited the program							

**Provide reasons for A2 slippage, if applicable**

The Department's analysis of the ECO data for functioning within age expectations showed two of the nine Early ACCESS Grantees met the target; however, seven of the nine Grantees had slippage. The Grantees indicated a continued need for Early Childhood Outcome (ECO) Summary and child development training for new and existing staff as a reason for slippage.

The Department has used the OSEP-funded Early Childhood Technical Assistance Center training materials and resources to ensure quality professional development for ECO occurs statewide (e.g., Decision Tree for summary rating discussions, age-expected child development resources, and Child Outcomes Summary process materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have access to consistent training on how to implement procedures for gathering, analyzing and reporting the ECO data.

The Department has continued to emphasize the ECO decision-making process: 1) Ensure teams were determining the 1-7 rating and progress using the ECO Decision-Making Tree and Progress questions; 2) Document the Present Levels of Development and assessment data which support the ECO decisions; and 3) understand the relationship of ECO with Iowa's Early Learning Standards. The ACHIEVE system supports the IFSP team members, including families, in participating in the ECO process and ultimately determining accurate Present Levels of Development and progress for children in Early ACCESS. Professional development emphasizing alignment between assessment data, child development and the three ECO areas has been ongoing.

The Department has continued to monitor progress for all Grantees on this indicator through scheduled data verification reports, file reviews, technical assistance and support and monitoring implementation of corrective action plans. Monitoring includes data and root cause analysis by both the Early ACCESS State Team and Early ACCESS Grantees.

**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	0.14%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	849	38.56%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	481	21.84%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	572	25.98%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	297	13.49%

Outcome B	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,053	1,905	57.00%	56.91%	55.28%	Did not meet target	Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	869	2,202	45.72%	43.71%	39.46%	Did not meet target	Slippage

**Provide reasons for B1 slippage, if applicable**

The Department's analysis of the ECO data for children who exited and substantially increased their rate of growth showed five of the nine Early ACCESS Grantees met the FFY 2023 target; however, six of the nine Grantees had slippage. The Grantees indicated a continued need for Early Childhood Outcome (ECO) Summary and child development training for new and existing staff as a reason for slippage.

The Department has used the OSEP-funded Early Childhood Technical Assistance Center training materials and resources to ensure quality professional development for ECO occurs statewide (e.g., Decision Tree for summary rating discussions, age-expected child development resources, and Child Outcomes Summary process materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have access to consistent training on how to implement procedures for gathering, analyzing and reporting the ECO data.

The Department has continued to emphasize the ECO decision-making process: 1) Ensure teams were determining the 1-7 rating and progress using the ECO Decision-Making Tree and Progress questions; 2) Document the Present Levels of Development and assessment data which support the ECO decisions; and 3) understand the relationship of ECO with Iowa's Early Learning Standards. The ACHIEVE system supports the IFSP team members,

including families, in participating in the ECO process and ultimately determining accurate Present Levels of Development and progress for children in Early ACCESS. Professional development emphasizing alignment between assessment data, child development and the three ECO areas has been ongoing.

The Department has continued to monitor progress for all Grantees on this indicator through scheduled data verification reports, file reviews, technical assistance and support and monitoring implementation of corrective action plans. Monitoring includes data and root cause analysis by both the Early ACCESS State Team and Early ACCESS Grantees.

**Provide reasons for B2 slippage, if applicable**

The Department's analysis of the ECO data for functioning within age expectations showed three of the nine Early ACCESS Grantees met the FFY 2023 target; however, eight of the nine Grantees had slippage. The Grantees indicated a continued need for Early Childhood Outcome (ECO) Summary and child development training for new and existing staff as a reason for slippage.

The Department has used the OSEP-funded Early Childhood Technical Assistance Center training materials and resources to ensure quality professional development for ECO occurs statewide (e.g., Decision Tree for summary rating discussions, age-expected child development resources, and Child Outcomes Summary process materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have access to consistent training on how to implement procedures for gathering, analyzing and reporting the ECO data.

The Department has continued to emphasize the ECO decision-making process: 1) Ensure teams were determining the 1-7 rating and progress using the ECO Decision-Making Tree and Progress questions; 2) Document the Present Levels of Development and assessment data which support the ECO decisions; and 3) understand the relationship of ECO with Iowa's Early Learning Standards. The ACHIEVE system supports the IFSP team members, including families, in participating in the ECO process and ultimately determining accurate Present Levels of Development and progress for children in Early ACCESS. Professional development emphasizing alignment between assessment data, child development and the three ECO areas has been ongoing.

The Department has continued to monitor progress for all Grantees on this indicator through scheduled data verification reports, file reviews, technical assistance and support and monitoring implementation of corrective action plans. Monitoring includes data and root cause analysis by both the Early ACCESS State Team and Early ACCESS Grantees.

**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	4	0.18%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	629	28.56%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	339	15.40%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	522	23.71%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	708	32.15%

Outcome C	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	861	1,494	55.30%	62.05%	57.63%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	1,230	2,202	61.26%	63.28%	55.86%	Did not meet target	Slippage

**Provide reasons for C2 slippage, if applicable**

The Department's analysis of the ECO data for functioning within age expectations showed two of the nine Early ACCESS Grantees (AEA) met the FFY 2023 target; however, eight of the nine Grantees had slippage. The Grantees indicated a continued need for Early Childhood Outcome (ECO) Summary and child development training for new and existing staff as a reason for slippage.

The Department has used the OSEP-funded Early Childhood Technical Assistance Center training materials and resources to ensure quality professional development for ECO occurs statewide (e.g., Decision Tree for summary rating discussions, age-expected child development resources, and Child Outcomes Summary process materials). Use of the ECO training materials has provided assurance that all IFSP teams in the state have access to consistent training on how to implement procedures for gathering, analyzing and reporting the ECO data.

The Department has continued to emphasize the ECO decision-making process: 1) Ensure teams were determining the 1-7 rating and progress using the ECO Decision-Making Tree and Progress questions; 2) Document the Present Levels of Development and assessment data which support the ECO decisions; and 3) understand the relationship of ECO with Iowa's Early Learning Standards. The ACHIEVE system supports the IFSP team members,

including families, in participating in the ECO process and ultimately determining accurate Present Levels of Development and progress for children in Early ACCESS. Professional development emphasizing alignment between assessment data, child development and the three ECO areas has been ongoing.

The Department has continued to monitor progress for all Grantees on this indicator through scheduled data verification reports, file reviews, technical assistance and support and monitoring implementation of corrective action plans. Monitoring includes data and root cause analysis by both the Early ACCESS State Team and Early ACCESS Grantees.

#### FFY 2023 SPP/APR Data

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	3,365
The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.	1,163
Number of infants and toddlers with IFSPs assessed	2,202

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The Early Childhood Outcome (ECO) Summary process, nationally referred to as Child Outcomes Summary, is used by IFSP Teams to summarize the child's skills and behaviors in comparison to the functioning expected for the age of the child and the child's progress in each of the three ECO areas.

The IFSP Teams gather and summarize information about every child's present levels of development and functioning for each of the Early Childhood Outcome areas as part of the evaluation and child and family-directed assessment procedures. A variety of methods are used which include a review of records, family and caregiver interviews, observations, and administration of evaluation and assessments tools. The assessments commonly administered by teams include: Developmental Assessment of Young Children-2; Developmental Profile 4; Teaching Strategies GOLD; and Assessment, Evaluation, and Programming System for Infants and Children, Third Edition. The IFSP Team, which includes families, reviews the child's functioning and progress. The ECO Decision Tree is used as a tool to determine the ECO rating.

Data for the Early Childhood Outcomes indicator (3) were collected from Iowa's ACHIEVE System of all children who exited Early ACCESS, IDEA Part C services. The data reported for Indicator 3 included children who received 6 months or more of early intervention services prior to exiting between July 1, 2023 through June 30, 2024.

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

### 3 - Prior FFY Required Actions

None

### 3 - OSEP Response

### 3 - Required Actions

## Indicator 4: Family Involvement

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2018	2019	2020	2021	2022
A	2014	Target>=	93.00%	93.00%	79.84%	79.84%	80.84%
A	79.84%	Data	72.05%		77.19%	78.07%	98.31%
B	2014	Target>=	93.00%	93.00%	85.86%	85.86%	86.86%
B	85.86%	Data	86.02%		85.96%	88.06%	96.61%
C	2014	Target>=	93.00%	93.00%	83.25%	83.25%	84.25%
C	83.25%	Data	78.88%		87.72%	84.71%	97.69%

## Targets

FFY	2023	2024	2025
Target A>=	81.84%	82.84%	83.84%
Target B>=	87.86%	88.86%	89.86%
Target C>=	85.25%	86.25%	87.25%

## Targets: Description of Stakeholder Input

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually
  - Early ACCESS IDEA Part C Lead Agency (Department of Education)
  - Early ACCESS Service Providers
  - Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)
  - Early Head Start / Head Start
  - Medical / Health Care Providers
  - Mental Health Providers
  - Parent Training and Information Center
  - Parents of Children with Disabilities
  - Personnel Preparation / Institutes of Higher Education
  - Private Health Insurance / Insurance Commission
  - Special Education / IDEA Part B 619
  - State Legislators
2. AEA Directors of Special Education for the nine Grantees; weekly and monthly meetings.
3. Early ACCESS Grantees Leadership Team; four meetings held annually
  - AEA Director of Special Education
  - Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
  - Department of Education Early ACCESS State Coordinator
  - Early ACCESS Grantees Liaisons and Leadership
  - Signatory Agency Liaisons (Department of Health and Human Services and Child Health Specialty Clinics)
  - Specialized Lead Consultants
4. Early ACCESS State Implementation Team; held every 2 months
  - Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
  - Department of Education Early ACCESS CSPD Consultant
  - Department of Education Early ACCESS State Coordinator
  - AEA Directors of Special Education
5. Early ACCESS Task Teams; as needed
  - ACHIEVE Professional Learning for Early ACCESS
  - Child Development Professional Learning
  - Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely

review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

#### FFY 2023 SPP/APR Data

The number of families to whom surveys were distributed	4,452
Number of respondent families participating in Part C	871
Survey Response Rate	19.56%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	812
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	819
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	791
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	799
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	769
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	781

Measure	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	98.31%	81.84%	99.15%	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)	96.61%	87.86%	99.00%	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)	97.69%	85.25%	98.46%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

#### Response Rate

FFY	2022	2023
Survey Response Rate	12.40%	19.56%

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

The Department compared the demographics of the children for whom the families responded to the demographics of the state's population of children in Early ACCESS to determine representativeness. If the percent of the Family Engagement Survey responses are within +/- 3 percentage points of the population, it is considered representative. Differences which are greater are considered over- or underrepresented, respectively.

**Include the State's analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State. States must include race/ethnicity in their analysis. In addition, the State's analysis must include at least one of the following demographics: socioeconomic status, parents, or guardians whose primary**

**language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another category approved through the stakeholder input process.**

The Early ACCESS Family Engagement Survey data were analyzed across race/ethnicity; gender; and geographic location to determine the extent to which families responding to the survey are representative of the demographics of children receiving early intervention services in Iowa.

The Early ACCESS Family Engagement Survey data were analyzed by race/ethnicity; gender; and geographic location to determine the extent to which families who responded to the survey were representative of the demographics of infants and toddlers enrolled in Iowa's Early ACCESS Services. The Department determined the respondents of the Family Engagement Survey were not representative of the population of children receiving Early ACCESS services in 3 categories for race/ethnicity, 2 categories for gender, and 0 categories for geographic location.

Upon analysis of the race/ethnicity subgroups, the Department found the data were not representative in terms of the percent of respondents in each race/ethnicity category. Specifically, respondents of the survey were underrepresented for the race/ethnicity categories of Hispanic / Latino by 4.5 percentage points and Black or African American by 4.9 percentage points. Families who responded on behalf of children identified as White were overrepresented by 6.5 percentage points. The percent of survey respondents from American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander; and Two or More Races were representative within +/- 3% of the population of children in Early ACCESS.

The analysis of the 2 categories of gender found the survey respondents were underrepresentative for females and overrepresentative for males by 3.9 percentage points for each, respectively, compared to the population percentage.

In reviewing representativeness for geographic location based on school district locale size, as defined by the U.S. Census bureau being a: city, suburb, town, or rural area, respondents were within +/- 3% of the population percentage.

Based on the analysis described above, the Department has recognized the need to improve representativeness of families in the categories of race/ethnicity and gender.

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

**NO**

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

The ACHIEVE system is configured to use specific criteria to automatically send the Early ACCESS Family Engagement Survey to every family in Early ACCESS via an email with a unique survey URL to access the survey. The ACHIEVE system allows for the tracking of responses by the demographics of the children, including and not limited to: race/ethnicity; gender; and geographic location. Additional reminders and follow up notifications are then sent to families to complete and submit the Family Engagement Survey. The Department has the ability within the survey distribution software in the ACHIEVE system to target additional reminders to families of children in underrepresented groups during the Family Engagement Survey open period to continue to increase the response rate for a demographic category.

The Department will continue to use the advanced features of ACHIEVE to improve response rates and representativeness. These features include the ability to monitor responses and email families in underrepresented categories a reminder to complete the Family Engagement Survey. The Department will also elicit feedback from the Iowa Council for Early ACCESS, Early ACCESS Grantee Leadership Team and other constituents for suggestions on ways to further increase responses.

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

Within the ACHIEVE system, the Family Engagement Survey is sent directly to families via email. The Part C Data Manager is able to track participation in the completion of the survey according to gender; race/ethnicity; and geographic location of the children for which the families are responding in real time. If, during the survey window, the participation of historically underrepresented groups is lower than the current state population for the groups (such as families of children who are two or more races), then the Part C Data Manager is able to send targeted reminder emails to those groups to try to increase the number who are responding. In addition, a new family portal will be released in February 2025, which will provide the opportunity for family engagement and offer families another means to receive the Family Engagement Survey to encourage participation and increase the response rate overall.

The Department will continue to use the advanced features of ACHIEVE to improve response rates and representativeness. These features include the ability to monitor responses and email families in underrepresented categories a reminder to complete the Family Engagement Survey. The Department will also elicit feedback from the Iowa Council for Early ACCESS, Early ACCESS Grantee Leadership Team and other constituents for suggestions on ways to further increase responses.

**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.**

The Early ACCESS Family Engagement Survey which is used to collect Indicator 4A, 4B, and 4C data are available for all families of children in Early ACCESS who have IFSPs. The ACHIEVE system is configured to use specific criteria to automatically send the Early ACCESS Family Engagement Survey to every family in Early ACCESS via an email with a unique survey URL to access the survey. The Early ACCESS Family Engagement Survey is sent when the following events occur: 1) Annual Review of the Individualized Family Service Plan (IFSP); and 2) Exit from IDEA Part C early intervention services. The ACHIEVE system will not send a survey consecutively to the same family when these events happen fewer than 90 days from each other or a child exits within 30 days of the initial IFSP. All nine Early ACCESS Grantees are represented in the statewide distribution of the Early ACCESS Family Engagement Survey.

Given these analyses, there is no evidence of non-response bias based on gender and geographic location, and there is evidence based on race/ethnicity.

The Department will continue to use the advanced features of ACHIEVE to improve response rates and representativeness. These features include the ability to monitor responses and email families in underrepresented categories a reminder to complete the Family Engagement Survey. The Department will also elicit feedback from the Iowa Council for Early ACCESS, Early ACCESS Grantee Leadership Team and other constituents for suggestions on ways to further increase responses.

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

#### **4 - Prior FFY Required Actions**

In the FFY 2023 SPP/APR, the State must report whether its FFY 2023 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

**Response to actions required in FFY 2022 SPP/APR**

#### **4 - OSEP Response**

#### **4 - Required Actions**

In the FFY 2024 SPP/APR, the State must report whether its FFY 2024 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.



## Indicator 5: Child Find (Birth to One)

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2017	1.08%

FFY	2018	2019	2020	2021	2022
Target >=	1.45%	1.45%	1.08%	1.08%	1.13%
Data	1.18%	1.17%	0.73%	0.89%	1.17%

### Targets

FFY	2023	2024	2025
Target >=	1.18%	1.23%	1.28%

### Targets: Description of Stakeholder Input

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually
  - Early ACCESS IDEA Part C Lead Agency (Department of Education)
  - Early ACCESS Service Providers
  - Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)
  - Early Head Start / Head Start
  - Medical / Health Care Providers
  - Mental Health Providers
  - Parent Training and Information Center
  - Parents of Children with Disabilities
  - Personnel Preparation / Institutes of Higher Education
  - Private Health Insurance / Insurance Commission
  - Special Education / IDEA Part B 619
  - State Legislators

2. AEA Directors of Special Education for the nine Grantees; weekly and monthly meetings.

3. Early ACCESS Grantees Leadership Team; four meetings held annually
  - AEA Director of Special Education
  - Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
  - Department of Education Early ACCESS State Coordinator
  - Early ACCESS Grantees Liaisons and Leadership
  - Signatory Agency Liaisons (Department of Health and Human Services and Child Health Specialty Clinics)
  - Specialized Lead Consultants

4. Early ACCESS State Implementation Team; held every 2 months
  - Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
  - Department of Education Early ACCESS CSPD Consultant
  - Department of Education Early ACCESS State Coordinator
  - AEA Directors of Special Education

5. Early ACCESS Task Teams; as needed
  - ACHIEVE Professional Learning for Early ACCESS
  - Child Development Professional Learning
  - Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

#### Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 1 with IFSPs	326
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 1	36,766

#### FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
326	36,766	1.17%	1.18%	0.89%	Did not meet target	Slippage

#### Provide reasons for slippage, if applicable

The Department attributes slippage to statewide concerns about the sustainability of current early intervention and special education infrastructures with the AEAs due to legislation to reorganize AEA services. The Department is investigating the possible impact of recent state legislation to public perception of early intervention services which may have caused a decrease in the early intervention referrals to Early ACCESS in this reporting period.

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

A comprehensive child find system is a priority area to ensure Early ACCESS is achieving the purposes of Iowa's Integrated System of Early Intervention Services. The Department has formed an Early ACCESS Task Team to investigate the possible impact of recent state legislation to early intervention services as a possible cause of the decline in the referrals for infants, birth to 1, and percent of children in this age group receiving Early ACCESS services in this reporting period.

Additionally, the Early ACCESS State Team conducted a root cause analysis by reviewing historical and current child find data, referral rates by primary provider sources and policies and procedures. The team engaged in discussions with the Department leadership, Signatory Agency leadership, Iowa Council for Early ACCESS, Early ACCESS Grantee Leadership and AEA Directors of Special Education. The analysis identified the percent of referrals

through CAPTA were the highest primary referral source; however, the CAPTA referrals were also the highest percent of families who declined to engage with Early ACCESS for screenings, evaluations and assessments or early intervention services. Additionally, the root cause analysis identified the timing of initial contacts by the Early ACCESS service coordinators was related to families accepting or declining further involvement.

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

## **5 - Prior FFY Required Actions**

None

## **5 - OSEP Response**

## **5 - Required Actions**

## Indicator 6: Child Find (Birth to Three)

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

## 6 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2017	2.46%

FFY	2018	2019	2020	2021	2022
Target >=	2.70%	2.70%	2.46%	2.46%	2.62%
Data	2.59%	2.80%	2.15%	2.46%	2.76%

#### Targets

FFY	2023	2024	2025
Target >=	2.77%	2.93%	3.08%

#### Targets: Description of Stakeholder Input

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually  
-Early ACCESS IDEA Part C Lead Agency (Department of Education)

- Early ACCESS Service Providers
- Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)
- Early Head Start / Head Start
- Medical / Health Care Providers
- Mental Health Providers
- Parent Training and Information Center
- Parents of Children with Disabilities
- Personnel Preparation / Institutes of Higher Education
- Private Health Insurance / Insurance Commission
- Special Education / IDEA Part B 619
- State Legislators

2. AEA Directors of Special Education for the nine Grantees; weekly and monthly meetings.

3. Early ACCESS Grantees Leadership Team; four meetings held annually

- AEA Director of Special Education
- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS State Coordinator
- Early ACCESS Grantees Liaisons and Leadership
- Signatory Agency Liaisons (Department of Health and Human Services and Child Health Specialty Clinics)
- Specialized Lead Consultants

4. Early ACCESS State Implementation Team; held every 2 months

- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS CSPD Consultant
- Department of Education Early ACCESS State Coordinator
- AEA Directors of Special Education

5. Early ACCESS Task Teams; as needed

- ACHIEVE Professional Learning for Early ACCESS
- Child Development Professional Learning
- Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

#### Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 3 with IFSPs	3,070
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 3	110,115

#### FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
3,070	110,115	2.76%	2.77%	2.79%	Met target	No Slippage

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

Provide additional information about this indicator (optional).

#### 6 - Prior FFY Required Actions

None

#### 6 - OSEP Response

#### 6 - Required Actions

## Indicator 7: 45-Day Timeline

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

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

## 7 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	87.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	99.13%	99.18%	99.52%	99.11%	96.63%

#### Targets

FFY	2023	2024	2025
Target	100%	100%	100%

#### FFY 2023 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1,635	1,659	96.63%	100%	98.55%	Did not meet target	No Slippage

**Number of documented delays attributable to exceptional family circumstances**

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

0

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

The delay reasons for not meeting the 45-day timeline were attributed to staff scheduling difficulties, shortage of interpreters, staff illnesses and personnel shortages.

**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).**

Every Early ACCESS Grantee (9) is monitored every year.

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

Data for Indicator 7, 45-Day Timeline, were collected from the ACHIEVE system and reflect all referrals, initial evaluations, assessments and IFSP meetings between January 1, 2024 through June 30, 2024. The Department ensured the dataset for each Early ACCESS Grantee reflected the total number of infants and toddlers with Initial IFSPs for the full reporting year.

A confidence level of 95% +/-5% margin of error was used to establish each Early ACCESS Grantee's dataset based on the number and demographics of children with IFSPs for the reporting year. Additionally, the numbers of referrals, initial evaluations, assessments, IFSP meetings and child count for Early ACCESS are consistent throughout the year so the data accurately reflects infants and toddlers on IFSPs for the full reporting period.

**Provide additional information about this indicator (optional).****Correction of Findings of Noncompliance Identified in FFY 2022**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
61	61	0	0

**FFY 2022 Findings of Noncompliance Verified as Corrected****Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements.**

The ACHIEVE system is designed to calculate the number of calendar days from the date of the Early ACCESS IDEA Part C referrals to the date of initial IFSP meetings. Seven Early ACCESS Grantees did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance. The Early ACCESS Grantees were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The Early ACCESS Grantees were required to provide documentation of the implementation of a corrective action plan, conduct a root cause analysis and correct each case of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance received professional learning and technical assistance from the Early ACCESS State Team.

The seven Early ACCESS Grantees provided evidence of timely correction of noncompliance by conducting initial evaluations, assessments and Initial IFSP meetings within a 45-day timeline with 100% compliance within one year. The Department's Part C Coordinator verified timely corrections of noncompliance and implementation of IDEA Part C requirements for this indicator (C7). The Department also conducted additional data reviews of five initial IFSPs with dates subsequent to the completion of the corrective actions for each Early ACCESS Grantee. All seven Early ACCESS Grantees demonstrated implementation of the 45-day timeline requirement with 100% compliance.

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

During FFY 2022, 61 instances of noncompliance were identified for seven Early ACCESS Grantees (AEAs).

The seven Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance. The seven Early ACCESS Grantees provided evidence of timely correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program. Every finding of child-specific noncompliance was corrected as soon as possible; every Early ACCESS Grantee had corrected the child-specific noncompliance within 1 month of the notification of noncompliance.

The Department's Part C Coordinator verified timely corrections of child-specific noncompliance by reviewing the child files to ensure evaluations, assessments and initial IFSP Meetings were held and the reasons for delay were documented. A review of reports was conducted to confirm a child was no longer within the jurisdiction, if applicable.

**Correction of Findings of Noncompliance Identified Prior to FFY 2022**

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

## 7 - Prior FFY Required Actions

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

### Response to actions required in FFY 2022 SPP/APR

## 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, 2023- June 30, 2024). 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.



## Indicator 8A: Early Childhood Transition

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Effective Transition

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

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

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

## 8A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	87.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	98.40%	98.29%	98.61%	98.66%	90.86%

#### Targets

FFY	2023	2024	2025
Target	100%	100%	100%

#### FFY 2023 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
895	991	90.86%	100%	97.17%	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.

68

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

The reasons for delay attributed to family circumstances included family requests to delay planning, difficulty meeting with family due to family illness and missed appointments by family. Additionally, delay reasons were attributed to staff scheduling difficulties, staff illness, shortage of interpreters and lack of documentation.

#### 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).

January 1, 2024 through June 30, 2024

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

Data for Indicator 8A, Early Childhood Transition, were collected from the ACHIEVE system and reflect all children exiting Early ACCESS, IDEA Part C, at the age of three between January 1, 2024 through June 30, 2024. The Department ensured the dataset for each Early ACCESS Grantee reflected the total number of children with IFSPs exiting Early ACCESS for the full reporting year.

A confidence level of 95% and a +/-5% margin of error was used for each Early ACCESS Grantee to establish the number of children required in the dataset based on the population of children on IFSPs transitioning from Early ACCESS for the reporting year. Additionally, the number of children exiting Early ACCESS at the age of three is consistent throughout the year, so the data accurately reflects children on IFSPs transitioning for the full reporting period.

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

#### Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
185	185	0	0

#### FFY 2022 Findings of Noncompliance Verified as Corrected

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

Six Early ACCESS Grantees (AEAs) did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance. The Early ACCESS Grantees were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The Early ACCESS Grantee were required to provide documentation of the implementation of a corrective action plan, conduct a root cause analysis and correct each case of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance received professional learning and technical assistance from the Early ACCESS State Team.

The six Early ACCESS Grantees provided evidence of timely correction of noncompliance by conducting timely transition planning, at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday. Each of the transition plans had documented steps and services to support children and families in preparation of the transition from Early ACCESS services with 100% compliance within one year.

The Department's Part C Coordinator verified timely corrections of noncompliance and implementation of IDEA Part C requirements for this indicator (8A). The Department also collected a new dataset from the ACHIEVE system of child files from each of the six Early ACCESS Grantees to conduct additional data reviews. Each dataset included five IFSPs of children within the transition timeframe with dates subsequent to the completion of the

corrective actions for each Early ACCESS Grantee. All six Early ACCESS Grantees demonstrated implementation of timely transition planning which included steps and services for children and their families in preparation for the transition from Early ACCESS with 100% compliance.

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

During FFY 2022, 185 findings of child-specific noncompliance were identified across six Early ACCESS Grantees (AEAs) for Indicator 8A.

The six Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The six Early ACCESS Grantees provided evidence of correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program.

The Department's Part C Coordinator verified each Early ACCESS Grantee's corrections of child-specific noncompliance through record reviews and documentation by verifying transition steps and services occurred even though the 90-day timeline had not been previously met and reasons for the delay were documented. If children were no longer within the jurisdiction of the Early ACCESS program, a review of exit reports was conducted to confirm the children were no longer within the jurisdiction. A review of subsequent IFSPs for children transitioning from Early ACCESS for each of the Early ACCESS Grantees provided evidence of 100% compliance for timely transition planning including steps and services.

**Correction of Findings of Noncompliance Identified Prior to FFY 2022**

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

**8A - Prior FFY Required Actions**

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

**Response to actions required in FFY 2022 SPP/APR**

**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, 2023- June 30, 2024). 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

## Indicator 8B: Early Childhood Transition

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Effective Transition

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

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

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

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	96.00%

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

#### Targets

FFY	2023	2024	2025
Target	100%	100%	100%

#### FFY 2023 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1,649	1,649	100.00%	100%	100.00%	Met target	No Slippage

#### Number of parents who opted out

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

0

Provide reasons for delay, if applicable.

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

The ACHIEVE system is Iowa's early intervention and special education system, birth to 21 years of age, which generates data for Indicator 8B. The ACHIEVE system provides real-time and point-in-time data with established security level permissions to early intervention and special education staff. The assigned Department, Early ACCESS Grantees, Local Education Agencies and District personnel are provided real-time reports of every toddler exiting early intervention throughout the year who are determined to be potentially eligible for special education.

The ACHIEVE system generates an automatic notification to the Area Education Agency responsible for Special Education Child Find (IDEA Part B) when toddlers are determined to be potentially eligible for special education. Additionally, Iowa has a Birth-to-21 educational system such that the Early ACCESS Grantee is also the same AEA which conducts the Special Education Child Find process and special education services (IDEA Part B).

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

NO

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

State database

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

July 1, 2023 through June 30, 2024

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

The reported data were from every toddler who was determined to be potentially eligible for IDEA Part B special education from the full reporting period, July 1, 2023 through June 30, 2024.

Provide additional information about this indicator (optional).

#### Correction of Findings of Noncompliance Identified in FFY 2022

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

#### Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

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

#### 8B - Prior FFY Required Actions

None

#### 8B - OSEP Response

#### 8B - Required Actions

## Indicator 8C: Early Childhood Transition

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Effective Transition

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

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

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

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

## 8C - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	87.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	98.58%	98.43%	99.20%	99.12%	86.88%

#### Targets

FFY	2023	2024	2025
Target	100%	100%	100%

#### FFY 2023 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
774	1,020	86.88%	100%	96.15%	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.

215

Number of documented delays attributable to exceptional family circumstances

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

0

Provide reasons for delay, if applicable.

Delay reasons were attributed to staff scheduling conflicts, staff illnesses and incomplete and inadequate documentation.

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).

January 1, 2024 through June 30, 2024

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

Data for Indicator 8C were collected from the ACHIEVE system and reflect all children exiting early intervention services (IDEA Part C) who were determined as potentially eligible for special education services (IDEA Part B). The Department ensured the dataset for each Early ACCESS Grantee reflected the total number of children with IFSPs exiting Early ACCESS for the full reporting year.

A confidence level of 95% and a +/- 5% margin of error was used for each Early ACCESS Grantee to establish the number of children required in the review based on the population of children on IFSPs transitioning from Early ACCESS for the reporting year. Additionally, the number of children exiting Early ACCESS at the age of three is consistent throughout the year, so the data accurately reflects children on IFSPs transitioning for the full reporting period.

Provide additional information about this indicator (optional).

#### Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
201	201		0

#### FFY 2022 Findings of Noncompliance Verified as Corrected

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

Eight Early ACCESS Grantees did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance.



The eight Early ACCESS Grantees were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The eight Early ACCESS Grantees were required to provide documentation of the implementation of a corrective action plan, conduct a root cause analysis and correct each finding of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance received professional learning and technical assistance from the Early ACCESS State Team.

The Department's Part C Coordinator verified timely corrections of every finding of child-specific and systemic-level noncompliance and implementation of IDEA Part C requirements for indicator (8C) within one year. The eight Early ACCESS Grantees provided evidence of correction of every child-specific finding of noncompliance and completion of the corrective action plan. The documentation provided evidence of timely transition conferences/meetings with special education which were conducted at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday with 100% compliance.

The Department also collected a new dataset from the ACHIEVE system of child files from each of the eight Early ACCESS Grantees to conduct additional data reviews. Each dataset included five IFSPs of children potentially eligible for special education (IDEA Part B) within the transition timeframe with dates subsequent to the completion of the corrective actions for each Grantee. The Department determined, based on the review of subsequent data, each of the eight Early ACCESS Grantees demonstrated 100% compliance with the timely transition conferences/meetings for children transitioning from Early ACCESS to special education (IDEA Part C to B).

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

During FFY 2022, 201 findings of child-specific noncompliance were identified in eight Early ACCESS Grantees for Indicator 8C.

The eight Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The eight Early ACCESS Grantees provided evidence of timely correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program.

The Department's Part C Coordinator verified each Early ACCESS Grantee's corrections of every finding of child-specific noncompliance through record reviews and documentation by verifying timely transition conferences/meetings with special education (IDEA Part C to B) occurred even though the 90-day timeline had not been previously met and reasons for the delay were documented. If children were no longer within the jurisdiction of the Early ACCESS program, a review of exit reports was conducted to confirm the children were no longer within the jurisdiction.

**Correction of Findings of Noncompliance Identified Prior to FFY 2022**

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

**8C - Prior FFY Required Actions**

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

**Response to actions required in FFY 2022 SPP/APR**

**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, 2023- June 30, 2024). 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2023 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its EIS programs/providers to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation must include how the

State verified, prior to issuing a finding, that the EIS program/provider has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

## Indicator 9: Resolution Sessions

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

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

### 9 - Indicator Data

#### Not Applicable

**Select yes if this indicator is not applicable.**

YES

**Provide an explanation of why it is not applicable below.**

The State has adopted Part C due process hearing procedures under section 639 of IDEA.

### 9 - Prior FFY Required Actions

OSEP notes that this indicator is not applicable.

**Response to actions required in FFY 2022 SPP/APR**

### 9 - OSEP Response

### 9 - Required Actions

OSEP notes that this indicator is not applicable.

## Indicator 10: Mediation

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

## 10 - Indicator Data

### Select yes to use target ranges

Target Range not used

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

NO

#### Prepopulated Data

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

#### Targets: Description of Stakeholder Input

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually
  - Early ACCESS IDEA Part C Lead Agency (Department of Education)
  - Early ACCESS Service Providers
  - Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)

- Early Head Start / Head Start
- Medical / Health Care Providers
- Mental Health Providers
- Parent Training and Information Center
- Parents of Children with Disabilities
- Personnel Preparation / Institutes of Higher Education
- Private Health Insurance / Insurance Commission
- Special Education / IDEA Part B 619
- State Legislators

2. AEA Directors of Special Education for the nine Grantees; weekly and monthly meetings.

3. Early ACCESS Grantees Leadership Team; four meetings held annually

- AEA Director of Special Education
- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS State Coordinator
- Early ACCESS Grantees Liaisons and Leadership
- Signatory Agency Liaisons (Department of Health and Human Services and Child Health Specialty Clinics)
- Specialized Lead Consultants

4. Early ACCESS State Implementation Team; held every 2 months

- Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
- Department of Education Early ACCESS CSPD Consultant
- Department of Education Early ACCESS State Coordinator
- AEA Directors of Special Education

5. Early ACCESS Task Teams; as needed

- ACHIEVE Professional Learning for Early ACCESS
- Child Development Professional Learning
- Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

#### Historical Data

Baseline Year	Baseline Data
2005	

FFY	2018	2019	2020	2021	2022
Target>=					
Data					

#### Targets

FFY	2023	2024	2025
Target>=			

#### FFY 2023 SPP/APR Data

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

Provide additional information about this indicator (optional)

#### 10 - Prior FFY Required Actions

None

## **10 - OSEP Response**

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

## **10 - Required Actions**

## Indicator 11: State Systemic Improvement Plan

### Instructions and Measurement

**Monitoring Priority:** General Supervision

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

#### Measurement

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

#### Instructions

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

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

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

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

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

##### Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

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

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

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

##### Phase III: Implementation and Evaluation

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

##### A. Data Analysis

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

##### B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

#### C. Stakeholder Engagement

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

#### Additional Implementation Activities

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

## 11 - Indicator Data

### Section A: Data Analysis

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

Iowa's State-identified Measurable Result (SiMR) is an increase in the percentage of families reporting that Early ACCESS has helped them help their child develop and learn. The SiMR aligns with the Part C SPP/APR Indicator 4C - Family Involvement: Help their Children Develop and Learn.

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

NO

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

NO

#### 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://www.iafamilysupportnetwork.org/wp-content/uploads/2022/01/SSIP-Theory-of-Action-Early-ACCESS-FFY-2020.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
2014	83.25%

#### Targets

FFY	Current Relationship	2023	2024	2025
Target	Data must be greater than or equal to the target	85.25%	86.25%	87.25%

#### FFY 2023 SPP/APR Data

Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
769	781	97.69%	85.25%	98.46%	Met target	No Slippage

Provide the data source for the FFY 2023 data.



The SiMR data source is the Early ACCESS Family Engagement Survey responses for Early ACCESS IDEA Part C. The Early ACCESS Family Engagement Survey is also used for Iowa's Part C SPP/APR Indicator 4C - Family Involvement: Help their Children Develop and Learn.

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

The ACHIEVE system is configured to use specific criteria to automatically send the Early ACCESS Family Engagement Survey to every family in Early ACCESS via an email with a unique survey URL to access the survey. The Early ACCESS Family Engagement Survey is sent when the following events occur: 1) Annual Review of the Individualized Family Service Plan (IFSP); and 2) Exit from IDEA Part C early intervention services. The ACHIEVE system will not send a survey consecutively to the same family when these events happen fewer than 90 days from each other or a child exits within 30 days of the initial IFSP. All nine Early ACCESS Grantees are represented in the statewide distribution of the Early ACCESS Family Engagement Survey.

To determine representativeness of Early ACCESS Family Engagement Survey responses, the Department employs population parameter statistics for the total number of surveys returned, as well as analyzing demographic differences in response rates. The Department utilizes criteria with a 95% confidence level and +/-10% margin of error to consider whether the total number of Early ACCESS Family Engagement Survey responses are representative of the Early ACCESS population. Furthermore, the Department will employ a +/- 5% discrepancy compared to the population to ensure representativeness of different demographic groups, including and not limited to: race/ethnicity; gender; and geographic location.

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

YES

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

Early ACCESS Providers:

The Department collects data from each of the Early ACCESS Grantees to ensure the State Systemic Improvement Plan addressing implementation of FGRBI has been maintained and sustained. A random sample of 10% of Early ACCESS providers from each Grantee submitted up to 2 videos which were coded by a reliable FGRBI Coder. The Early ACCESS providers must reach 80% fidelity of FGRBI key indicators during the reporting year.

In FFY 2023, the average fidelity performance score for the Early ACCESS provider videos was 65% with a range of 25 to 96% (N = 29). This represented an increase of 6% points from the previous reporting year. This annual fidelity check provided the Department and Early ACCESS Grantees with an approximate application of providers' use of FGRBI key indicators. This data point has been used in consideration for continuous improvement activities, including professional learning, and recorded in the AEA Early ACCESS Reporting and Application.

Early ACCESS Services for Families and Children, Birth to Three:

The Early Intervention Parenting Self-Efficacy Scale (EIPSES) was used to measure parent efficacy within the context of early intervention services with Early ACCESS service coordinators and providers (scale 1 to 7). In FFY 2023, the EIPSES data indicated a high Parent/Caregiver Competence of 82% with an average rating range between 5 to 7 (Mean = 5.80; Median = 5.75). Additionally, the EIPSES data indicated a high level of Parent/Caregiver Outcome Expectations related to their confidence in supporting their child's growth and development during everyday routines and activities. Specifically, the Parent/Caregiver Outcome Expectations data indicated an average rating range between 5 to 7 (Mean = 5.27; Median = 5.20) or 64%. The EIPSES response rate was 33% (n = 56), which was lower than the previous reporting year.

Early ACCESS Grantees:

The Early ACCESS Grantee progress was measured through narrative and written reports by Early ACCESS Grantees. During FFY 2023, Early ACCESS implementation team reports were updated four times, discussed at Early ACCESS Grantee Leadership meetings and reviewed by the Early ACCESS State Team.

In previous years, the Early ACCESS Grantees had identified organizational barriers which included involving occupational and physical therapists, finding resources to support Early ACCESS Coaches and allocating time to engage in effective teaming practices. In FFY 2023, the Early ACCESS Grantees reported some of these same barriers, and added an increased focus on working with providers who were resistant to FGRBI while supporting them to use it with fidelity. In general, the Early ACCESS implementation teams focused on provider buy-in and consensus while also emphasizing fidelity of implementation.

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

YES

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

The Early ACCESS Family Engagement Survey data were analyzed by race/ethnicity; gender; and geographic location to determine the extent to which families who responded to the survey were representative of the demographics of infants and toddlers enrolled in Iowa's Early ACCESS Services. The Department determined the respondents of the Family Engagement Survey were not representative of the population of children receiving Early ACCESS services in 3 categories for race/ethnicity, 2 categories for gender, and 0 categories for geographic location.

Upon analysis of the race/ethnicity subgroups, the Department found the data were not representative in terms of the percent of respondents in each race/ethnicity category. Specifically, respondents of the survey were underrepresented for the race/ethnicity categories of Hispanic / Latino by 4.5 percentage points and Black or African American by 4.9 percentage points. Families who responded on behalf of children identified as White were overrepresented by 6.5 percentage points. The percent of survey respondents from American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander; and Two or More Races were representative within +/- 3% of the population of children in Early ACCESS.

The analysis of 2 categories of gender found the survey respondents were underrepresentative for females and overrepresentative for males by 3.9 percentage points for each, respectively, compared to the population percentage.

In reviewing representativeness for geographic location based on school district locale size, as defined by the U.S. Census bureau as a city, suburb, town or rural area, respondents were within +/- 3% of the population percentage.

**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://www.iafamilysupportnetwork.org/wp-content/uploads/2024/01/SSIP-Early-ACCESS-Evaluation-Plan-FFY-2024-updated.docx.pdf>

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

NO

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

Improvement Strategy 1: Instructional Practice Strategies

The instructional practices improvement strategies included the implementation of professional development to support Early ACCESS providers' use of FGRBI. These strategies included online modules to build knowledge and ongoing coaching by Early ACCESS AEA Coaches or Statewide Early ACCESS Coaches to strengthen and sustain fidelity of FGRBI implementation.

Improvement Strategy 2: Implementation Practice Strategies

The implementation practices improvement strategies focused on the use of active implementation frameworks to scale-up the use of evidence-based practices. Additionally, the Early ACCESS State Team has continued to focus on strengthening partnerships and using effective communication to establish and build upon sustainability efforts.

Improvement Strategy 3: High Quality Early Intervention System Strategies

The high quality early intervention system improvement strategies focused on using data to inform continuous improvement practices. The Early ACCESS State Team regularly met to intentionally utilize and apply data-based decision making for sustainability of Iowa's Early ACCESS Integrated System of Early Intervention Services.

**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.**

Improvement Strategy 1: Instructional Practice Strategies

Early ACCESS System of Professional Learning and Technical Assistance

In previous years, Early ACCESS providers had in-person professional learning which provided many limitations for engaging in coaching conversations and continuous learning. A component of the current professional learning for Early ACCESS providers has increased access to online FGRBI modules, supplemented with four 2-hour zoom/virtual meetings for all Early ACCESS providers and coaches. With an increase in the flexibility of professional learning, FGRBI online modules and virtual meetings, the implementation and sustainability of the delivery of evidence-based intervention strategies and FGRBI content has resulted in an increase in fidelity of implementation. The professional learning model has supported maintenance of Early ACCESS providers' knowledge, skills and understanding of family centered principles and evidence-based practices.

Early ACCESS System of Professional Learning and Technical Assistance

In previous years, Early ACCESS providers attended in-person professional learning which provided some limitations for engaging in coaching conversations and continuous learning. A component of the current professional learning for Early ACCESS providers has increased access to online FGRBI modules, supplemented with four 2-hour zoom/virtual meetings for all Early ACCESS providers and coaches. With an increase in the flexibility in the delivery of professional learning, FGRBI online modules and virtual meetings, the implementation and sustainability of the delivery of evidence-based intervention strategies and FGRBI content has resulted in an increase in fidelity of implementation. The professional learning model has supported maintenance of Early ACCESS providers' knowledge, skills and understanding of family centered principles and evidence-based practices.

In FFY 2023, the Early ACCESS AEA Coaches and Statewide Early ACCESS Coaches utilized a Coaching Manual and implemented a Coaching Fidelity Checklist to ensure coaching sessions met fidelity. The range of fidelity scores was 75-100% which showed coaches were following the checklist with fidelity as they coached their Early ACCESS providers. The goal of the coaching sessions was to support Early ACCESS providers in using FGRBI with families.

Ongoing professional learning and coaching support has maintained fidelity of implementation, scale-up and sustainability. Routine updates and maintenance of FGRBI online modules and use of Early ACCESS AEA Coaches and Statewide Early ACCESS Coaches have been utilized to support the Early ACCESS Integrated System of Early Intervention Services. The professional learning and coaching strategies have continued to directly impact the improvement of Iowa's Part C SiMR: Increase percentage of families reporting Early ACCESS has helped them help their child develop and learn.

Improvement Strategy 2: Implementation Practice Strategies

Early ACCESS Policies, Procedures and Practices (Governance, Quality Standards)

The Early ACCESS State Team has continued to foster partnerships with Early ACCESS Grantees to support infrastructure for early intervention service delivery. Reports from the Early ACCESS implementation teams indicated reflective routines in discussion and reporting have been an essential component, both at agency and state system levels. In addition, the established communication efforts and feedback loops have been effective in addressing successes and barriers, allowing for focused dialogue on system level sustainability topics. Moreover, intentional discussions with the AEA Directors of Special Education and Early ACCESS Grantee Leadership have increased leadership engagement and the development of action plans for sustainability.

Progress towards outcomes has been made through:

- Partnerships among multiple disciplines and professional development providers from the AEAs
- State and Grantee Implementation Teams
- Fidelity and sustainability planning
- Stakeholder meetings to support statewide implementation of evidence-based practices
- Communication and collaboration with DE Leadership, Signatory Agencies' Leadership, AEA Special Education Administrators and Early ACCESS Grantees
- Iowa Council for Early ACCESS advises and assists in the improvement of early intervention services

Improvement Strategy 3: High Quality Early Intervention System Strategies

Early ACCESS State Team (Signatory Agency Collaboration; Data System; Accountability; Continuous Improvement)

The Early ACCESS State Team meets once every 2 weeks to address Early ACCESS collaboration, data quality, collection, analysis and dissemination of data to make informed decisions. One of the team's purposes has been to effectively use data to positively impact outcomes for families and children served in Iowa. As a result of the meetings, the Early ACCESS State Team has increased the collection and analysis of Early ACCESS data to determine focus areas for professional development and technical assistance.

Progress towards outcomes has been made through:

- Public Relations and Marketing Task Team
- Iowa Council for Early ACCESS Continuous Improvement Committee
- Duties to Implement a System of General Supervision for IDEA Part C: Inform; Prevent; Detect; Inspect; Correct
- Development and implementation of professional development and coaching system
- Implementation of and support for Iowa's ACHIEVE system.

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

NO

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

Iowa's Early ACCESS Integrated System of Early Intervention Services has established a statewide commitment of collaboration, community partnerships, continuous improvement and implementation of evidence-based interventions, including FGRBI. The development and implementation of professional learning and coaching support has begun to integrate the use of FGRBI key indicators in the ACHIEVE system and evidence-based practices when completing child and family evaluations, initial and ongoing assessments, development of IFSPs, provision of early intervention and other services and transition planning. The ACHIEVE system has provided the flexibility to expand the implementation of evidence-based practices and data informed decision making into all aspects of the IDEA Part C requirements.

Additionally, a statewide sustainability plan for FGRBI was finalized with the input and agreement of all AEA Directors of Special Education, Department Leadership and Early ACCESS Grantee Leadership, which commenced in October 2023. With additional professional learning, continued sustainability efforts and integration of evidence-based practices into all aspects of the early intervention system, the Department anticipates positive outcomes and results for Early ACCESS providers, coaches, families and children involved with early intervention services.

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

- 1) Family Guided Routines Based Intervention (FGRBI); and,
- 2) Distance Mentoring Model (DMM) of Professional Development and Coaching

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

Family Guided Routines Based Intervention (FGRBI)

Early ACCESS providers support and enhance the family/caregivers' consistency and effectiveness to implement learning opportunities within natural environments using familiar family routines and everyday activities. Iowa's Early ACCESS statewide strategies focus on improving the competence and confidence of families/caregivers through embedded interventions in everyday routines and activities. Families/Caregivers have been implementing interventions and sharing the progress in their child's development and learning, during and between early intervention visits, which has reinforced their confidence and competence as well as increased the number of teaching opportunities. Children have multiple opportunities to practice as their families and caregivers provide the interventions throughout their routines and daily activities. The implementation of FGRBI key indicators has led to an increase in the percentage of families reporting Early ACCESS providers have enhanced their capacity and confidence to help their child develop and learn, which is the Part C SPP/APR Indicator 4C Family Involvement and Iowa's SiMR.

Distance Mentoring Model (DMM) of Professional Development and Coaching

To build toward full implementation of the FGRBI, the Department has had a partnership with Florida State University's Communication and Early Childhood Research and Practice (CEC-RAP) Center to use the Distance Mentoring Model (DMM) of professional development to scale up and sustain the Early ACCESS providers' use of FGRBI and Caregiver Coaching, a manualized intervention approach (Woods, 2017; <http://fgrbi.com/>). The professional development sequence used in DMM is aligned with best practices in professional development research. The DMM incorporates explanations of effective instruction paired with active engagement and practice in context over an extended time frame using a combination of distance learning technologies (Bransford et al., 2000; Dunst, Trivette, & Deal, 2011; Snyder, Hemmeter, & McLaughlin, 2011; Trivette et al., 2009).

**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.**

Professional development and coaching for Early ACCESS providers on FGRBI key indicators has continued to be supported and implemented in each of the nine Early ACCESS Grantees. The combination of strategies to promote positive outcomes and results for children and families receiving early intervention services have resulted in and will continue to impact positive change in numerous ways.

Early ACCESS providers have continued to engage in professional learning using the FGRBI online modules, improve their ability to implement FGRBI key indicators when coaching families and caregivers during early intervention visits, and engage in coaching conversations to maintain implementation fidelity of FGRBI key indicators.

A collaborative partnership led by CSPD Co-Leads, representing the Department and an Early ACCESS Grantee, and Statewide Early ACCESS Coaches provided monthly coaching network meetings and four 2-hour webinars for providers were provided to reinforce ongoing learning during the reporting period. The Early ACCESS providers newly hired or recently assigned to provide Early ACCESS services were invited to participate in monthly webinars regarding evidence based interventions and practices.

Community of Practice (CoP) Professional Development webinars for Early ACCESS service coordinators, providers and coaches supported job-alike learning and support throughout the reporting year. The CoP webinars were geared toward supporting the integration of the "family guided" aspect of FGRBI into the ACHIEVE system. Topics focused on child and family-directed assessments, routines based intervention strategies, monitoring progress on child and family outcomes and transition planning.

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

#### Early ACCESS AEA Coaches and Statewide Early ACCESS Coaching Sessions

As Early ACCESS AEA Coaches and Statewide Early ACCESS Coaches became independent in their coaching of Early ACCESS providers, it has been critical to ensure they are conducting coaching sessions according to the feedback session protocol. The fidelity measure has been used to ensure that all coaches are utilizing similar core coaching components which include joint planning, direct teaching of content, reflection, problem solving, active participation of team members and action planning.

#### FGRBI Key Indicator Checklist

To ensure Early ACCESS providers are implementing FGRBI with families with fidelity, recorded home visits are reviewed by the Early ACCESS provider and the Early ACCESS AEA Coaches or Statewide Early ACCESS Coaches using the 12-item FGRBI Key Indicator Checklist. The items on the checklist are weighted to calculate and generate data representing implementation fidelity used in the coaching cycle.

#### Early ACCESS Providers Fidelity of Implementation

The Department collects data from each of the Early ACCESS Grantees to ensure the State Systemic Improvement Plan addressing implementation of FGRBI has been maintained and sustained. A random sample of 10% of Early ACCESS providers from each Grantee submitted up to 2 videos which were coded by a reliable FGRBI Coder. The Early ACCESS providers must reach 80% fidelity of FGRBI key indicators during the reporting year.

#### **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.**

No additional data collected.

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

Iowa's Early ACCESS Integrated System of Early Intervention Services has established a statewide commitment of collaboration, community partnerships, continuous improvement and implementation of evidence-based interventions, including FGRBI. The development and implementation of professional learning and coaching support has begun to integrate the use of FGRBI key indicators in the ACHIEVE system and evidence-based practices when completing child and family evaluations, initial and ongoing assessments, development of IFSPs, provision of early intervention and other services and transition planning. The ACHIEVE system has provided the flexibility to expand the implementation of evidence-based practices and data informed decision making into all aspects of the IDEA Part C requirements.

Additionally, a statewide sustainability plan for FGRBI was finalized with the input and agreement of all AEA Directors of Special Education, Department Leadership and Early ACCESS Grantee Leadership, which commenced in October 2023. With additional professional learning, continued sustainability efforts and integration of evidence-based practices into all aspects of the early intervention system, the Department anticipates positive outcomes and results for Early ACCESS providers, coaches, families and children involved with early intervention services.

#### **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.**

The SSIP evaluation data have consistently shown improved results which supported the Department's decision to continue the current activities, strategies and improvement efforts. The results of each component of the evaluation have provided evidence of increased capacity of Early ACCESS to implement, scale and sustain evidence-based practices of coaching caregivers in FGRBI. The Department has remained committed to implementing a statewide system of early intervention in which families with infants and toddlers served in Early ACCESS receive individualized services in natural environments and demonstrate improved family and child outcomes.

### **Section C: Stakeholder Engagement**

#### **Description of Stakeholder Input**

The State Interagency Coordinating Council (SICC) or Iowa Council for Early ACCESS (ICEA), AEA Special Education Administrators, Early ACCESS Grantees Leadership Team, Early ACCESS State Implementation Team and Early ACCESS ad hoc task teams provide input on APR indicators, State Systemic Improvement Plan (SSIP) development and implementation, IDEA reporting requirements and Annual Determinations process, criteria and decisions. The Early ACCESS State Coordinator ensures the composition of the ICEA meets the Iowa Administrative Rules for Early ACCESS. Early ACCESS administrators include the AEA Directors of Special Education from each of Iowa's nine AEAs. The Early ACCESS Grantees Leadership Team represents approximately 30 members which include Early ACCESS Grantees liaisons and leadership, Early ACCESS State Coordinator, Signatory Agency liaisons, Bureau Chief of Early ACCESS and Early Childhood Education, Deaf Education Consultant, Iowa Educational Services for the Blind and Visually Impaired liaison and an AEA Director of Special Education.

A five-step process was used by the Early ACCESS State Team with the Iowa Council for Early ACCESS, interested parties, constituents and community collaborators to review and discuss data and provide input for the FFY 2023 APR:

1. The importance of input regarding the Early ACCESS system is reviewed. This included ensuring interested parties', constituents' and community collaborators' feedback were reported in the APR and used for improvement activities.
2. Interested parties and collaborators were provided baseline, target and trend data for SPP/APR compliance and performance indicators.
3. Constituents worked in small and large groups to analyze data and discuss findings.
4. A question-and-answer period was incorporated in the process to clarify data, address questions and concepts and provide input and recommendations.
5. Conclusions and comments regarding targets, progress or slippage of meeting targets, root causes and improvement activities were shared and agreed upon through a consensus building process.

Discussion notes, comments and analysis conclusions are documented and provided to the Department leadership and Early ACCESS State Team to include in the APR for each indicator where appropriate. Questions requiring additional data are collected for the APR. The Early ACCESS State Team is responsible for obtaining additional information and data for deeper analysis and discussion at subsequent meetings.

The leadership teams and community collaborators regularly engage in topics of IDEA Part C implementation and evaluation including an annual review of Iowa's IDEA Part C Annual Performance Report. The constituent groups have been involved in activities specific to the development of the FFY 2023 APR.

1. State Interagency Coordinating Council (Iowa Council for Early ACCESS); four meetings held annually
  - Early ACCESS IDEA Part C Lead Agency (Department of Education)
  - Early ACCESS Service Providers
  - Early ACCESS Signatory Agencies (Iowa Department of Health and Human Services and Child Health Specialty Clinics)
  - Early Head Start / Head Start
  - Medical / Health Care Providers
  - Mental Health Providers
  - Parent Training and Information Center
  - Parents of Children with Disabilities
  - Personnel Preparation / Institutes of Higher Education
  - Private Health Insurance / Insurance Commission
  - Special Education / IDEA Part B 619
  - State Legislators

2. AEA Directors of Special Education for the nine Grantees; weekly and monthly meetings.

3. Early ACCESS Grantees Leadership Team; four meetings held annually
  - AEA Director of Special Education
  - Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
  - Department of Education Early ACCESS State Coordinator
  - Early ACCESS Grantees Liaisons and Leadership
  - Signatory Agency Liaisons (Department of Health and Human Services and Child Health Specialty Clinics)
  - Specialized Lead Consultants

4. Early ACCESS State Implementation Team; held every 2 months
  - Department of Education Bureau Chief of Early ACCESS and Early Childhood Education
  - Department of Education Early ACCESS CSPD Consultant
  - Department of Education Early ACCESS State Coordinator
  - AEA Directors of Special Education

5. Early ACCESS Task Teams; as needed
  - ACHIEVE Professional Learning for Early ACCESS
  - Child Development Professional Learning
  - Institutes of Higher Education (Preservice) and Early ACCESS Preparation/Professional Learning (Inservice)

In addition to the review of APR data, interested parties, community collaborators, Early ACCESS Grantees and State Implementation Teams routinely review data related to the ongoing implementation and continuous improvement of the IDEA Part C State Systemic Improvement Plan (SSIP), or indicator C11. Data related to the SSIP includes: services provided; frequency and intensity of services; disaggregated early childhood outcomes data; and family outcome data. The various constituent groups provide input and decisions at scheduled meetings throughout the year as well as between meetings when a need for input is identified. The data are used to inform decisions about personnel development related to the use of evidence-based practices as well as addressing barriers for successful implementation.

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

The Department's efforts to engage interested parties, constituents and community collaborators focused on continuous improvement strategies and sustainability of quality professional learning and coaching. Activities included data collection, analysis and reflection of strengths, opportunities, areas of concern and barriers of implementation of evidence-based practices and analysis of infrastructure improvements. In addition, Early ACCESS Grantees' implementation teams met routinely to review implementation practices and data respective to their agencies. Several of the interested parties included families with children with disabilities and developmental delays.

Specific stakeholder engagement activities and strategies regarding the SSIP included:

- Discussion of FGRBI statewide implementation plan with Department Leadership and AEA Directors of Special Education
- Determine statewide design of professional learning and coaching strategies, which included Early ACCESS providers, Service Coordinators, Early ACCESS AEA Coaches, Statewide Early ACCESS Coaches and Early ACCESS Grantee Leadership.

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

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

Due to recent public perception of Iowa's AEA services and state legislation requiring the reorganization of AEAs, stakeholders shared concerns about the sustainability of the Early ACCESS Grantees' current infrastructure. The Department Leadership has established communication and planning with AEA Chiefs, AEA special education administrators and newly employed Department's Regional Special Education Directors to ensure a smooth transition in the restructuring of the AEA system.

**Additional Implementation Activities**

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

Not applicable.

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

Not applicable

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

Not applicable

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

Not applicable.

**11 - Prior FFY Required Actions**

None

**11 - OSEP Response**

**11 - Required Actions**

## Indicator 12: General Supervision

### Instructions and Measurement

**Monitoring Priority:** General Supervision

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

#### Data Source

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

#### Measurement

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

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

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

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

#### Instructions

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

Targets must be 100%.

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

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

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

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

## 12 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2023	100.00%

### Targets

FFY	2023	2024	2025
Target	100%	100%	100%

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

### Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
210	0	210	0	0

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

No differences reported.

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

The ACHIEVE system is designed to calculate the number of calendar days from the date of written parental Consent for Early ACCESS Services to the date of initial receipt of each early intervention service on the Initial IFSP and subsequent IFSPs. Seven Early ACCESS Grantees did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance.

The seven Early ACCESS Grantees were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The Grantees were required to document the implementation of a corrective action plan, conduct a root cause analysis and correct each case of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance completed a professional learning module and received technical assistance about providing and documenting timely delivery of early intervention services from the Early ACCESS State Team.

The Department's Part C Coordinator verified timely corrections of every finding of child-specific and systemic-level noncompliance and implementation of timely provision of early intervention services within 30 calendar days of parental consent at 100% for Indicator 1 within one year. The seven Early ACCESS Grantees provided evidence of correction of every child-specific finding of noncompliance and completion of the corrective action plan to ensure early intervention services were provided within 30 calendar days of the written parental Consent for Early ACCESS Services.

The Department collected a new dataset from the ACHIEVE system of child files from each of the seven Early ACCESS Grantees to conduct additional data reviews. Each dataset included five initial IFSPs and five subsequent IFSPs with new services with dates subsequent to the completion of the corrective actions. The Department determined, based on the review of subsequent data, each of the seven Early ACCESS Grantees demonstrated 100% compliance with the regulatory requirement to provide early intervention service(s) within 30 calendar days of the written parental Consent for Early ACCESS Services for every new service on an IFSP.

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

During FFY 2022, 210 findings of child-specific noncompliance were identified in seven Early ACCESS Grantees.

The seven Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance as soon as possible, and no later than one year after the notification of noncompliance. Every finding of child-specific noncompliance was corrected as soon as possible; every Early ACCESS Grantee had corrected the child-specific noncompliance within 2 months of the notification of noncompliance. The seven Early ACCESS Grantees provided evidence of correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program.

The Department's Part C Coordinator verified corrections of every child-specific noncompliance by reviewing each of the child files to ensure every early intervention service on the IFSP had been provided and reasons for delay were documented. A review of exit reports was conducted to confirm a child was no longer within the jurisdiction, if applicable.

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

**Findings of Noncompliance Identified in FFY 2022**

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
61	0	61	0	0

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

No differences reported.

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

The ACHIEVE system is designed to calculate the number of calendar days from the date of the Early ACCESS IDEA Part C referrals to the date of initial IFSP meetings. Seven Early ACCESS Grantees did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance. The Early ACCESS Grantees were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The Early ACCESS Grantees were required to provide documentation of the implementation of a corrective action plan, conduct a root cause analysis and correct each case of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance received professional learning and technical assistance from the Early ACCESS State Team.

The seven Early ACCESS Grantees provided evidence of timely correction of noncompliance by conducting initial evaluations, assessments and Initial IFSP meetings within a 45-day timeline with 100% compliance within one year. The Department's Part C Coordinator verified timely corrections of noncompliance and implementation of IDEA Part C requirements for this indicator (C7). The Department also conducted additional data reviews of five initial IFSPs with dates subsequent to the completion of the corrective actions for each Early ACCESS Grantee. All seven Early ACCESS Grantees demonstrated implementation of the 45-day timeline requirement with 100% compliance.



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

During FFY 2022, 61 instances of noncompliance were identified for seven Early ACCESS Grantees (AEAs).

The seven Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance. The seven Early ACCESS Grantees provided evidence of timely correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program. Every finding of child-specific noncompliance was corrected as soon as possible; every Early ACCESS Grantee had corrected the child-specific noncompliance within 1 month of the notification of noncompliance.

The Department's Part C Coordinator verified timely corrections of child-specific noncompliance by reviewing the child files to ensure evaluations, assessments and initial IFSP Meetings were held and the reasons for delay were documented. A review of reports was conducted to confirm a child was no longer within the jurisdiction, if applicable.

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

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

**Findings of Noncompliance Identified in FFY 2022**

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
185	0	185	0	0

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

No differences reported.

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

Six Early ACCESS Grantees (AEAs) did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance. The Early ACCESS Grantee were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The Early ACCESS Grantee were required to provide documentation of the implementation of a corrective action plan, conduct a root cause analysis and correct each case of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance received professional learning and technical assistance from the Early ACCESS State Team.

The six Early ACCESS Grantees provided evidence of timely correction of noncompliance by conducting timely transition planning, at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday. Each of the transition plans had documented steps and services to support children and families in preparation of the transition from Early ACCESS services with 100% compliance within one year.

The Department's Part C Coordinator verified timely corrections of noncompliance and implementation of IDEA Part C requirements for this indicator (8A). The Department also collected a new dataset from the ACHIEVE system of child files from each of the six Early ACCESS Grantees to conduct additional data reviews. Each dataset included five IFSPs of children within the transition timeframe with dates subsequent to the completion of the corrective actions for each Early ACCESS Grantee. All six Early ACCESS Grantees demonstrated implementation of timely transition planning which included steps and services for children and their families in preparation for the transition from Early ACCESS with 100% compliance.

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

During FFY 2022, 185 findings of child-specific noncompliance were identified across six Early ACCESS Grantees (AEAs) for Indicator 8A.

The six Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The six Early ACCESS Grantees provided evidence of correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program.

The Department's Part C Coordinator verified each Early ACCESS Grantee's corrections of child-specific noncompliance through record reviews and documentation by verifying transition steps and services occurred even though the 90-day timeline had not been previously met and reasons for the delay were documented. If children were no longer within the jurisdiction of the Early ACCESS program, a review of exit reports was conducted to confirm the children were no longer within the jurisdiction. A review of subsequent IFSPs for children transitioning from Early ACCESS for each of the Early ACCESS Grantees provided evidence of 100% compliance for timely transition planning including steps and services.

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

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

**Findings of Noncompliance Identified in FFY 2022**

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

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

No differences reported.

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

No findings of noncompliance were identified in FFY 2022 for Indicator 8B.

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

No findings of noncompliance were identified in FFY 2022 for Indicator 8B.

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

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

#### Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
201	0	201	0	0

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

No differences reported.

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

Eight Early ACCESS Grantees did not meet the 100% target in FFY 2022 and received a written notification of the findings of noncompliance.

The eight Early ACCESS Grantees were required to correct each finding of noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The eight Early ACCESS Grantees were required to provide documentation of the implementation of a corrective action plan, conduct a root cause analysis and correct each finding of noncompliance, unless a child was no longer within the jurisdiction of the Early ACCESS system. Each Early ACCESS Grantee with findings of noncompliance received professional learning and technical assistance from the Early ACCESS State Team.

The Department's Part C Coordinator verified timely corrections of every finding of child-specific and systemic-level noncompliance and implementation of IDEA Part C requirements for indicator (8C) within one year. The eight Early ACCESS Grantees provided evidence of correction of every child-specific finding of noncompliance and completion of the corrective action plan. The documentation provided evidence of timely transition conferences/meetings with special education which were conducted at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday with 100% compliance.

The Department also collected a new dataset from the ACHIEVE system of child files from each of the eight Early ACCESS Grantees to conduct additional data reviews. Each dataset included five IFSPs of children potentially eligible for special education (IDEA Part B) within the transition timeframe with dates subsequent to the completion of the corrective actions for each Grantee. The Department determined, based on the review of subsequent data, each of the eight Early ACCESS Grantees demonstrated 100% compliance with the timely transition conferences/meetings for children transitioning from Early ACCESS to special education (IDEA Part C to B).

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

During FFY 2022, 201 findings of child-specific noncompliance were identified in eight Early ACCESS Grantees for Indicator 8C.

The eight Early ACCESS Grantees were required to implement a corrective action plan, which included the correction of each finding of child-specific noncompliance as soon as possible, and no later than one year after the notification of noncompliance. The eight Early ACCESS Grantees provided evidence of timely correction of noncompliance of each finding of child-specific noncompliance, unless the child was no longer within the jurisdiction of the Early ACCESS program.

The Department's Part C Coordinator verified each Early ACCESS Grantee's corrections of every finding of child-specific noncompliance through record reviews and documentation by verifying timely transition conferences/meetings with special education (IDEA Part C to B) occurred even though the 90-day timeline had not been previously met and reasons for the delay were documented. If children were no longer within the jurisdiction of the Early ACCESS program, a review of exit reports was conducted to confirm the children were no longer within the jurisdiction.

**Optional for FFY 2023, 2024, and 2025:**

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

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

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

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

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

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

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
657	0	657	0	0

**FFY 2023 SPP/APR Data**

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified in FFY 2022	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
657	657		100%	100.00%	N/A	N/A

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

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

1. Number of findings of noncompliance the State identified during FFY 2022 (the period from July 1, 2022 through June 30, 2023).	657
2. Number of findings the State verified as timely corrected (corrected within one year from the date of written notification to the EIS program/provider of the finding)	657
3. Number of findings <u>not</u> verified as corrected within one year	0

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

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

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

## 12 - OSEP Response

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

## 12 - Required Actions

## Certification

### Instructions

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

#### Certify

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

#### Select the certifier's role

Designated by the Lead Agency Director to Certify

**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:

Kimberly Villotti

#### Title:

Bureau Chief

#### Email:

kimberly.villotti@iowa.gov

#### Phone:

5153395519

#### Submitted on:

04/21/25 8:28:03 AM

## Determination Enclosures

### RDA Matrix

# Iowa

## 2025 Part C Results-Driven Accountability Matrix

### Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
87.50%	Meets Requirements

### Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	8	6	75.00%
Compliance	16	16	100.00%

### 2025 Part C Results Matrix

#### I. Data Quality

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

Number of Children Reported in Indicator C3 (i.e., outcome data)	2,202
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	3,365
Percentage of Children Exiting who are Included in Outcome Data (%)	65.44
<b>Data Completeness Score</b> (please see Appendix A for a detailed description of this calculation)	2

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

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

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

<b>Data Comparison Score</b> (please see Appendix C for a detailed description of this calculation)	1
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##### (b) Performance Change Over Time: Comparing your State's FFY 2023 data to your State's FFY 2022 data

<b>Performance Change Score</b> (please see Appendix D for a detailed description of this calculation)	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 2023	51.54%	50.82%	55.28%	39.46%	57.63%	55.86%
FFY 2022	47.84%	56.67%	57.00%	45.72%	55.30%	61.26%

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

**2025 Part C Compliance Matrix**

Part C Compliance Indicator (2)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2022 (3)	Score
Indicator 1: Timely service provision	97.03%	YES	2
Indicator 7: 45-day timeline	98.55%	YES	2
Indicator 8A: Timely transition plan	97.17%	YES	2
Indicator 8B: Transition notification	100.00%	N/A	2
Indicator 8C: Timely transition conference	96.15%	YES	2
Indicator 12: General Supervision	100.00%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

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

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

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

## Appendix A

### I. (a) Data Completeness:

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

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

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



## Appendix B

### I. (b) Data Quality:

#### Anomalies in Your State's FFY 2023 Outcomes Data

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

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

<b>Outcome A</b>	<b>Positive Social Relationships</b>
<b>Outcome B</b>	<b>Knowledge and Skills</b>
<b>Outcome C</b>	<b>Actions to Meet Needs</b>

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

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

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

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

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

# Anomalies in Your State's Outcomes Data FFY 2023

Number of Infants and Toddlers with IFSP's Assessed in your State	2,202
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	4	720	359	411	708
Performance (%)	0.18%	32.70%	16.30%	18.66%	32.15%
Scores	1	1	1	1	1

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	3	849	481	572	297
Performance (%)	0.14%	38.56%	21.84%	25.98%	13.49%
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	4	629	339	522	708
Performance (%)	0.18%	28.56%	15.40%	23.71%	32.15%
Scores	1	1	1	1	1

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

Data Anomalies Score	2
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## Appendix C

### II. (a) Data Comparison:

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

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

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

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

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

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

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

#### Your State's Summary Statement Performance FFY 2023

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	51.54%	50.82%	55.28%	39.46%	57.63%	55.86%
Points	1	1	1	1	1	1

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

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

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

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

#### Test of Proportional Difference Calculation Overview

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

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

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

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

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

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

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

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

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

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

0 = statistically significant decrease from FFY 2022 to FFY 2023

1 = No statistically significant change

2 = statistically significant increase from FFY 2022 to FFY 2023

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

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

Summary Statement/ Child Outcome	FFY 2022 N	FFY 2022 Summary Statement (%)	FFY 2023 N	FFY 2023 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships	1,340	47.84%	1,494	51.54%	3.70	0.0188	1.9702	0.0488	YES	2
SS1/Outcome B: Knowledge and Skills	1,772	57.00%	1,905	55.28%	-1.72	0.0164	-1.0518	0.2929	NO	1
SS1/Outcome C: Actions to meet needs	1,396	55.30%	1,494	57.63%	2.33	0.0185	1.2625	0.2068	NO	1
SS2/Outcome A: Positive Social Relationships	2,091	56.67%	2,202	50.82%	-5.85	0.0152	-3.8522	0.0001	YES	0
SS2/Outcome B: Knowledge and Skills	2,091	45.72%	2,202	39.46%	-6.26	0.0151	-4.1504	<.0001	YES	0
SS2/Outcome C: Actions to meet needs	2,091	61.26%	2,202	55.86%	-5.40	0.0150	-3.5991	0.0003	YES	0

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

Iowa

FFY 2023 APR (1)

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

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	1	1
8C	1	1
9	N/A	0
10	1	1
11	1	1
12	1	1

### APR Score Calculation

<b>Subtotal</b>	13
<b>Timely Submission Points</b> - If the FFY 2023 APR was submitted on-time, place the number 5 in the cell on the right.	5
<b>Grand Total</b> - (Sum of Subtotal and Timely Submission Points) =	18

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

**618 Data (2)**

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

**618 Score Calculation**

Subtotal	9
Grand Total (Subtotal X 2.11111111) =	19.00

**Indicator Calculation**

A. APR Grand Total	18
B. 618 Grand Total	19.00
C. APR Grand Total (A) + 618 Grand Total (B) =	37.00
Total N/A Points in APR Data Table Subtracted from Denominator	1
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
<b>Denominator</b>	37.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

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

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



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

DATE: February 2025 Submission

### SPP/APR Data

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

### Part C 618 Data

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

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

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

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

## Dispute Resolution

### IDEA Part C

Iowa

Year 2023-24

#### Section A: Written, Signed Complaints

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

#### Section B: Mediation Requests

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

#### Section C: Due Process Complaints

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

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

Iowa

These data were extracted on the close date:

11/13/2024

## **How the Department Made Determinations**

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

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



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

### Final Determination Letter

June 18, 2025

Honorable McKenzie Snow  
Director  
Iowa Department of Education  
Grimes State Office Building, 400 East 14th Street  
Des Moines, IA 50319-0146

Dear Director Snow:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

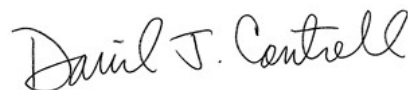
- (1) review EIS program performance against targets in Iowa's SPP/APR;
- (2) determine if each EIS program "meets the requirements" of Part C, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part C of the IDEA;
- (3) take appropriate enforcement action;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

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

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

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

Sincerely,



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David J. Cantrell  
Deputy Director  
Office of Special Education Programs

cc: State Part C Coordinator