

# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on  
FFY 2022

North Dakota



**PART C DUE**  
**February 1, 2024**

U.S. DEPARTMENT OF EDUCATION  
WASHINGTON, DC 20202

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

North Dakota is divided into eight regions. Each region has one DD Program Management (Service Coordinators) Unit through the Regional Human Service Center. For FFY 2022, four (4) of the regions had one (1) Infant Development program, one (1) region had two (2) Infant Development programs, and three (3) regions had three (3) Infant Development programs. For monitoring purposes, the regional program is defined as a regional DD Program Management Unit (Service Coordinators) and an Infant Development Program. There are 15 Infant Development programs for the purposes of reporting for FFY 2022.

In September 2022, the North Dakota Department of Human Services, the Lead Agency for Part C, merged with the North Dakota Department of Health. The new Lead Agency for Part C in North Dakota is the North Dakota Department of Health and Human Services (ND HHS).

There are no changes to staff or regulatory duties assigned to the staff. The Part C Coordinator remains within ND HHS and retains all previous duties regarding IDEA Part C.

North Dakota is working with OSEP to complete any required actions due to the Lead Agency name change.

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

#### 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).

Since FFY 2010, North Dakota (ND) has been engaged in improving General Supervision, and in doing so, has taken advantage of national technical assistance (TA) resources from a number of entities, as reported in past Annual Performance Reports. To assist with ongoing accountability, the ND Interagency Coordinating Council established a standing agenda item to review General Supervision activities on a quarterly basis. Over the past 12 federal fiscal years, ND State Office staff, along with data staff, have reviewed the queries used from North Dakota's electronic data system to assure that the reports are being generated consistently across the years and continue to meet the state's needs to determine state and regional program performance. This work has provided ongoing direction to the regional programs on more consistent data entry and application of Part C regulations.

A detailed description of North Dakota's General Supervision system can be found on the ND EI Website:  
<https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/PartC/nd-part-c-general-supervision.pdf>

In September 2022, the North Dakota Department of Human Services, the Lead Agency for Part C, merged with the North Dakota Department of Health. The new Lead Agency for Part C in North Dakota is the North Dakota Department of Health and Human Services (ND HHS).

There are no changes to staff or regulatory duties assigned to the staff. The Part C Coordinator remains within ND HHS and retains all previous duties regarding IDEA Part C.

North Dakota is working with OSEP to complete any required actions due to the Lead Agency name change.

#### Technical Assistance System:

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

Events labeled "TA Call" refer to nation-wide TA calls. TA that was specifically provided to North Dakota has been noted with the TA provider, for example: "OSEP On-Site."

The State received ongoing TA from CIFR, CADRE, ECTA and DaSy. The national TA the State received primarily supported us to review and improve our processes around data quality, which is ongoing. Meetings between the State Part C, State systems representatives, State Part C TA and our federal TA contacts continued throughout the year to work on data quality, which is an identified area within our SSIP.

The State worked intensively with our federal TA partners in the development of the APR and SSIP, including content, stakeholder involvement, data refinement, strategies and evaluation plan. Intensive work was completed on developing an overall framework for the SSIP, in preparation for DMS 2.0, and other state work. This included SSIP action strand improvement plans and evaluation plans development.

Below is specific information regarding instances of technical assistance provided to the state.

Date Event

July 5, 2022 Early Hearing Detection and Intervention (EHDI)/Part C Data Agreement Call

July 7, 2022 Differentiated Monitoring and Support (DMS) 2.0 Meeting

July 8, 2022 COVID-19 North Dakota (ND) Team Call

July 14, 2022 Part B and C Memorandum of Understanding (MOU) Call

July 19-22, 2022 Office of Special Education Programs (OSEP) Leadership Conference

July 22, 2022 OSEP Technical Assistance (TA) for ND

July 22, 2022 North Dakota Part C (ND-C) School Reopening COVID-19 Meeting

July 25, 2022 Part C Dispute Resolution Learning Community Call

July 27, 2022 Part B and C MOU Call

July 27, 2022 Individuals with Disabilities (IDEA) Infant and Toddler Coordinators Association (ITCA) Member Call

July 28, 2022 DMS 2.0 Meeting

August 1, 2022 Center for IDEA Early Childhood Data Systems (DaSy) Part C Data Manager Call

August 4, 2022 DMS 2.0 Meeting  
August 11, 2022 DMS 2.0 Meeting  
August 11, 2022 OSEP TA Call  
August 12, 2022 Early Childhood Technical Assistance (ECTA) TA for ND on Early Childhood Collaboration  
August 17, 2022 Part B and C MOU Call  
August 18, 2022 DMS 2.0 Meeting  
August 19, 2022 Center for IDEA Fiscal Reporting (CIFR) Central Region Community of Practice (CoP) Meeting  
August 21-25, 2022 Improving Data, Improving Outcomes (IDIO)/ITCA Conference  
August 22, 2022 Part C Dispute Resolution  
August 26, 2022 OSEP TA For ND

August 26, 2022 ND-C School Reopening COVID-19 Meeting  
August 30, 2022 EI Universal Strategies Training Professional Development (PD)  
September 6, 2022 DMS 2.0 Meeting  
September 7, 2022 APR Indicator 8 Review  
September 8, 2022 OSEP TA Call  
September 13, 2022 IDEA Advisory Meeting  
September 16, 2022 ND 325L Grant Meeting  
September 16, 2022 DMS 2.0  
September 22, 2022 OSEP Call  
September 23, 2022 ND-C School Reopening COVID-19 Meeting  
September 23, 2022 OSEP TA for ND  
September 27-30, 2022 Division for Early Childhood (DEC) Conference  
October 3, 2022 DaSy Part C Data Manager Call  
October 4, 2022 DMS 2.0  
October 5, 2022 ECTA TA for Part C and Early Childhood Division  
October 13, 2022 OSEP TA Call  
October 13, 2022 DMS 2.0  
October 14, 2022 ND-C Monthly Call DMS 2.0  
October 14, 2022 OSEP TA for ND  
October 18, 2022 ND-C Call  
October 20, 2022 DMS 2.0  
October 21, 2022 CIFR Central Region COP Meeting  
October 24, 2022 Part C Dispute Resolution Learning Community Call  
October 26, 2022 OSEP TA for ND  
October 27, 2022 OSEP TA Call  
October 27, 2022 325L Collaboration Meeting  
November 10, 2022 Hunt Child Care Workgroup  
November 15, 2022 OSEP TA for ND  
November 15, 2022 ND-C APR SSIP DMS 2.0 Meeting  
November 16, 2022 ITCA Member Call  
November 28, 2022 Part C Dispute Resolution Learning Community Call  
November 29 & 30, 2022 Therap Data System Onsite Visit  
December 5, 2022 Dasy Part C Data Managers Call  
December 8, 2022 OSEP Webinar  
December 13, 2022 IDEA Advisory Meeting  
December 14, 2022 ITCA Member Call  
December 14, 2022 OSEP Webinar  
December 15, 2022 OSEP TA for ND  
December 16, 2022 OSEP TA for ND  
December 16, 2022 CIFR Central Region CoP  
December 16, 2022 325L Grant Meeting  
December 16, 2022 ND-C APR SSIP DMS 2.0 Meeting  
December 16, 2022 CIFR Central Region COP Meeting

#### 2023 Dates

Date	Event
January 5, 2023	State Systemic Improvement Plan (SSIP) Workgroup
January 12, 2023	SSIP Workgroup
January 6, 2023	DMS 2.0 TA Call Cohort 1 and 2
January 6, 2023	DMS 2.0 Cohort 2 Call
January 9, 2023	DaSy Part C Data Managers Community Meeting
January 20, 2023	OSEP TA for ND
January 20, 2023	ND-C APR SSIP DMS 2.0 Meeting
January 25, 2023	ITCA Membership Meeting
January 26, 2023	OSEP Webinar
January 30, 2023	325L Collaboration Meeting
February 6, 2023	DaSy Part C Data Managers Group
February 9, 2023	OSEP TA Call
February 10, 2023	OSEP TA Call for ND
February 10, 2023	ND-C APR SSIP DMS 2.0 Meeting
February 18, 2023	CIFR Central Region COP
February 22, 2023	IDEA ITCA Meeting
February 23, 2023	OSEP TA Call
February 23, 2023	OSEP Webinar
March 2, 2023	OSEP Webinar
March 2, 2023	OSEP TA Call
March 17, 2023	325L Grant Meeting

March 23, 2023 OSEP Webinar  
 March 25, 2023 OSEP TA for ND  
 April 4, 2023 IDEA Advisory Meeting  
 April 13, 2023 OSEP TA Call  
 April 18, 2023 OSEP TA for ND  
 April 18, 2023 ND-C Clarification Meeting  
 April 21, 2023 CIFR Central Region COP Meeting  
 April 26, 2023 ITCA Membership meeting  
 April 28, 2023 Cross State DMS 2.0 Call  
 May 1, 2023 DaSy Part C Data Managers Call  
 May 5, 2023 OSEP TA for ND  
 June 5, 2023 DaSy Part C Data Mangers Call  
 June 8, 2023 DMS Dispute Resolution Meeting  
 June 8, 2023 OSEP Webinar  
 June 16, 2023 CIFR Central Region COP Meeting  
 June 22, 2023 Dispute Resolution DSM Prework Guidance Meeting  
 June 26, 2023 Preschool Development Grant Federal TA  
 June 28, 2023 ITCA Membership Meeting  
 June 28, 2023 ND Transition Call with ECTA  
 June 29, 2023 DMS Prework Guidance Meeting

**Professional Development System:**

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

A bulk of our professional development is provided via videoconferencing technology. We train on a variety of topics determined by the Part C Coordinator and as requested by the field. As our budget allows, we hold an in-person conference, which has a specific track for Early Intervention, and train on a variety of topics. Service Coordinators and Early Intervention Providers attend.

During monthly Statewide Early Intervention Meetings, professional development is provided through mini-PD sessions on stakeholder-identified topics. Mini professional development sessions were provided on the SSIP, as well as a series on the DEC Recommended Practices.

Below is specific information regarding instances of professional development provided to service providers.

Date	Event
July 1, 2022	North Dakota (ND) Team Meeting
July 8, 2022	ND Team Meeting
July 15, 2022	ND Team Meeting
July 18, 2022	Regional Action Plan (RAP) Meeting
July 19, 2022	Statewide Early Intervention (EI) Leadership Meeting
July 22, 2022	Professional Development (PD) Meeting
July 22, 2022	ND Team Meeting
July 25, 2022	Procedures Work Group Meeting
July 27, 2022	Technical Assistance (TA) To Region 7 Program
July 29, 2022	Resilience EI Leadership Meeting
July 29, 2022	REIL Competency Assessment Tool (CAT) Workgroup
August 2, 2022	Resilience in Early Intervention Leadership Certificate (RELC) Webinar
August 4, 2022	Data Drill Down Workgroup Meeting
August 5, 2022	ND Team Meeting
August 11, 2022	ND Team Meeting
August 16, 2022	Right Track and Early Hearing Detection and Intervention (EHDI) Q&A PD
August 18, 2022	Resilience in Early Intervention Leadership (REIL) Advisory Meeting
August 18, 2022	REIL Advisory Group Agenda
August 19, 2022	ND Team Meeting
August 29, 2022	Regional RAP Meeting
August 29, 2022	Early Childhood Division Collaboration
August 30, 2022	Regional RAP Meeting
August 30, 2022	EI Statewide Meeting Mini PD Universal Strategies
September 1, 2022	ND State Team Meeting
September 1, 2022	Right Track Coordinators' Quarterly Meeting
September 2, 2022	Part C to B Transition Training for EI and (Early Childhood Special Education) ECSE
September 6, 2022	RELC Webinar
September 8, 2022	REIL Grant Advisory Meeting
September 8, 2022	OSEP Call
September 9, 2022	PD Meeting
September 14, 2022	Transition Training Review
September 15, 2022	Data Drill Down Group Meeting
September 16, 2022	ND Team Meeting
September 20, 2022	DEC Presentation Planning
September 22, 2022	ND Interagency Coordinating Council (ICC) Meeting
September 23, 2022	ND Team Meeting
September 26, 2022	TA To Region 5 Program
September 27, 2022	Procedures Work Group Meeting
September 30, 2022	ND Team Meeting
October 3, 2022	TA to Region 3 Program
October 3, 2022	Regional RAP Meeting
October 4, 2022	RELC Webinar
October 4, 2022	Preschool Development Grant Collaboration

October 6, 2022 New Service Coordinator Training  
October 7, 2022 ND State Team Meeting  
October 10, 2022 Collaboration with Robin McWilliam on Routines Based Interview (RBI) Training  
October 11, 2022 Service Coordinator Training  
October 12, 2022 Annual Supplemental Security Income (SSI) Meeting with Department of Health  
October 14, 2022 ND State Team Meeting  
October 14, 2022 Preschool Development Grant Collaboration  
October 17, 2022 Regional RAP Meeting  
October 18, 2022 EI Statewide Leadership Meeting  
October 18, 2022 EI Division for Early Childhood (DEC) RP Mini PD Meeting  
October 21, 2022 ND State Team Meeting  
October 26, 2022 ND-2 Cohort 2  
October 27, 2022 ND EHDI Advisory Committee Meeting  
October 27, 2022 325L Collaboration Meeting  
October 28, 2022 ND Team Meeting  
October 31, 2022 Virtual Service Delivery Collaboration Call  
November 1, 2022 RELC Webinar  
November 8, 2022 Service Coordinator Training  
November 8, 2022 Regional RAP Meeting  
November 9, 2022 ND State Team Meeting  
November 14, 2022 Regional RAP Meeting  
November 15, 2022 Statewide EI Leadership Meeting  
November 15, 2022 Mini-PD DEC Recommended Practices  
November 17, 2022 REIL Advisory Group Meeting  
November 18, 2022 PD Group Meeting  
November 18, 2022 ND Team Meeting  
November 22, 2022 REIL Competency Work Group  
November 28, 2022 ND State Team Meeting  
November 30, 2022 Regional RAP Meeting  
December 1, 2022 EHDI Data Use Agreement Meeting  
December 5, 2022 ICC Membership Subcommittee Meeting  
December 8, 2022 ICC Meeting  
December 9, 2022 PD Workgroup Meeting  
December 9, 2022 ND State Team Meeting  
December 15, 2022 REIL Grant Advisory Meeting  
December 15, 2022 Virtual Services Call  
December 15, 2022 REIL Grant Advisory Group Meeting  
December 16, 2022 ND 325L TA Meeting  
December 19, 2022 ND State team Meeting  
December 19, 2022 Regional RAP Meeting  
December 22, 2022 Right Track Quarterly Meeting  
December 29, 2022- Data Drill Down Group Meeting

#### 2023 Dates

January 13, 2023 PD Workgroup  
January 17, 2023 EI Statewide Leadership Meeting  
January 17, 2023 Mini PD DEC RP Transition  
January 18, 2023 Regional RAP Meeting  
January 19, 2023 SSIP Workgroup  
January 20, 2023 ND State Team Meeting  
January 20, 2023 EI Conference Planning Meeting  
January 24, 2023 Regional RAP Meeting  
January 24, 2023 SSIP Workgroup  
January 25, 2023 EHDI and Part C Data Use Agreement  
January 26, 2023 OSEP Webinar  
January 25, 2023 State Team Meeting  
January 31, 2023 SSIP/Annual Performance Report (APR) Workgroup Meeting  
February 2, 2023 ND CEC Presentation  
February 9, 2023 ND State Team Meeting  
February 9, 2023 ICC Meeting  
February 10, 2023 PD Workgroup Meeting  
February 16, 2023 REIL Advisory Meeting  
February 16, 2023 State Team Meeting  
February 21, 2023 REIL Grant APR Meeting  
February 23, 2023 ND State Team Meeting  
February 24, 2023 Regional RAP Meeting  
March 2, 2023 ND State Team Meeting  
March 7, 2023 Regional RAP Meeting  
March 7, 2023 EI Conference Planning Meeting  
March 9, 2023 ND State Meeting  
March 16, 2023 ND State Meeting  
March 16, 2023 REIL Grant Advisory Meeting  
March 21, 2023 EI State Leadership Meeting  
March 21, 2023 DEC RP Assessment Mini PD  
March 21, 2023 EI Conference Planning Meeting  
March 23, 2023 ND State Team Meeting  
March 24, 2023 Regional RAP Meeting  
March 28, 2023 EI Conference Planning Meeting

March 29, 2023 EHDl and Part C Data Use Agreement Meeting  
 March 30, 2023 ND State Team Meeting  
 April 3, 2023 EI Conference Planning Meeting  
 April 4, 2023 Regional RAP 1  
 April 4, 2023 Regional RAP 2  
 April 6, 2023 ND State Team Meeting  
 April 12, 2023 New Service Coordinator Training  
 April 13, 2023 ICC Meeting  
 April 14, 2023 PD Meeting  
 April 20, 2023 ND State Team Meeting  
 April 20, 2023 EHDl Advisory Board Meeting  
 April 26, 2023 Region 3 Program TA  
 April 27, 2023 ND State Team Meeting  
 May 4, 2023 ND State Team Meeting  
 May 9, 2023 Early Childhood All Staff Meeting Collaboration  
 May 10, 2023 EI Conference Planning Meeting  
 May 11, 2023 Region 5 Program TA  
 May 12, 2023 PD Workgroup Meeting  
 May 12, 2023 ND State Team Meeting  
 May 16, 2023 Prior Written Notice Training  
 May 16, 2023 EI Statewide Leadership Meeting  
 May 17, 2023 Pyramid Model State Leadership Meeting  
 May 26, 2023 Regional RAP Meeting  
 May 30, 2023 ND State Team Meeting  
 May 30, 2023 ND Part C to B Transition Meeting  
 May 31, 2023 EI Conference Planning Meeting  
 June 1, 2023 ND State Team Meeting  
 June 2, 2023 REIL Team Meeting  
 June 6, 2023 ND State Team Meeting  
 June 6, 2023 Regional RAP Meeting  
 June 8, 2023 ICC Meeting  
 June 8, 2023 OSEP Webinar  
 June 9, 2023 PD Workgroup Meeting  
 June 13, 2023 EI Conference Planning Meeting  
 June 13, 2023 Regional RAP Meeting  
 June 14, 2023 ND Early Head Start Conference Presentation  
 June 15, 2023 ND State Team Meeting  
 June 15, 2023 REIL Grant Advisory Meeting  
 June 20, 2023 Prior Written Notice Training  
 June 22, 2023 ND State team Meeting  
 June 29, 2023 ND State Team Meeting  
 June 29, 2023 Right Track Coordinators Quarterly Call

**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.**

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

**SSIP ACTIVITIES:**

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.  
Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.  
In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

Grant Stakeholder groups:

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

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

YES

**Number of Parent Members:**

13

**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.**

Parent Panel: The Parent Panel was made up of five (5) parents from across the state who showed interest in reviewing the APR Targets and providing feedback to ND HHS. The Part C Coordinator spoke with each parent to determine the best time to meet, including offering evening and weekend times. The Parent Panel was able to meet with four (4) members on December 2, 2021 and one (1) member on January 13, 2022. The Part C Coordinator shared materials prior to the meetings that explained the APR targets, the purpose of the target setting activities, and the proposed targets. During the meeting, the Part C Coordinator encouraged members to speak up if they had questions or needed clarification. Many members did, and a great discussion was had about all indicators, but particularly the child and family outcomes (Indicators 3 and 4). The group suggested that ND HHS adopt the preliminary targets.

Data Drill Down stakeholder work group: The Data Drill Down stakeholder work group met six times during September and October 2021 to review, analyze and set preliminary targets for Indicators 2,3,4,5 and 6. This group is made up of a diverse group of stakeholders, including service coordinators, Infant Development coordinators, and Primary Early Intervention Providers. Some of the members on this group are also parents of children in Early Intervention. The Data Drill Down group considered trend performance and target data for the past seven (7) years of APRs, average performance and change over the last five (5) years, and other contributing factors, including COVID-19, when setting targets.

ND ICC: The ND ICC met on September 14, 2021 to review the preliminary targets set by the Data Drill Down work group. The ND ICC reviewed the preliminary targets, as well as trend performance and target data for the last five (5) years of APRs. The group discussed potential changes to the targets, and suggested to ND HS to adopt the targets as suggested by the Data Drill Down work group. On December 8, 2022, the ND ICC met and reviewed FFY 2021 APR Data, including the targets, and voted to adopt the data as their report to the Governor. Annually, the ND ICC reviews APR data and discusses concerns and process improvement. A change was made in FFY 2020 to improve the quality of data display to ensure that all members, and specifically parent members who are not engaged in regular Part C data review, were able to understand the data and contribute to the process.

Caregiver Survey: In addition, the state engages families and caregivers through a survey process to learn about their experiences and create future strategies. In FFY 2021, the response rate grew to over 140 caregiver responses, indicating an overwhelming increase in parent and caregiver participation.

**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 ND ICC identified a need to engage parents regularly prior to ND ICC meetings to ensure that parents understand all agenda items and to provide guidance around agenda items so that parents feel confident to engage in meaningful dialogue during the ND ICC meetings. The group created a Membership subcommittee to create mentorship opportunities for new parent members, as well as creating trainings for new members around common topics during meetings (i.e. APR Data, SSIP, Part C Budget, etc.). This group has developed a welcome kit for members, set up a mentorship program, and has begun to develop a library of family stories to be shared at ICC meetings. The group continues to meet to develop ways to support parent members of the ICC. In FFY 2022, the ND ICC also identified a need to investigate parent compensation to ensure that all parents are able to fully participate in the ND ICC meetings.

The Resilient Early Intervention Leadership Grant initiative builds a tiered, sustainable system of leadership opportunities to increase the capacity of leaders across the state, region, and local early childhood system. The ND EI leadership program, Resilient Early Intervention Leaders (REIL), supports 100 cross-agency leaders, including parents and tribal entities, in a multiyear learning collaborative and 36 interdisciplinary professionals in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

In FFY 2022, a series of short videos on the Early Intervention process was developed in conjunction with the ND Parent Training and Information Center, Pathfinder Services of North Dakota, to explain the process of Early Intervention in North Dakota.

**Soliciting Public Input:**

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

Public input, specifically engaging caregivers within the system, is sought throughout the year in several ways.

The Data Drill Down group is asked to invite additional participants to attend meetings, and specifically to pass information of meetings along to parents who may be interested in attending.

The ND ICC Meetings are public, and public notice of meetings including agenda topics, is made prior to meeting dates. This notice is posted on the

nd.gov website and shared with a newspaper in each region of ND. As with the Data Drill Down group, the ND ICC is encouraged to invite additional participants to attend meetings.

The SSP/APR as well as local program reports and levels of determination are posted to the ND EI Website annually.

The Resilient Early Intervention Leadership Grant (REIL Grant) has two stakeholder advisory groups that meet regularly to provide feedback on building a sustainable system of leadership opportunities to increase capacity across the early childhood system in North Dakota. Public notice of meetings and agenda topics is made prior to meeting dates, and is posted on the nd.gov website.

#### **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.**

The results of the target setting activities and the SSIP improvement strategies were shared with the public at the ND ICC Meeting on 12/16/21 and through the minutes of the ICC meeting, available on the ND EI Website. Additionally, the PowerPoint presentation used to discuss the FFY 2020-2025 targets is posted to the ND EI Website.

The SPP/APR, SSIP, and local program reports and levels of determination are posted to the ND EI Website annually. These documents can be found at: <https://www.hhs.nd.gov/early-childhood-services/early-intervention/federal-reporting>

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

**How and where the State reported to the public on the FFY 2021 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 2021 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 2021 APR in 2023, is available.**

All required public information is contained on the ND Early Intervention website at: <https://www.hhs.nd.gov/early-childhood-services/early-intervention/federal-reporting>

In addition to the posting on the website, this information is shared with the ND Interagency Coordinating Council, at the meeting following the receipt of the ND Part C Level of Determination. The local program Levels of Determination are shared with the ND Interagency Coordinating Council at the meeting that takes place once the local programs have received their determinations and have had the time and opportunity to share any concerns with the Part C Coordinator.

The ND Part C Level of Determination is shared with the Service Coordinators & Early Intervention providers during a video conferencing session, after receipt of the State's level of determination. After the providers have received their individual determinations and have had the time and opportunity to express concerns with the Part C Coordinator, the local program Levels of Determination are shared with Service Coordinators & Early Intervention providers during a video conference session.

#### **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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	59.26%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	96.70%	98.24%	98.41%	98.65%	96.80%

### Targets

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

### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,268	1,505	96.80%	100%	96.81%	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.*

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

For FFY 2022, North Dakota had 48 instances of delayed services due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, 41 instances of delayed services were due to agency oversight, one (1) was due to agency illness, and six (6) were due to agency shortage.

**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).**

For North Dakota, timely initiation of service is defined as the service happening on or before the date agreed upon at the IFSP meeting and documented in the "services" section of the IFSP.

**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, 2022 -June 30, 2023

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

Data for Indicator 1 is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting in Indicator 1, using Therap, for FFY 2022.

In FFY 2022 North Dakota had 15 early intervention providers across the state. The performance of all 15 of these providers is represented in this data.

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

For FFY 2022, North Dakota had 48 instances of delayed services due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, 41 instances of delayed services were due to agency oversight, one (1) was due to agency illness, and six (6) were due to agency shortage. For 36 of the 48 instances of delayed services, the services were provided, although late. For the remaining 12 instances of delayed services, the child is no longer in the jurisdiction of the North Dakota Early Intervention Program.

In FFY 2021, North Dakota identified three (3) providers in the state who had a large amount of delayed services due to agency reasons. These three (3) providers account for 32 of the 48 instances, or 66.67%, of delayed services. These programs had a large amount of staff turnover in FFY 2022, resulting in an increased amount of delayed service for the providers. The three (3) providers will participate in a Regional Action Plan (RAP) process with the state Technical Assistance provider which will help to identify and remedy systemic issues around timely services.

The remaining 16 instances of delayed services were attributable to an additional five (5) providers.

Indicator 1 FFY 2022 noncompliance was discovered through the APR data review process and was verified on November 27, 2023. On January 23, 2024, a Letter of Findings was issued to all eight (8) providers who had at least one instance of delayed services due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance. Seven (7) programs had 100% compliance with Indicator 1 in FFY 2022.

**Correction of Findings of Noncompliance Identified in FFY 2021**

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

**FFY 2021 Findings of Noncompliance Verified as Corrected**

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

For FFY 2021, North Dakota issued a Letter of Findings to nine (9) providers due to having at least one instance of delay due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to nine (9) providers. Correction was verified according to Federal requirements. All nine (9) findings were verified as corrected on July 10, 2023. Of the nine (9) providers, all nine (9) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans.

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

For FFY 2021, North Dakota issued a Letter of Findings to nine (9) providers due to having at least one instance of delay due to an agency reason.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in 46 of the 46 individual instances, the child received their service, although late. Individual instances of noncompliance were verified as corrected for all programs on June 21, 2023. Correction was verified according to Federal requirements. All nine (9) findings were verified as corrected on July 10, 2023.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2021 SPP/APR**

For FFY 2021, North Dakota issued a Letter of Findings to nine (9) providers due to having at least one instance of delay due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to nine (9) providers. Correction was verified according to Federal requirements. All nine (9) findings were verified as corrected on July 10, 2023. Of the nine (9) providers, all nine (9) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in 46 of the 46 individual instances, the child received their service, although late. Individual instances of noncompliance were verified as corrected for all programs on June 21, 2023. Correction was verified according to Federal requirements. All nine (9) findings were verified as corrected on July 10, 2023.

**1 - OSEP Response**

**1 - 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.

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	98.26%

FFY	2017	2018	2019	2020	2021
Target >=	99.30%	99.70%	99.80%	99.82%	99.82%
Data	100.00%	99.93%	100.00%	100.00%	99.88%

### Targets

FFY	2022	2023	2024	2025
Target >=	99.84%	99.86%	99.88%	99.90%

### Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

### SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.  
 Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.  
 Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.  
 In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

Grant Stakeholder groups:

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

**Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,702
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Total number of infants and toddlers with IFSPs	1,704

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,702	1,704	99.88%	99.84%	99.88%	Met target	No Slippage

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

For FFY 2022, the total number of infants and toddlers with an IFSP increased to 1704 as compared to 1616 in FFY 2021. There were 88 more infants and toddlers with IFSPs in the child count this year as compared to FFY 2021.

For FFY 2022, two (2) infants or toddlers received the majority of their early intervention services outside of a home or community-based setting, which is the same as in FFY 2021.

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

**2 - Required Actions**

## Indicator 3: Early Childhood Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

##### Measurement for Summary Statement 1:

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

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

##### Measurement for Summary Statement 2:

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

#### Instructions

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

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

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

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

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

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

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

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

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

#### SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.

Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.

In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership

Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

#### Grant Stakeholder groups:

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

#### Historical Data

Outcome	Baseline	FFY	2017	2018	2019	2020	2021
A1	2008	Target>=	39.10%	39.20%	60.50%	70.00%	70.00%
A1	33.30%	Data	72.14%	71.96%	82.80%	86.91%	83.06%
A2	2008	Target>=	45.10%	60.40%	60.50%	61.50%	61.50%
A2	60.30%	Data	37.50%	67.27%	69.40%	75.60%	69.36%
B1	2008	Target>=	61.50%	62.50%	62.60%	62.70%	62.70%
B1	47.50%	Data	67.09%	64.11%	62.85%	72.81%	66.57%
B2	2008	Target>=	46.60%	52.10%	52.20%	55.80%	55.80%
B2	52.00%	Data	33.23%	51.80%	55.80%	62.65%	59.62%
C1	2008	Target>=	67.80%	68.80%	68.90%	69.50%	69.50%
C1	64.80%	Data	77.95%	69.54%	72.89%	82.51%	80.68%
C2	2008	Target>=	68.30%	81.00%	81.10%	81.10%	81.10%



<b>C2</b>	80.90%	Data	55.49%	73.38%	76.66%	80.51%	76.79%
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**Targets**

<b>FFY</b>	<b>2022</b>	<b>2023</b>	<b>2024</b>	<b>2025</b>
Target A1>=	71.00%	72.00%	73.00%	74.00%
Target A2>=	62.50%	63.50%	64.50%	65.50%
Target B1>=	63.20%	63.70%	64.20%	64.70%
Target B2>=	56.30%	56.80%	57.30%	57.80%
Target C1>=	70.00%	70.50%	71.00%	71.50%
Target C2>=	81.20%	81.30%	81.40%	81.50%

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

<b>Outcome A Progress Category</b>	<b>Number of children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	7	0.93%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	94	12.47%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	123	16.31%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	433	57.43%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	97	12.86%

<b>Outcome A</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2021 Data</b>	<b>FFY 2022 Target</b>	<b>FFY 2022 Data</b>	<b>Status</b>	<b>Slippage</b>
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	556	657	83.06%	71.00%	84.63%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	530	754	69.36%	62.50%	70.29%	Met target	No Slippage

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

<b>Outcome B Progress Category</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	4	0.53%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	208	27.59%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	81	10.74%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	403	53.45%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	58	7.69%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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	484	696	66.57%	63.20%	69.54%	Met target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	461	754	59.62%	56.30%	61.14%	Met target	No Slippage

**Outcome C: Use of appropriate behaviors to meet their needs**

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	3	0.40%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	108	14.32%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	50	6.63%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	386	51.19%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	207	27.45%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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	436	547	80.68%	70.00%	79.71%	Met target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	593	754	76.79%	81.20%	78.65%	Did not meet target	No Slippage

**FFY 2022 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	1,367
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.	225
Number of infants and toddlers with IFSPs assessed	754

Sampling Question	Yes / No
Was sampling used?	NO

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

NO

Provide the criteria for defining "comparable to same-aged peers."

North Dakota replaced the child outcomes assessment tool in the fall of 2017, with the Assessment, Evaluation, and Programming System (AEPS) after significant planning for several years to replace the Oregon Early Childhood Assessment Tool (Oregon). The Oregon Tool is no longer being utilized and supported by its creators, therefore, had limited criteria for defining "comparable to same-aged peers," no continued support for calculating cut-offs, and no formalized training available. North Dakota began using the AEPS and entering data in the AEPSi data system on 10.2.17.

North Dakota's new child outcomes tool, the AEPS (Bricker, 2002), is a curriculum-based assessment. To meet the Office of Special Education Programs (OSEP) Child Outcome reporting requirements, specific AEPS Test items were aligned to the three OSEP Child Outcomes. Further empirically derived same-age peer benchmarks were generated to address Near Entry (originally called Time 1) and Near Exit (originally called Time 2) OSEP Reporting Categories. The AEPS Test same-age peer benchmarks were constructed using a national non-random sample of children identified as typically developing with the chronological ages of birth to 5 years inclusive (i.e. 0-72 months). The sample consisted of 571 children on whom the Birth to Three Level of the AEPS Test was completed and 1307 children on whom the Three to Six Level of the AEPS Test was completed.

This is North Dakota's fifth APR year of reporting the AEPS data for this indicator, and the second year a full cohort of children on the AEPS is being reported.

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

North Dakota began using the AEPS as an evaluation/assessment tool and entering data into the AEPSi data system on 10.2.17. Staff received training in June 2017 and were able to pilot the system for the months of July-September 2017. Procedures for using the new tool for Indicator 3 were written in October 2017 and updated on 10.2.18. Staff enter entry/exit data into the publisher's online system (AEPSi) online tool. Entry of data occurs by staff online. Initial child outcome assessment is completed and entered into the data system by early intervention providers or the Service Coordinator (DDPM) prior to eligibility, and exit data is entered for children who have been receiving services for at least 6 months. Exit data must be entered within 30 days of the child's third birthday, and if the exit date is unexpected, the exit data must be entered within 30 days of the exit. The Service Coordinator (DDPM) is responsible to ensure completion of the tool by local early intervention providers. Any child referred on or after 10.2.17 has their entry and exit using the AEPS.

This is North Dakota's fifth APR year of reporting the AEPS data for this indicator, and the second year a full cohort of children on the AEPS is being reported.

In FFY 2022, there was an increase in performance in five of the six summary statements, with Indicator 3C1 showing a slight decrease. After analysis of the data and through discussion with EIS providers, it appears that this is due to stabilization of the AEPS data with a full cohort.

In FFY 2021, 125 individuals completed an Interrater Reliability training course for the AEPS. This course ensured that all providers were administering the AEPS consistently within their program and across the state. It is believed that this training has helped to stabilize and increase validity and reliability in the data.

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

To support fidelity when using the AEPS, interrater reliability training was offered to all programs across the state during FFY 2020 and was completed during FFY 2021.

**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.

**Beginning with the FFY 2022 SPP/APR, due February 1, 2024**, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race/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	2017	2018	2019	2020	2021
A	2006	Target>=	87.80%	88.20%	90.00%	97.50%	97.50%
A	88.12%	Data	98.08%	98.45%	97.12%	98.11%	98.63%
B	2006	Target>=	93.40%	94.00%	94.10%	98.00%	98.00%
B	88.46%	Data	98.63%	99.07%	99.33%	99.05%	98.93%
C	2006	Target>=	92.00%	92.60%	92.70%	97.50%	97.50%
C	85.79%	Data	98.36%	98.76%	97.78%	99.05%	98.33%

## Targets

FFY	2022	2023	2024	2025
Target A>=	97.70%	97.90%	98.10%	98.30%
Target B>=	98.30%	98.60%	98.90%	99.20%
Target C>=	97.70%	97.90%	98.10%	98.30%

### Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

### SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.

Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.

In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

### Grant Stakeholder groups:

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

### FFY 2022 SPP/APR Data

The number of families to whom surveys were distributed	1,734
Number of respondent families participating in Part C	398
Survey Response Rate	22.95%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	389
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	398
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	389

B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	398
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	388
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	398

Measure	FFY 2021 Data	FFY 2022 Target	FFY 2022 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)	98.63%	97.70%	97.74%	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)	98.93%	98.30%	97.74%	Did not meet target	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)	98.33%	97.70%	97.49%	Did not meet target	No Slippage

**Provide reasons for part B slippage, if applicable**

In FFY 2022, through conversation and data analysis, the state decided to discontinue the tracking form that was required to be completed by the Primary Early Intervention Provider (PEIP). After a thorough analysis of the response rate and data, it was determined that the tracking form that was previously required to be completed provided accountability for follow-up on completion of the survey by families. Without the tracking form, the PEIPs were not following up with families to determine if they had completed and returned their surveys. This directly contributed to the low response rate and decrease in performance for Indicators 4b and 4c.

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	2021	2022
Survey Response Rate	42.01%	22.95%

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

North Dakota analyzed response rates of each racial or geographic demographic against the percent of children of that racial or geographic demographic enrolled in the Part C program, as of November 1, 2023, 618 Table 1 Point-In-Time data. Representativeness is considered +/-3% when compared to the percent of children of that racial or geographic demographic enrolled in the Part C program.

**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.**

In FFY 2022, as in prior years, North Dakota has analyzed the family outcomes data to determine representativeness based race/ethnicity. The following is the return rate for each race/ethnicity as compared to children in the program as of 11/1/23 (618 Table 1 PIT data):

American Indian/AK Native: Returned 6.28% In Program 7.13% Representative 4.13-10.13%  
 Asian: Returned 0.75% In Program 1.05% Representative 0-4.05%  
 Black/African American: Returned 4.02% In Program 5.86% Representative 2.86-8.86%  
 Hispanic or Latino: Returned 7.54% In Program 2.82% Representative 0-5.82%  
 Native Hawaiian or Pacific Islander: Returned 0.50% In Program 0.50% Representative 0-3.50%  
 White: Returned 75.63% In Program 70.63% Representative 67.63-73.63%  
 More than One Race: Returned 5.28% In Program 12.00% Representative 9-15%

Based on the information above, in FFY 2022, the response rate was representative for American Indian/AK Native, Asian, Black/African American, and Native Hawaiian or Pacific Islander. The strong representativeness for the majority of race categories is believed to be due to the survey being made available in multiple languages and in two formats (online and paper) to meet the needs of diverse families.

In FFY 2022, White and Hispanic or Latino were over representative. North Dakota has historically had an overrepresentation in the response rate for White. This is the first year that Hispanic or Latino is considered overrepresentative. This is believed to be due to the ability of families to self-identify race on the IFSP during intake and on the family survey. This has historically caused fluctuation in different racial categories.

In FFY 2022, More Than One Race was considered under representative. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories on the IFSP and on the family survey. This has historically caused fluctuation in the More Than One Race category.

For FFY 2022, North Dakota also analyzed geographic demographics to determine representativeness on the family outcomes survey. For the purposes of providing Early Intervention Services, the state of North Dakota is divided into eight (8) geographic regions. Each region has a notable city that houses the Regional Human Service Center and includes the surrounding counties. The eight (8) regions are: Region 1- Williston, Region 2- Minot, Region 3- Devils Lake, Region 4- Grand Forks, Region 5- Fargo, Region 6- Jamestown, Region 7- Bismarck, and Region 8- Dickinson. The family outcomes survey requires families to select the region in which they receive services. The following is the return rate for each geographic region as compared to children in the program as of 11/1/23 (618 Table 1 PIT data):

Region 1:	Returned 4.27%	In Program 4.96%	Rep. 1.96-7.96%
Region 2:	Returned 9.55%	In Program 9.52%	Rep. 6.52-12.52%
Region 3:	Returned 5.02%	In Program 4.38%	Rep. 1.38-7.38%
Region 4:	Returned 13.07%	In Program 10.83%	Rep. 7.83-13.83%
Region 5:	Returned 21.61%	In Program 28.11%	Rep. 25.11-31.11%
Region 6:	Returned 9.04%	In Program 8.38%	Rep. 5.38-11.38%
Region 7:	Returned 21.61%	In Program 24.17%	Rep. 21.17-27.17%
Region 8:	Returned 15.58%	In Program 12.71%	Rep. 9.74-15.71%

In FFY 2022, Regions 1, 2, 3, 4, 6, 7, and 8 were considered representative. Region 5 was considered to be underrepresentative for FFY 2022.

Further analysis of the impact of representativeness based on racial or geographic demographics, including any nonresponse bias can be found below.

**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 state continues dedicated work to increase the return rate and representativeness of the family survey through a family survey subcommittee of the ICC, which began its work in September 2018. The Part C Coordinator has also worked to gather feedback from Early Intervention professionals in the state to examine the best methodology for increasing representativeness. This feedback resulted in a change to the collection methodology in FFY 2022, specifically removing the tracking requirement at a local program level. The change impacted the response rate but did not impact representativeness significantly. The ICC family survey subcommittee will meet to determine the best way to ensure survey tracking in future family surveys.

To continue to increase representativeness in survey responses, in FFY 2021, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. In FFY 2022, the online version of the survey received 339 of the 398 total responses (85.18%), and the paper version received 59 of the 398 total responses (14.82%). The percentage of individuals utilizing the online version of the survey increased in FFY 2022. Languages other than English were utilized for both the online and paper versions of the survey. The online version of the survey received comments on approximately 90% of responses, whereas the paper version received comments on only approximately 30% of responses, which is consistent with FFY 2021.

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

North Dakota met its target in A) Percent of families participating in Part C who report that early intervention services have helped the family know their rights, although there was a decrease to 97.74% in FFY 2022 from 98.63% in FFY 2021. North Dakota did not meet its target in B) Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs a decrease to 97.74 in FFY 2022 from 98.93% in FFY 2021. North Dakota did not meet its target in C) Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn, to 97.49% in FFY 2022 from 98.33% in FFY 2021. A total of 398 surveys were returned in FFY 2022, which is a decrease of 259 surveys from FFY 2021, when 657 surveys were returned. The response rate decreased to 22.59% in FFY 2022 from 42.01% in FFY 2021. In FFY 2022, through conversation and data analysis, the state decided to discontinue the tracking form that was required to be completed by the Primary Early Intervention Provider (PEIP). After a thorough analysis of the response rate and data, it was determined that the tracking form that was previously required to be completed provided accountability for follow-up on completion of the survey by families. Without the tracking form, the PEIPs were not following up with families to determine if they had completed and returned their surveys. This directly contributed to the low response rate and decrease in performance for Indicators 4b and 4c.

In FFY 2022, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. Families of children who received services for at least three months between January 1, 2023, and March 31, 2023, were eligible to receive the survey. Service Coordinators (DDPMs) and Primary Early Intervention Providers (PEIPs) worked together to determine which families were eligible to receive the survey and submit the number of surveys needed to the state office by July 15. One survey or survey link per child was delivered, dependent on the caregiver that interacts most with the child. If there were siblings (foster or biological) receiving early intervention services, the family would receive one survey for each child. A sample script was created for the PEIP to share with the family. In FFY 2022, PEIPs did not document the method of distribution on a Family Survey Response Tracking Form which impacted the response rate. The PEIPs followed up with the family at the next home visit after delivering the survey to answer any questions the family had and encouraged them to complete the survey. The survey was returned to the state office via postal mail or completed online via Microsoft Forms.

The ECO Family Outcomes Survey-Revised (FOS-R) was used, and it included a cover letter and newsletter with the FFY 2021 results and information. On the survey, the family self-reports their regional human service center, EI service provider, and race/ethnicity. At the end of the collection period, all surveys returned to the state office were scanned for data collection by the state Part C Coordinator. The Part C Coordinator worked with the NDI

department to compile the online survey data and integrate it with the paper survey data.

To continue to increase representativeness in survey responses, in FFY 2021, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. In FFY 2022, the online version of the survey received 339 of the 398 total responses (85.18%), and the paper version received 59 of the 398 total responses (14.82%). The percentage of individuals utilizing the online version of the survey increased in FFY 2022. Languages other than English were utilized for both the online and paper versions of the survey. The online version of the survey received comments on approximately 90% of responses, whereas the paper version received comments on only approximately 30% of responses, which is consistent with FFY 2021.

In FFY 2022, as in prior years, North Dakota has analyzed the family outcomes data to determine representativeness based race/ethnicity. The following is the return rate for each race/ethnicity as compared to children in the program as of 11/1/23 (618 Table 1 PIT data):

American Indian/AK Native:	Returned 6.28%	In Program 7.13%	Representative 4.13-10.13%
Asian:	Returned 0.75%	In Program 1.05%	Representative 0-4.05%
Black/African American:	Returned 4.02%	In Program 5.86%	Representative 2.86-8.86%
Hispanic or Latino:	Returned 7.54%	In Program 2.82%	Representative 0-5.82%
Native Hawaiian or Pacific Islander:	Returned 0.50%	In Program 0.50%	Representative 0-3.50%
White:	Returned 75.63%	In Program 70.63%	Representative 67.63-73.63%
More than One Race:	Returned 5.28%	In Program 12.00%	Representative 9-15%

Based on the information above, in FFY 2022, the response rate was representative for American Indian/AK Native, Asian, Black/African American, and Native Hawaiian or Pacific Islander. The strong representativeness for the majority of race categories is believed to be due to the survey being made available in multiple languages and in two formats (online and paper) to meet the needs of diverse families.

In FFY 2022, White and Hispanic or Latino were over representative. North Dakota has historically had an overrepresentation in the response rate for White. This is the first year that Hispanic or Latino is considered overrepresentative. This is believed to be due to the ability of families to self-identify race on the IFSP during intake and on the family survey. This has historically caused fluctuation in different racial categories.

In FFY 2022, More Than One Race was considered under representative. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories on the IFSP and on the family survey. This has historically caused fluctuation in the More Than One Race category.

For FFY 2022, North Dakota also analyzed geographic demographics to determine representativeness on the family outcomes survey. For the purposes of providing Early Intervention Services, the state of North Dakota is divided into eight (8) geographic regions. Each region has a notable city that houses the Regional Human Service Center and includes the surrounding counties. The eight (8) regions are: Region 1- Williston, Region 2- Minot, Region 3- Devils Lake, Region 4- Grand Forks, Region 5- Fargo, Region 6- Jamestown, Region 7- Bismarck, and Region 8- Dickinson. The family outcomes survey requires families to select the region in which they receive services. The following is the return rate for each geographic region as compared to children in the program as of 11/1/23 (618 Table 1 PIT data):

Region 1:	Returned 4.27%	In Program 4.96%	Rep. 1.96-7.96%
Region 2:	Returned 9.55%	In Program 9.52%	Rep. 6.52-12.52%
Region 3:	Returned 5.02%	In Program 4.38%	Rep. 1.38-7.38%
Region 4:	Returned 13.07%	In Program 10.83%	Rep. 7.83-13.83%
Region 5:	Returned 21.61%	In Program 28.11%	Rep. 25.11-31.11%
Region 6:	Returned 9.04%	In Program 8.38%	Rep. 5.38-11.38%
Region 7:	Returned 21.61%	In Program 24.17%	Rep. 21.17-27.17%
Region 8:	Returned 15.58%	In Program 12.71%	Rep. 9.74-15.71%

In FFY 2022, Regions 1, 2, 3, 4, 6, 7, and 8 were considered representative. Region 5 was considered to be underrepresentative for FFY 2022.

North Dakota will continue to work with the ICC family survey subcommittee and federal technical assistance to determine how to ensure high response rate and representativeness through follow-up with families during the survey process.

**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.**

North Dakota analyzed response rates of each racial and geographic demographic against the percent of children of that racial or geographic demographic enrolled in the Part C program, as of November 1, 2023, 618 Table 1 Point-In-Time data.

In FFY 2022, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. Families of children who received services for at least three months between January 1, 2023, and March 31, 2023, were eligible to receive the survey. Service Coordinators (DDPMs) and Primary Early Intervention Providers (PEIPs) worked together to determine which families were eligible to receive the survey and submit the number of surveys needed to the state office by July 15. One survey or survey link per child was delivered, dependent on the caregiver that interacts most with the child. If there were siblings (foster or biological) receiving early intervention services, the family would receive one survey for each child. A sample script was created for the PEIP to share with the family. In FFY 2022, PEIPs did not document the method of distribution on a Family Survey Response Tracking Form which impacted the response rate. The PEIPs followed up with the family at the next home visit after delivering the survey to answer any questions the family had and encouraged them to complete the survey. The survey was returned to the state office via postal mail or completed online via Microsoft Forms.

The survey response rate for each racial and geographic category was analyzed and it was determined that for the categories that are over or under-representative, the difference between the response rate and the range of representativeness was not significant enough to cause nonresponse bias. While the category of More Than One Race has a large difference between the response rate and the range of representativeness, this to be expected. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories between the IFSP and the family survey. This has historically caused fluctuation in the More Than One Race category for North Dakota's 618 Exiting data as well as APR Indicator 4. The response rate for geographical Region 5 is underrepresentative, which aligns with the underrepresentation in the racial demographic of more than one race, as Region 5 has the most racial diversity of all of the regions in North Dakota. The difference in response rate and range of representativeness of geographical Region 5 is not significant enough to cause nonresponse bias.



The Chi-Square test of independence was not significant for disproportionate representation.

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

#### 4 - Prior FFY Required Actions

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

##### Response to actions required in FFY 2021 SPP/APR

North Dakota met its target in A) Percent of families participating in Part C who report that early intervention services have helped the family know their rights, although there was a decrease to 97.74% in FFY 2022 from 98.63% in FFY 2021. North Dakota did not meet its target in B) Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs a decrease to 97.74 in FFY 2022 from 98.93% in FFY 2021. North Dakota did not meet its target in C) Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn, to 97.49% in FFY 2022 from 98.33% in FFY 2021. A total of 398 surveys were returned in FFY 2022, which is a decrease of 259 surveys from FFY 2021, when 657 surveys were returned. The response rate decreased to 22.59% in FFY 2022 from 42.01% in FFY 2021. In FFY 2022, through conversation and data analysis, the state decided to discontinue the tracking form that was required to be completed by the Primary Early Intervention Provider (PEIP). After a thorough analysis of the response rate and data, it was determined that the tracking form that was previously required to be completed provided accountability for follow-up on completion of the survey by families. Without the tracking form, the PEIPs were not following up with families to determine if they had completed and returned their surveys. This directly contributed to the low response rate and decrease in performance for Indicators 4b and 4c.

In FFY 2022, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. Families of children who received services for at least three months between January 1, 2023, and March 31, 2023, were eligible to receive the survey. Service Coordinators (DDPMs) and Primary Early Intervention Providers (PEIPs) worked together to determine which families were eligible to receive the survey and submit the number of surveys needed to the state office by July 15. One survey or survey link per child was delivered, dependent on the caregiver that interacts most with the child. If there were siblings (foster or biological) receiving early intervention services, the family would receive one survey for each child. A sample script was created for the PEIP to share with the family. In FFY 2022, PEIPs did not document the method of distribution on a Family Survey Response Tracking Form which impacted the response rate. The PEIPs followed up with the family at the next home visit after delivering the survey to answer any questions the family had and encouraged them to complete the survey. The survey was returned to the state office via postal mail or completed online via Microsoft Forms.

The ECO Family Outcomes Survey-Revised (FOS-R) was used, and it included a cover letter and newsletter with the FFY 2021 results and information. On the survey, the family self-reports their regional human service center, EI service provider, and race/ethnicity. At the end of the collection period, all surveys returned to the state office were scanned for data collection by the state Part C Coordinator. The Part C Coordinator worked with the NDIIT department to compile the online survey data and integrate it with the paper survey data.

To continue to increase representativeness in survey responses, in FFY 2021, the state provided either a paper or online survey option, as well as providing the survey in seven (7) written languages in either format. In FFY 2022, the online version of the survey received 339 of the 398 total responses (85.18%), and the paper version received 59 of the 398 total responses (14.82%). The percentage of individuals utilizing the online version of the survey increased in FFY 2022. Languages other than English were utilized for both the online and paper versions of the survey. The online version of the survey received comments on approximately 90% of responses, whereas the paper version received comments on only approximately 30% of responses, which is consistent with FFY 2021.

In FFY 2022, as in prior years, North Dakota has analyzed the family outcomes data to determine representativeness based race/ethnicity. The following is the return rate for each race/ethnicity as compared to children in the program as of 11/1/23 (618 Table 1 PIT data):

American Indian/AK Native:	Returned 6.28%	In Program 7.13%	Representative 4.13-10.13%
Asian:	Returned 0.75%	In Program 1.05%	Representative 0-4.05%
Black/African American:	Returned 4.02%	In Program 5.86%	Representative 2.86-8.86%
Hispanic or Latino:	Returned 7.54%	In Program 2.82%	Representative 0-5.82%
Native Hawaiian or Pacific Islander:	Returned 0.50%	In Program 0.50%	Representative 0-3.50%
White:		Returned 75.63%	In Program 70.63%
More than One Race:	Returned 5.28%	In Program 12.00%	Representative 9-15%

Based on the information above, in FFY 2022, the response rate was representative for American Indian/AK Native, Asian, Black/African American, and Native Hawaiian or Pacific Islander. The strong representativeness for the majority of race categories is believed to be due to the survey being made available in multiple languages and in two formats (online and paper) to meet the needs of diverse families.

In FFY 2022, White and Hispanic or Latino were over representative. North Dakota has historically had an overrepresentation in the response rate for White. This is the first year that Hispanic or Latino is considered overrepresentative. This is believed to be due to the ability of families to self-identify race on the IFSP during intake and on the family survey. This has historically caused fluctuation in different racial categories.

In FFY 2022, More Than One Race was considered under representative. In North Dakota, families self-identify race on the family survey as well as when providing demographic information for the IFSP. Due to this, families can self-identify in different categories on the IFSP and on the family survey. This has historically caused fluctuation in the More Than One Race category.

For FFY 2022, North Dakota also analyzed geographic demographics to determine representativeness on the family outcomes survey. For the purposes of providing Early Intervention Services, the state of North Dakota is divided into eight (8) geographic regions. Each region has a notable city that houses the Regional Human Service Center and includes the surrounding counties. The eight (8) regions are: Region 1- Williston, Region 2- Minot, Region 3- Devils Lake, Region 4- Grand Forks, Region 5- Fargo, Region 6- Jamestown, Region 7- Bismarck, and Region 8- Dickinson. The family outcomes survey requires families to select the region in which they receive services. The following is the return rate for each geographic region as compared to children in the program as of 11/1/23 (618 Table 1 PIT data):

Region 1: Returned 4.27% In Program 4.96% Rep. 1.96-7.96%  
Region 2: Returned 9.55% In Program 9.52% Rep. 6.52-12.52%  
Region 3: Returned 5.02% In Program 4.38% Rep. 1.38-7.38%  
Region 4: Returned 13.07% In Program 10.83% Rep. 7.83-13.83%  
Region 5: Returned 21.61% In Program 28.11% Rep. 25.11-31.11%  
Region 6: Returned 9.04% In Program 8.38% Rep. 5.38-11.38%  
Region 7: Returned 21.61% In Program 24.17% Rep. 21.17-27.17%  
Region 8: Returned 15.58% In Program 12.71% Rep. 9.74-15.71%

In FFY 2022, Regions 1, 2, 3, 4, 6, 7, and 8 were considered representative. Region 5 was considered to be underrepresentative for FFY 2022.

North Dakota will continue to work with the ICC family survey subcommittee and federal technical assistance to determine how to ensure high response rate and representativeness through follow-up with families during the survey process.

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

#### **4 - 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.

## 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.

## 5 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	1.58%

FFY	2017	2018	2019	2020	2021
Target >=	2.10%	2.20%	2.24%	2.30%	2.30%
Data	2.31%	2.35%	2.43%	2.24%	2.85%

### Targets

FFY	2022	2023	2024	2025
Target >=	2.32%	2.34%	2.36%	2.38%

### Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

### SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.

Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition,

EI provider staff, service coordination staff, and experienced parents attend. In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

**Grant Stakeholder groups:**

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.  
 Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.  
 Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.  
 Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

**Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 1 with IFSPs	276
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 1	10,093

**FFY 2022 SPP/APR Data**

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
276	10,093	2.85%	2.32%	2.73%	Met target	No Slippage

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

On November 1st, 2022, there were 276 children birth to one year of age with IFSPs in North Dakota, a decrease of two (2) children from FFY 2021. The number of children served is from Table 1 (618 data). The population of children birth to one year of age was 10,093, an increase of 353 children from FFY 2021.

**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.

## 6 - Indicator Data

Baseline Year	Baseline Data
2005	3.02%

FFY	2017	2018	2019	2020	2021
Target >=	3.43%	3.46%	3.48%	4.35%	4.35%
Data	4.17%	4.62%	4.88%	4.76%	5.35%

#### Targets

FFY	2022	2023	2024	2025
Target >=	4.65%	4.95%	5.25%	5.25%

#### Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

#### SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.

Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.

In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership

Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration

with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

**Grant Stakeholder groups:**

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

**Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 3 with IFSPs	1,704
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 3	29,837

**FFY 2022 SPP/APR Data**

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,704	29,837	5.35%	4.65%	5.71%	Met target	No Slippage

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

On November 1st, 2022, there were 1,704 children birth to three years of age with IFSPs in North Dakota, an increase of 88 children from FFY 2021. The number of children served is from Table 1 (618 data). The population of children birth to one year of age was 29,837, a decrease of 383 children from FFY 2021.

**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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 7 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	39.39%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	97.84%	98.94%	99.02%	99.67%	99.45%

### Targets

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

### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,123	1,356	99.45%	100%	98.67%	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.

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Provide reasons for delay, if applicable.

For FFY 2022, North Dakota had 18 instances where an initial IFSP meeting was not conducted within the 45-day timeline due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, five (5) instances of delayed services were due to agency oversight, five (5) were due to agency illness, and eight (8) were due to agency shortage.

**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, 2022-June 30, 2023

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

Data for Indicator 7 is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting in Indicator 7, using Therap, for FFY 2022.

In FFY 2022, North Dakota had 15 early intervention providers across the state. The performance of all 15 of these providers is represented in this data.

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

For FFY 2022, North Dakota had 18 instances where an initial IFSP meeting was not conducted within the 45-day timeline due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, five (5) instances of delayed services were due to agency oversight, five (5) were due to agency illness, and eight (8) were due to agency shortage. In the case of all 18 instances, the initial IFSP meeting was held, although late.

The 18 instances where an initial IFSP meeting was not conducted within the 45-day timeline due to an agency reason are attributed to five (5) providers. Nine (9) providers had 100% compliance with Indicator 7.

Indicator 7 FFY 2022 noncompliance was discovered through the APR data review process and was verified on December 1, 2022. On January 23, 2024, a Letter of Findings was issued to all five (5) providers who had at least one instance where an initial IFSP meeting was not held within the 45-day timeline due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

**Correction of Findings of Noncompliance Identified in FFY 2021**

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

**FFY 2021 Findings of Noncompliance Verified as Corrected**

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

For FFY 2021, North Dakota issued a Letter of Findings to five (5) providers due to having at least one instance where an initial IFSP was not held within the 45-day timeline due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to five (5) providers. Correction was verified according to Federal requirements. All five (5) findings were verified as corrected on August 8, 2023. Of the five (5) providers, three (3) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. One (1) provider demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance. The remaining one (1) provider demonstrated 100% compliance after three (3) data reviews, which required them to review and revise their current policy and training plans and submit them to TA, paired with Regional Action Plan meetings for accountability and refinement to assure compliance.

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

For FFY 2021, North Dakota issued a Letter of Findings to five (5) providers due to having at least one instance where an initial IFSP was not held within the 45-day timeline due to an agency reason.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in seven (7) of the seven (7) individual instances, the initial IFSP meeting was held, although late. Individual instances of noncompliance were verified as corrected for all programs on June 21, 2023. Correction was verified according to Federal requirements. All five (5) findings were verified as corrected on August 8, 2023.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

### Response to actions required in FFY 2021 SPP/APR

For FFY 2021, North Dakota issued a Letter of Findings to five (5) providers due to having at least one instance where an initial IFSP was not held within the 45-day timeline due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to five (5) providers. Correction was verified according to Federal requirements. All five (5) findings were verified as corrected on August 8, 2023. Of the five (5) providers, three (3) demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. One (1) provider demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance. The remaining one (1) provider demonstrated 100% compliance after three (3) data reviews, which required them to review and revise their current policy and training plans and submit them to TA, paired with Regional Action Plan meetings for accountability and refinement to assure compliance.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in seven (7) of the seven (7) individual instances, the initial IFSP meeting was held, although late. Individual instances of noncompliance were verified as corrected for all programs on June 21, 2023. Correction was verified according to Federal requirements. All five (5) findings were verified as corrected on August 8, 2023.

## 7 - OSEP Response

### 7 - 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.

## Indicator 8A: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	95.92%	98.09%	97.06%	99.17%	98.56%

**Targets**

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

**FFY 2022 SPP/APR Data**

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
125	126	98.56%	100%	99.21%	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.

0

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

For FFY 2022, North Dakota had one (1) instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, one (1) instance of missing transition steps and services was due to agency oversight.

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

A data set for Indicator 8A is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8A, using Therap, for FFY 2022. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 126 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2022, North Dakota had 15 early intervention programs across the state. The performance of all 15 of these programs is represented in this data.

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

For FFY 2022, North Dakota had one (1) instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, one (1) instance of missing transition steps and services was due to agency oversight. In the case of the single instance, at the time of discovery, the IFSP had been corrected to include documented transition steps and services, although late.

The one (1) instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason is attributed to one (1) provider. Fourteen providers had 100% compliance with Indicator 8A.

Indicator 8a FFY 2021 noncompliance was discovered through the APR data review process and was verified on January 15, 2024. On January 23, 2024, a Letter of Findings was issued to the provider who had at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	2		0

**FFY 2021 Findings of Noncompliance Verified as Corrected**

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

For FFY 2021, North Dakota issued a Letter of Findings to two (2) providers due to having at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023, to two (2) providers. Correction was verified according to Federal

requirements. For two (2) of the two (2) providers, the finding was verified as corrected on July 6, 2023. Both providers demonstrated 100% compliance after one (1) data review, which did not require them to review and revise their current policy and training plans to assure future compliance.

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

For FFY 2021, North Dakota issued a Letter of Findings to two (2) providers due to having at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in two (2) of the two (2) individual cases, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for the program on June 21, 2023. Correction was verified according to Federal requirements. The two (2) findings were verified as corrected on July 6, 2023.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2021 SPP/APR**

For FFY 2021, North Dakota issued a Letter of Findings to two (2) providers due to having at least one instance where a child did not have an IFSP with documented transition steps and services prior to exiting Part C due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023, to two (2) provider. Correction was verified according to Federal requirements. For two (2) of the two (2) providers, the finding was verified as corrected on July 6, 2023. Both providers demonstrated 100% compliance after one (1) data review, which did not require them to review and revise their current policy and training plans to assure future compliance.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in two (2) of the two (2) individual cases, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for the program on June 21, 2023. Correction was verified according to Federal requirements. The two (2) findings were verified as corrected on July 6, 2023.

**8A - OSEP Response**

**8A - 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.



## Indicator 8B: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	95.52%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	88.71%	85.00%	89.71%	Not Valid and Reliable	93.28%

**Targets**

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

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
104	126	93.28%	100%	94.55%	Did not meet target	No Slippage

**Number of parents who opted out**

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

16

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

For FFY 2022, North Dakota had six (6) instances where a child's record did not contain record of an LEA Notification due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, six (6) instances of a missing LEA Notification were due to agency oversight.

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

A data set for Indicator 8B is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8B using Therap, for FFY 2022. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 126 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2022, North Dakota had 15 early intervention programs across the state. The performance of all 15 of these programs is represented in this data.

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

YES

**If yes, is the policy on file with the Department? (yes/no)**

YES

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

A data set for Indicator 8B is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8B using Therap, for FFY 2022. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 126 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2022, North Dakota had 15 early intervention programs across the state. The performance of all 15 of these programs is represented in this data.

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

For FFY 2022, North Dakota had six (6) instances where a child's record did not contain record of an LEA Notification due to agency reasons. North Dakota requires providers to identify if the agency reason for delay is due to agency oversight, agency (staff) illness, or agency (staff) shortage. For this indicator, six (6) instances of a missing LEA Notification were due to agency oversight. In the case of all six (6) instances, at the time of discovery, the LEA Notification was sent, although late.

For LEA notification: A total of 126 records were reviewed. Of those 126 records, 16 parents chose to opt-out of the notification. Of the 110 that required LEA notification, 104 of the records contained documentation of the notification. Six (6) records did not contain a timely notification, therefore, North Dakota's performance for LEA notification is at 94.55%. The six (6) instances where a child's record did not contain evidence of an LEA Notification due to an agency reason are attributed to five (5) programs. Ten programs had 100% compliance with Indicator 8B.

For SEA notification: A total of 126 records were reviewed. Of those 126 records, 16 parents chose to opt out of the notification. The Part C Coordinator reviewed the timeliness of the SEA notification being sent for these 110 children. Of the 110 that required SEA notification, 110 records were sent timely. Zero (0) records were not sent timely.

Indicator 8B FFY 2022 noncompliance was discovered through the APR data review process and was verified on January 15, 2024. On January 23, 2024, a Letter of Findings was issued to all five (5) providers who had at least one instance where a child's record did not contain evidence of an LEA Notification due to an agency reason. The Letters of Findings were issued less than three months after the discovery and verification of noncompliance.

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	7		0

**FFY 2021 Findings of Noncompliance Verified as Corrected**

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

For FFY 2021, North Dakota issued a Letter of Findings to seven (7) programs due to having at least one instance where a child's record did not contain evidence of an LEA Notification due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to seven (7) programs. Correction was verified according to Federal requirements. The findings were verified as corrected on July 20, 2023. Six (6) programs demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. One (1) program demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

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

For FFY 2021, North Dakota issued a Letter of Findings to seven (7) programs due to having at least one instance where a child's record did not contain evidence of an LEA Notification due to an agency reason. For FFY 2021, there were eight (8) individual instances where a child's record did not contain evidence of an LEA Notification due to an agency reason. The eight (8) instances were attributed to seven (7) programs.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**8B - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2021 SPP/APR**

For FFY 2021, North Dakota issued a Letter of Findings to seven (7) programs due to having at least one instance where a child's record did not contain evidence of an LEA Notification due to an agency reason.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record.

For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to seven (7) programs. Correction was verified according to Federal requirements. The findings were verified as corrected on July 20, 2023. Six (6) programs demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans. One (1) program demonstrated 100% compliance after two (2) data reviews, which required them to review and revise their current policy and training plans to assure future compliance.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.



For this indicator, the State verified through record review, on June 21, 2023, that in eight (8) of the eight (8) individual instances, the child was no longer within the jurisdiction of the program. Individual instances of noncompliance were verified as corrected for the program on June 21, 2023. Correction was verified according to Federal requirements. The seven (7) findings were verified as corrected on July 20, 2023. \*\*The state verified that each of the seven (7) findings were verified as corrected and that the LEA/SEA was received for each child in compliance with OSEP QA 23-01, unless the child is no longer within the jurisdiction of the EIS program or provider. \*\*

## **8B - OSEP Response**

### **8B - 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.

## Indicator 8C: Early Childhood Transition

### Instructions and Measurement

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

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

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8C - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	83.30%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	99.36%	100.00%	97.50%	98.56%

**Targets**

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

**FFY 2022 SPP/APR Data**

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
124	126	98.56%	100%	100.00%	Met target	No Slippage

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

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

0

Number of documented delays attributable to exceptional family circumstances

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

2

Provide reasons for delay, if applicable.

North Dakota did not have any instances of delay due to agency reason for FFY 2022.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

A data set for Indicator 8C is taken from North Dakota's state electronic record system, Therap. North Dakota obtained a full year of data for reporting on Indicator 8C, using Therap, for FFY 2022. Child records, using a random sample representative of all 15 programs, were pulled from the data set for review based on the size of the program. 126 records were reviewed. The state monitoring team reviewed the records using the state case review tool based on Indicator 8 requirements.

In FFY 2022 North Dakota had 15 early intervention providers across the state. The performance of all 15 of these providers is represented in this data.

Provide additional information about this indicator (optional).

North Dakota did not have any instances of delay due to agency reason for FFY 2022.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	2		0

FFY 2021 Findings of Noncompliance Verified as Corrected

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

For FFY 2021, North Dakota issued a Letter of Findings to two (2) providers due to having at least one instance where a timely transition conference was not conducted due to agency reasons.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record. For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to two (2) providers. Correction was verified according to Federal requirements. All two (2) findings were verified as corrected on July 13, 2023. Both providers demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans.

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

For FFY 2021, North Dakota issued a Letter of Findings to two (2) providers due to having at least one instance where a timely transition conference was not conducted due to agency reasons.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in two (2) of the two (2) individual cases, the child was no longer in the jurisdiction of the EIS program at the time of discovery. Individual instances of noncompliance were verified as corrected for all programs on June 21, 2023. Correction was verified according to Federal requirements. All two (2) findings were verified as corrected on July 13, 2023.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2021 SPP/APR**

or FFY 2021, North Dakota issued a Letter of Findings to two (2) providers due to having at least one instance where a timely transition conference was not conducted due to agency reasons.

Specifically, in each instance, the State verified that the EIS programs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, via record review and State electronic record. For this indicator, each program with instances of noncompliance had the 5 newest files reviewed to verify current compliance. If the 5 files reviewed do not meet 100% compliance, the program is required to drill down into their current policy and training plans. After 30 days, the 5 newest files are reviewed. This process continues until 100% compliance is demonstrated. After each data review that does not meet 100% compliance, subsequent data are reviewed and technical assistance is offered on individual schedules with the program. Technical Assistance is intensified if multiple data reviews are required. All programs with noncompliance are required to submit updated policies and training plans to assure future compliance.

The state issued findings for noncompliance found in FFY 2021 on January 24, 2023 to two (2) providers. Correction was verified according to Federal requirements. All two (2) findings were verified as corrected on July 13, 2023. Both providers demonstrated 100% compliance after one (1) data review, which did not require them to revise current policy or training plans.

The state assured correction of each individual case of noncompliance, except for children who were no longer within the jurisdiction of the EIS program based on a record review by the regional program administrators and the state.

For this indicator, the State verified through record review, on June 21, 2023, that in two (2) of the two (2) individual cases, the child was no longer in the jurisdiction of the EIS program at the time of discovery. Individual instances of noncompliance were verified as corrected for all programs on June 21, 2023. Correction was verified according to Federal requirements. All two (2) findings were verified as corrected on July 13, 2023.

**8C - OSEP Response**

**8C - Required Actions**

## Indicator 9: Resolution Sessions

### Instructions and Measurement

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

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

### 9 - Indicator Data

#### Not Applicable

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

YES

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

North Dakota uses Part C due process hearing procedures under 34 CFR 303.430(d)(1), therefore this indicator is not applicable.

### 9 - Prior FFY Required Actions

OSEP notes that this indicator is not applicable.

**Response to actions required in FFY 2021 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)) divided by 2.1] times 100.

#### Instructions

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

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

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, the State must develop baseline and 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 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	0

#### Targets: Description of Stakeholder Input

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

#### SSIP ACTIVITIES:

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.

Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.

In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

Grant Stakeholder groups:

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

#### Historical Data

Baseline Year	Baseline Data
2005	

FFY	2017	2018	2019	2020	2021
Target>=					
Data					

#### Targets

FFY	2022	2023	2024	2025
Target>=				

#### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	0	0				N/A	N/A

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

North Dakota reported fewer than ten mediations held in FFY 2020. North Dakota is not required to provide targets until any fiscal year in which ten or more mediations were held.

#### 10 - Prior FFY Required Actions

None

#### 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2022. 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, 2023). 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 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) 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)?

North Dakota Part C's State-Identified Measurable Result (SiMR) is:

There will be improved social emotional outcomes for children who come in below age expectation but make substantial gains (Indicator 3a, Summary Statement 1) as a result of participation in early intervention.

#### 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)

YES

#### Please provide a description of the changes and updates to the theory of action.

The Theory of Action was revised through stakeholder review and feedback, including input from the state Inter-Agency Coordinating Council (ICC), the Statewide Early Intervention Meeting (service coordinators, early intervention providers), and the Resilient Early Intervention Leadership (REIL) advisory group, which includes a cross-section of state early childhood leaders and family members representing Head Start, Early Head Start, childcare, Tribal, county, public health, representatives from Institutes of Higher Education, parents, and ND Department of Health and Human Services Early Childhood section.

The new Theory of Action continues to support the four strands of Data Quality, Professional Development, Evidence-Based Practices, and Policy & Procedure, which remain priority areas for state early intervention. The SiMR and Evidence-Based Practice of DEC RP F6 also remain the same. Updates were made to the strategies and evaluation plan to align with new initiatives. The Theory of Action outcome was updated to "Evidence-based strategies support families' increased confidence and competence in supporting their children's social emotional development through natural learning opportunities."

While each strand remained the same, the activities in each strand provide a vision built on the previous accomplishments. The If/Then columns have updated activities outlining targets to reach the outcome. For example, in the Data Quality strand, the previous focus was to transition to a new child outcome tool and ensure data validity and reliability throughout the system. The updated Theory of Action builds on past work with an updated focus of creating real-time data availability through data visualization for all stakeholders.

The previous Professional Development strand focused on designing and implementing a statewide professional learning system. The updated strand focuses on designing statewide professional development for all stakeholders to increase and support recruitment and retention in the field of early intervention.

The Evidence-Based Practices (EBP) strand previously focused on training for a new child outcome tool and implementation of our state EBP. The new strand focuses on using the EBP's of the Routines-Based Interview (RBI) and Pyramid Model coaching to support families and their children through improved understanding of family routines and relationships.

The Policy & Procedure strand previously focused on designing a process to create and update policies and procedures in the early intervention system. The new strand builds on this work by continuing the creation and review process utilizing stakeholders while supporting web-based access of policies and procedures for stakeholders to support high-quality service provision.

The Evaluation plan outlines specific strategies for each strand.

North Dakota's stakeholders chose DEC F6 as the framework for evidence-based practices (EBP). ND's previous SSIP work built a foundation supporting knowledge and practice of early intervention EBP's around DEC F6. The focus of the new Theory of Action and Evaluation is to use DEC F6 as the overarching framework while building capacity and scale-up with the Routines-based Interview and Pyramid Model as EBP's.

#### Please provide a link to the current theory of action.

<https://www.hhs.nd.gov/early-childhood-services/early-intervention/federal-reporting> Scroll down to ND Part C State Systemic Improvement Plan (SSIP), click on Theory of Action.

### 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
2016	72.04%

**Targets**

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	71.00%	72.00%	73.00%	74.00%

**FFY 2022 SPP/APR Data**

Number of infants and toddlers reported in Indicator 3a progress category (c) plus number of infants and toddlers reported in category (d)	Number of infants and toddlers reported in Indicator 3a progress category (a) plus number of infants and toddlers reported in progress category (b) plus number of infants and toddlers reported in progress category (c) plus number of infants and toddlers reported in progress category (d)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
556	657	83.06%	71.00%	84.63%	Met target	No Slippage

**Provide the data source for the FFY 2022 data.**

North Dakota Part C's State-Identified Measurable Result (SiMR) data source is child outcome Indicator 3a, Summary Statement 1, and the data for this is gathered through the states Assessment, Evaluation and Programming System Assessment, Evaluation, and Programming System for Infants and Children (AEPS) child outcomes tool.

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

North Dakota uses the Assessment, Evaluation and Programming System Assessment, Evaluation, and Programming System for Infants and Children (AEPS) as the evaluation/assessment tool for child outcomes data. The data for the SiMR is taken from child outcome Indicator 3a, Summary Statement 1. All child outcomes data is entered into the publisher's online system (AEPSi), a web-based database.

Staff enter entry/exit data into the AEPSi online tool. Initial child outcome assessment is completed and entered into the data system by early intervention providers or the Service Coordinator (DDPM) prior to eligibility, and exit data is entered for children who have been receiving services for at least 6 months. Exit data must be entered within 30 days of the child's third birthday, and if the exit date is unexpected, the exit data must be entered within 30 days of the exit. The Service Coordinator (DDPM) is responsible to ensure completion of the tool by local early intervention providers. All data is downloaded and analyzed by the Part C Data Manager for reporting.

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

NO

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

NO

**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.hhs.nd.gov/early-childhood-services/early-intervention/federal-reporting> Scroll down to ND Part C State Systemic Improvement Plan (SSIP), click on Evaluation Plan.

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

YES

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

The State continues work in the four Strand areas of the original Evaluation Plan with updated activities. The four Strand Areas have been foundational to the SSIP work and the dynamic process of change in the state. In 2022, the State began the process of updating the evaluation plan. This work

continued in 2023. The evaluation plan can be found at: <https://www.hhs.nd.gov/early-childhood-services/early-intervention/federal-reporting>

The Data Quality strand in the Evaluation Plan provides activities to create real-time data availability through data visualization for all stakeholders. Activities include 1.1) outlined processes assure valid and reliable data with the initial data pull to reduce manual review by the field; 1.2) a public facing, interactive system creates access to real-time data for community stakeholders, providers, and families for data-based decision-making; 1.3) a statewide, online referral system is used for referrals. Each activity is aligned with performance indicators outlining strategies to meet the Data Quality outcome. The measurement/data collection methods and projected timelines were also updated in the evaluation plan.

The Professional Development strand provides activities to design statewide professional development for all stakeholders to increase and support recruitment and retention in the field of early intervention. Activities include 2.1) EI stakeholders collaboratively develop timely and meaningful professional development and 2.2) Community partners, families, service coordinators, and ID providers have increased knowledge and skills in use of evidence-based practices through effective professional development. Each activity is aligned with performance indicators outlining strategies to meet the Professional Development outcome. The measurement/data collection methods and projected timelines were also updated in the evaluation plan.

The Evidence-Based Practices strand provides activities to support the use of the Routines-Based Interview (RBI) and Pyramid Model coaching to support families and their children through improved understanding of family routines and relationships. Activities include 3.1) Service Coordinators and Infant Development providers increase their knowledge and practice in the use of family assessment and 3.2) Service coordinators and ID providers increase their knowledge and practice in the use of social-emotional strategies to support caregivers. Each activity is aligned with performance indicators outlining strategies to meet the Evidence-Based Practices outcome. The measurement/data collection methods and projected timelines were also updated in the evaluation plan.

The Policy & Procedure strand continues the work of developing policies and procedures to ensure implementation of high-quality Early Intervention practices to support high-quality service provision. Activities include 4.1) Regional programs, families, and community partners have web-based access to policies and procedures ensuring consistent implementation statewide; 4.2) Policy Workgroup develops procedures in target areas; 4.3) Transition Committee updates state transition guidelines. Each activity is aligned with performance indicators outlining strategies to meet the Policy & Procedure outcome. The measurement/data collection methods and projected timelines were also updated in the evaluation plan.

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

North Dakota's stakeholders chose DEC F6 as the framework for evidence-based practices (EBP). ND's previous SSIP work built a foundation supporting knowledge and practice of early intervention EBP's around DEC F6. The focus of the new Theory of Action and Evaluation is to use DEC F6 as the overarching framework while building capacity and scale-up with the Routines-based Interview and Pyramid Model as EBP's. The evaluation plan was updated through a stakeholder process to reflect the new vision of the updated Theory of Action. Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

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

Completed: Strategy 1- Child Outcome Tool: Updated Child Outcomes Tool. North Dakota replaced the child outcomes assessment tool in the fall of 2017 with the Assessment, Evaluation, and Programming System (AEPS) after significant planning for several years. This is North Dakota's fourth APR year of reporting the AEPS data for this indicator, and the first year a full cohort of children on the AEPS is being reported.

Completed: Strategy 2- Child Outcome Tool: Fidelity & Inter-Rater Reliability of Child Outcomes Tool. North Dakota provided 125 early intervention professionals and service coordinators with online inter-rater reliability training from the AEPS publisher, Brookes Publishing. North Dakota is currently working with Brookes Publishing to determine future training needs.

Completed: Strategy 3- Data Visualization. The state began working with the Decision Support Services (DSS) Division in June 2019 to create additional data reports using a program called Power BI that allows users to isolate individual programs' data in several APR data areas. For FFY 2022, the APR Data was presented to the ND ICC using Power BI. This allowed the state to analyze data with the ND ICC in real-time. ND ICC members reported better engagement with the data for this review. Additionally, the Part C Coordinator prepared an APR Trend Data report which contained narrative and data visualization that was shared with both the ND ICC and the EI Stakeholder group during recent meetings.

Completed: Strategy 4- Electronic Database Improvement. The Part C Coordinator seeks input on an ongoing basis from stakeholders on how the electronic database (Therap) can be improved. When suggestions are made, or difficulties are encountered, that information is taken to the Therap development team and considered for either enhancements or fixes to the system. This ongoing process that the State uses as improvements are made or concerns arise. Stakeholder input is critical to identifying enhancements and/or additional needs, so feedback is frequently sought when meeting with EI staff or when reviewing data with the ICC, as well as additional stakeholders.

On January 4, 2021, North Dakota implemented an improved Individualized Family Service Plan (IFSP) within the provider portal of Therap. The improved IFSP increases data quality by implementing additional data checks within the system for APR data points, providing a comprehensive documentation system for all types of IFSP events, including home visits, IFSP meetings and reviews, and evaluations. In FFY 2022, all Prior Written Notices moved to the provider portal of Therap, further increasing data quality.

**Professional Development Improvement Strand**

Completed: Strategy 6- Professional Development Platform Scale-Up: During FFY 2022, professional development system work was completed with the input of stakeholders in Early Intervention (EI), Technical Assistance (TA), and the state Part C team. A new, interactive learning platform was released in collaboration with the Resilient Early Intervention Leadership (REIL) grant. Professional development work focused on the development of a 3-part authentic assessment module series, statewide face to face family assessment training, and finalization of family assessment modules with scale-up and release that occurred January 2024.

Completed: Infrastructure Strategy 7- Statewide Mini-PD. During monthly Statewide Early Intervention Meetings, professional development is provided through mini-PD sessions on stakeholder-identified topics. Mini professional development sessions were provided on DEC Recommended Practice Assessment, DEC Recommended Practice Transition, Informed Clinical Opinion, PD Workgroup Authentic Assessment, and Theory of Action feedback.

**Policy and Procedures Improvement Strand**

Completed: Members from the Procedures Workgroup established in 2018 have joined with stakeholders from Part B to engage with ECTA and update the Part C to B Transition Guidance materials. The stakeholder engagement will continue for six months and result in additional and/or updated

materials. This engagement has been noted in Infrastructure Strategy 4.3 in the next steps section.

Completed: Infrastructure Strategy 9- Therap Provider Side IFSP and Prior Written Notices. In FFY 2022, the state began work on transitioning all Prior Written Notices to the provider side of Therap. In May 2023, two trainings were offered to all Early Interventionists and Service Coordinators. The Prior Written Notices were then made available in the Alpha context of Therap to allow for Early Interventionists and Service Coordinators to practice creating the notices. In September 2023, the transition of the Prior Written Notices to the provider side of Therap was complete and the Prior Written Notices on the state side of Therap were discontinued.

**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.**

Data Quality Improvement Strand

Outcome 1: Data quality will improve through a full cohort of exit child outcome data using the AEPS.

Infrastructure Strategy 1: Child Outcome Tool: Reviewing data quality of the full cohort data of the AEPS.

Stakeholder Involvement: The state utilized Statewide EI Meetings and ND ICC Meetings to inform decisions around transitioning to the AEPS, as well as the Data Drill Down stakeholder group to determine the most appropriate reports about which to train staff.

Systems Framework: Quality Standards and Data

Systems Change: Sustainability, Achievement of the SiMR

Infrastructure Strategy 2: Child Outcome Tool: Fidelity & Inter-Rater Reliability of Child Outcomes Tool.

Stakeholder Involvement: The state utilized the Statewide EI Meetings to determine timing of and interest in the Inter-Rater Reliability Modules for the AEPS.

Systems Framework: Quality Standards, Data

Systems Change: Scale-Up

Infrastructure Strategy 3: Data Visualization

Stakeholder Involvement: The state scaled up use of the data visualization using Power BI with the Data Drill Down stakeholder group, and the ND ICC for APR Reporting for FFY 2022.

Systems Framework: Data

Systems Change: Scale-Up, Achievement of the SiMR

Infrastructure Strategy 4: Electronic Database Improvement

Stakeholder Involvement: The state utilized feedback from individual programs as well as numerous trainings and listening sessions regarding the data system, Therap. Specifically, in FFY 2022, the state sought ongoing feedback from users of the new IFSP on the provider side of Therap.

Systems Framework: Data, Technical Assistance, Quality Standards

Systems Change: Sustainability

Professional Development Improvement Strand

Outcome 2: Design & implement a professional development system to support the EI system with evidence-based practices.

Infrastructure Strategy 6: Professional Development Scale-Up.

Stakeholder Involvement: During FFY 2022, the professional development system work continued with the input of stakeholders in Early Intervention (EI), State Technical Assistance (TA), and the state Part C team. A 3-part Authentic Assessment professional development module series in the new, interactive platform, was released in January 2023. The module was made to support new staff, experienced staff, families, and community partners. The state TA team also developed sixteen Family Assessment modules around the Routines-Based Interview (RBI) for scale-up and support; modules were released in January 2024 with a monthly release plan over a 16-month period. Regional action plans and RBI Leads were designated for each region (service coordination and early intervention provider). The statewide Crossroads Conference was held on October 2-4 with early intervention sessions, including a session from the PD Workgroup on authentic assessment. Data and information about this scale-up is discussed in the Evidence-Based Practices section of this indicator.

Systems Framework: Professional Development

Systems Change: Scale-Up

Infrastructure Strategy 7: Statewide Mini-PD.

Stakeholder Involvement: During monthly Statewide Early Intervention Meetings, mini professional development sessions were provided on DEC Recommended Practice Assessment, DEC Recommended Practice Transition, Informed Clinical Opinion, PD Workgroup Authentic Assessment, and Theory of Action feedback.

Systems Framework: Professional development and technical assistance

Systems Change: Scale-Up

Policy and Procedures Improvement Strand

Outcome 3: Create procedural guide to support implementation of policies to support improvement in the SiMR.

Infrastructure Strategy 8: Procedures Workgroup.

Stakeholder Involvement: The Procedures Workgroup is made up of service coordinators and EI program staff who regularly provide feedback during meetings. The group acts as leaders in their programs to gather and bring back information about procedures that are priority to their program.

Systems Framework: Governance, Technical Assistance

Systems Change: Sustainability

Infrastructure Strategy 9: Therap Provider Side IFSP.

Stakeholder Involvement: The Statewide EI Meeting provided feedback during all stages of developing the Provider Side IFSP. Prior to starting development, the group provided information about features they would like to see in the new IFSP, during development, users tested the new IFSP and provided feedback about functionality, and after deployment, users continue to provide feedback about enhancements they would like to see implemented.

Systems Framework: Data, Quality Standards, Professional Development, Technical Assistance

Systems Change: Scale-Up

## Summary

Updates to the Part C infrastructure have been impacted by SSIP targeted activities each year. The SSIP activities in conjunction with the REIL grant have offered opportunities to create a new statewide system of PD support, which will only be enhanced in the new Theory of Action and State Evaluation plan. The statewide web-based data system, Therap, continues to be reviewed and refined based on stakeholder feedback. A variety of stakeholder groups work in conjunction with the Part C Coordinator regularly to review and prioritize updates for the Therap system. A sustainable process is now utilized to share data visualization documents with programs leaders, families, and community partners on a regular basis.

Working toward a statewide system of PD support through an improved professional development platform infrastructure has created an engaging and interactive foundation for the state PD framework activities. New PD modules will provide performance support for onboarding and experienced early intervention professionals and community members for 'just in time' resources. Updated SSIP activities will continue to support early intervention through practice change and increased understanding within our EBP DEC F6.

**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.**

Data Quality Outcome: State, regional programs, families, and community stakeholders have data available for program planning and continuous improvement.

Infrastructure Strategy 1.1: Data processes ensure valid and reliable data.

Summary Next Steps: A data process manual is developed.

Stakeholder Involvement: The state will utilize the Policy & Procedure stakeholder group to review manual processes.

Anticipated Outcomes: An online manual outlines the procedures for valid and reliable data retrieval.

Infrastructure Strategy 1.2: A public facing, interactive system creates access to real-time data for community stakeholders, providers, and families for data-based decision-making.

Summary Next Steps: Part C Coordinator and Data Officer coordinate a system for real-time data on the ND website.

Stakeholder Involvement: The state will utilize the Policy & Procedure stakeholder group to review manual processes.

Anticipated Outcomes: Part C Coordinator and Data Officer complete data management system parameters.

Infrastructure Strategy 1.3: A statewide, online referral system is used for referrals.

Summary Next Steps: Part C Coordinator and Data Management coordinate a system for EI referrals on the ND website.

Stakeholder Involvement: The state will utilize the Policy & Procedure stakeholder group to review parameters of an online referral system.

Anticipated Outcomes: Part C Coordinator and Data Management complete referral system parameters.

Professional Development Outcome: Early Intervention leaders (families and EI professionals) are developed at the program and community level, increasing recruitment and retention in the field.

Stakeholder Involvement: The state will utilize the Professional Development stakeholder group to develop and review PD.

Infrastructure Strategy 2.1: EI stakeholders collaboratively develop timely and meaningful professional development.

Summary Next Steps: The Professional Development Workgroup develops modules using the PeopleSoft platform in target areas.

Anticipated Outcomes: A collaborative PD workgroup of service coordinators, infant development providers, and family stakeholders develop professional development modules through regular meetings.

Infrastructure Strategy 2.2: Community partners, families, service coordinators, and ID providers have increased knowledge and skills in use of evidence-based practices through effective professional development.

Summary Next Steps: PeopleSoft analytics demonstrate increased use of PD modules.

Anticipated Outcomes: An annual review of Peoplesoft analytics demonstrate increased use of PD modules across regions of the state and user demographics. Annual module survey data indicates increased competence and confidence in EI module content areas. Annual module survey data indicates use of modules to on-board new staff.

Policy and Procedures Outcome: Service Coordinators and Infant Development providers effectively use statewide policies and procedures for high-quality service provision.

Stakeholder Involvement: The State Team and Policy & Procedure stakeholder group will work together to develop statewide policies and procedures.

Infrastructure Strategy 4.1: Policy Workgroup develops procedures.

Summary Next Steps: A list of target areas for procedures is developed collaboratively with stakeholders outlining priority areas. EI stakeholders collaboratively develop two or more new policies and procedures annually.

Anticipated Outcomes: A timeline and list of procedures is developed and prioritized collaboratively with stakeholders. Reviewed/Revised and new policies developed by stakeholders and approved at the state office level. Two or more policies/procedures are completed annually.

Infrastructure Strategy 4.2: Regional programs, families, and community partners have web-based access to policies and procedures ensuring consistent implementation statewide: Work does not begin until 2025.

Infrastructure Strategy 4.3: Stakeholder Transition Committee updates state transition guidelines.

Summary Next Steps: A transition committee of stakeholders is developed by Part B and Part C. EI transition guidelines are updated.

Anticipated Outcomes: Cross-collaborative team of Part B and Part C stakeholders is formed. Collaborative group of Part B and Part C stakeholders meet regularly with the support of Federal TA to review, update, and make recommendations to the transition guidelines.

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

North Dakota Part C's evidence-based practice is DEC RP F6: Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family's preferences. The evidence-based practice work was supported through professional development performance support created for authentic assessment and family assessment activities in FFY 2022 with the support of the PD stakeholder group. Family assessment practices were supported through the January 2024 release of a 16-module series of training on the state's new platform. Regional programs developed an action plan and identified an RBI Lead to support

monthly discussions and practice change as one module is released per month. The modules work through three parts, an RBI Overview, RBI Components, and RBI Fidelity. Over 16-months, programs will work on their knowledge, skills, and practice, with the final focus of fidelity in family assessment. The modules work through three parts, an RBI Overview, RBI Components, and RBI Fidelity.

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

North Dakota Part C's evidence-based practice is DEC RP F6: Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family's preferences. As determined in Phase III, year one SSIP work, PD strand activities were aligned to the EBP, and the new Theory of Action and Evaluation Plan continues work with a focus on DEC RP F6.

The evidence-based practice DEC RP F6 work will be supported through family assessment and Pyramid Model activities. Family assessment practices will be supported through the January 2024 release of a 16-module series of training on the state's new platform. Regional programs developed an action plan and identified an RBI Lead to support monthly discussions and practice change as one module is released per month. The modules work through three parts, an RBI Overview, RBI Components, and RBI Fidelity. Over 16-months, programs will work on their knowledge, skills, and practice, with the final focus of fidelity in family assessment.

The state's new Theory of Action addresses a new initiative, the Pyramid Model, to bring coaching and reflection to early intervention in support of social-emotional relationships. Through work with national Pyramid Model consultants, the state will create a State Leadership Team, and train regional coaches, with the goal of statewide scale-up. Programs will use the EIPPF to work towards fidelity and improve practitioner's use of evidence-based practices for social-emotional skills and relationships.

Use of family assessment and pyramid model practices will support evidence-based practices in the field. The state continues its use of implementation science as an ongoing framework for supporting skills and knowledge growth through development and planning of professional development. The 325L Resilient Early Intervention Leadership (REIL) grant, through the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant, supports the Pyramid Model activities in early intervention. Over the past three years, the grant initiative provided the foundation to develop EI leaders who understand and employ practices based on leadership competencies, evidence-based practices, and Part C federal and state regulations in supporting infants and young children with disabilities and their families.

**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.**

During FFY 2022, the Professional Development (PD) system work continued with the input of stakeholders in Early Intervention (EI), State Technical Assistance (TA), and the state Part C team. Professional Development stakeholders met monthly to update a Family-Centered Practices module and continue training around the previously developed series of three Authentic Assessment PD modules, including a Reflection Guide. The modules were opened for users, including early interventionists, service coordinators, families, and community partners, in FFY 2022, and surveys provided feedback for continuous improvement of the modules from all stakeholders. PD workgroup members used the feedback to provide a Mini-PD at a Statewide Early Intervention meeting, present at the statewide Crossroads Conference, and present at the 2023 International Division of Early Childhood (DEC) conference. This is evidence of a scale-up of local leadership, supporting the ultimate goal of developing regional leaders, peer learning, and ownership at the program level for activities in support of EBP DEC F6.

Family assessment performance support in the state followed this model with the development of 16 Family Assessment modules and the identification of regional action plans and RBI Leads (service coordinators and early intervention providers) across the state. RBI Leads are program-level staff who will support the project in their region, once again developing regional leaders and peer learning opportunities to support the evidence-based practice. Statewide Early Intervention Meetings will offer cross-learning and sharing by the RBI Leads, along with continuous feedback to improve the training experience over time. The scale-up of the Family Assessment modules will be driven by stakeholders' feedback, incorporating program voice in how to scale-up Family Assessment with mentoring, peer support, and leadership within their program. This work is anticipated to follow the philosophy of previous SSIP projects.

In November 2020, ND Part C was awarded a Personnel Development (325L) grant. The work is in collaboration with the ND HHS Part C program, and the University of North Dakota Early Childhood and Special Education Program. The grant builds on the previous SSIP project utilizing implementation science called the POWR Project model of peer support and local program leadership development, aligned with state guided PD mentorship. The grant initiative activities were developed to support EI leaders in their understanding and use of practices based on leadership competencies, evidence-based practices, and Part C federal and state regulations in supporting infants and young children with disabilities and their families.

By December 2023, the OSEP-funded REIL grant supported two cohorts of 18 students (professionals, parents, pre-service) to graduate from the Early Intervention Leadership Certificate. The grant initiative builds a tiered, sustainable system of leadership opportunities to increase the capacity of leaders across the state, region, and local early childhood system. The REIL Grant Early Intervention Leadership Certificate and RELC supports early intervention through partnership with the early childhood community through cross-agency impact supporting early childhood partners, including parents, early interventionists, service coordinators and early childhood partners (Childcare, Early Head Start, Higher Education, Social Services, Public Health, and many others). The REIL grant will continue to build community and partnership in learning about and supporting early intervention while promoting leaders for the future.

In 2023, the Competency Assessment Tool (CAT) work was completed as funded by the REIL grant. This work used stakeholders to develop five competency strands to address the learning and knowledge base for Early Intervention professionals, employed either by a licensed Infant Developmental provider or as a service coordinator, employed by a regional Developmental Disability Program Management unit.

The competency content supports the performance of Experienced Parents, Right Track professionals, technical assistance contractors, and administrators. The competencies are also meant to be helpful to families who are engaging with the Early Intervention field. Other early childhood professionals working outside of the Early Intervention field will also benefit as they encounter young children with disabilities and delays in their practices. The Early Intervention Competencies recognize the primary and central role of families in the growth and development of children and the strong influence of culture on all areas of practice in early childhood education and care. The ability to understand, communicate with and effectively interact with people across cultures is cross-cutting and critical to the use of the North Dakota Early Intervention Competencies. A statewide, online webinar training was provided, and a CAT module was created, which is available on the state PD platform.

Activities in the Professional Development Strand and the Evidence-Based Practices Strand provide support in the use of the Routines-Based Interview (RBI) and Pyramid Model coaching to support families and their children through improved understanding of family routines and relationships, affecting the state SiMR.

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

Fidelity has centered on gathering data around practitioner practice change in EBP DEC F6. Previous fidelity data has focused on practitioner perception of growth from specific initial project implementation to the end of each project, leading to the current initiatives and demonstrating the continual increase of knowledge and practice change. Previous initiatives were centered around Parents Interacting with Infants (PIWI) and Partnering for Outcomes with Real Meaning (POWR).

As a part of long-term scale-up planning, family assessment caregiver survey was completed in FFY 2020, based on the components of the EBP DEC F6 fidelity checklist. The survey was completed by 142 families with a child in early intervention. Caregivers shared that they would like additional information in written form, available online and additional education about the early intervention and family assessment processes. This provided baseline data for the design and implementation project for Family assessment.

Initial data from the Routines Based Intervention (RBI) Part1, Module 1 (16 module series) results include RBI materials helped practitioners to have a better understanding of the family assessment process (Completely 61.545%, Almost 23.08%), information helped me understand the role of RBI in intervention (Completely 61.545%, Almost 30.77%), information helps me answer family questions about the family assessment process (Completely 61.545%, Almost 30.77%), and indicated the presentation was helpful to onboard and support existing staff, families, or community partners (Completely 100.00%).

Comments about "aha" moments during the training included the following: "taking time to get to know families is key," "eco map is a great tool," "my aha moment is that I need to refresh my memory on how to conduct the RBI. The longer you do it the easier it is to forget something," and "asking how the families day starts instead of the child's day is important."

Comments about PD in the new platform included the following: "I enjoy that it is broken down into little parts so you can process each part or replay to clarify

any questions versus stopping and rewinding to find the specific part," "I like it is completed on your time," "Very easy to understand and watch."

Participants were asked with whom they will share the RBI training. Responses included: caregivers (40%), community members (30%), new staff (70%), direct therapy providers (30%), and other community agencies (10%). Although this data is from the first module, early data indicates an impact on the perception and understanding of the family assessment process. The new learning platform also has possibilities for cross-community sharing of early intervention best practices.

Professional development work also focused on the release of a 3-part authentic assessment module series in 2023. Participants completed a feedback survey after the completion of the modules. Authentic Assessment module data demonstrated the following: Authentic Assessment module materials helped me to have a better understanding of authentic assessment (Completely 56.20%, Almost 30.66%), the information helped me understand the role of authentic assessment in early intervention (Completely 62.96%, Almost 29.63%), the information helped me talk with families/early intervention partners about assessment in early intervention (Completely 46.72%, Almost 36.50%), was the presentation helpful for orientation of new and existing staff, families, or community partners? (Yes, 98.54%).

Participants indicated that their perception of how their practice changed when considering authentic assessment included: understanding authentic assessment as ongoing throughout early intervention services (66.92%), ability to explain authentic assessment to families (63.16%), involving families in authentic assessment (63.16%) and considering how to team around authentic assessment (58.65%).

Participants commented about their "aha" moments during the training. Comments included the following: "I needed the reminder that it is an on-going practice. Sometimes we think of the assessment as just that initial evaluation, but it is a constant ever changing part of what we do," "learning the difference and the importance of objective vs. subjective assessments," "I was able to see how well our team does when writing evaluations and using descriptive and objective statements. This helped me become more aware of subjective opinions and thoughts during assessments."

Participants commented on using the new platform for training. Comments included the following: "you are able to take as much time as you need to learn the information," "can go back and listen to slides over again if information was missed the first time," "State-wide getting the same information and reflecting on program practices," "the layout was easy to follow," "I can do it on my own time. I love the visuals used," "I appreciate the "check in" moments," and "active participation/reflection opportunities."

As the state pivots to the new Theory of Action and Evaluation Plan, true fidelity will be collected using the RBI fidelity tool in pilot regions and the EIPPF as the pyramid model is scaled up in the state. The previous SSIP initiatives (PIWI and POWR) and data reviewed in this section has set the foundation for future work over the next five years.

### **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.**

The Resilient Early Intervention Leadership (REIL) Grant continues its fourth year. The grant includes several early childhood cross collaborative stakeholder groups across the state of ND. This grant has utilized several projects including the 100 cross-agency leaders in the Resilient Early Intervention Leadership Collaborative (RELC), the Competency Assessment Team (CAT), an Advisory Group, and the EI Leadership Certificate, made up of early childhood leaders and parents.

The REIL grant graduated Cohort 2 of the EI Leadership Certificate. Participants included service coordinators, early interventionist, parents, Early Head Start/Head Start and direct therapy providers. Participants completed a perception survey indicating the following: I have increased my confidence in understanding the key principles of resilient leadership through my involvement in the EI certificate (Completely 42.86%, Almost 50.00%), I have increased my confidence in using the key principles of Early Intervention through my involvement in the EI certificate (Completely 64.29%, Almost 28.57%), The lessons within the course work aid my learning in early intervention and resilient leadership (Completely 78.57%, Almost 14.29%), and The course work has supported my knowledge of the Division of Early Childhood Practices (DEC) (Completely 64.29%, Almost 35.71%).

Participants included the following statements about their learning moments in the EI certificate experiences: "How to improve myself personally and professionally as well as learning more about what others within the state do when working with children in early intervention," "Learning more about how EI works and is funded and the behavioral section of the classes," "To take time to check in with yourself and reevaluate your own well-being. It takes time to develop your leadership skills. You are always learning and growing and that is ok." "The importance of taking care of myself and understanding who I am as a leader supports my capacity to better lead my team," "This course helped me refocus and take what I was using and use with my families."

These grant activities support leaders in early intervention and enhance the work to support EBP DEC F6. The use of stakeholders across all endeavors offers varying perspectives and system insight. The EI certificate supported retention and recruitment as well as regional EI leaders in our state.

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

Evidence-Based Practices Outcome: Service Coordinators and Infant Development providers use evidence-based strategies to support families and develop relationships to increase confidence and competence in supporting their children's social emotional development through natural learning opportunities.

Stakeholder Involvement: The state team, PD stakeholder group, and Pyramid Model Statewide Leadership Team will review feedback and suggest updates.

Infrastructure Strategy 3.1: Service Coordinators and Infant Development providers increase their knowledge and practice in the use of family assessment.

Summary Next Steps: EI programs (SC & ID) identify RBI Lead and develop an Action Plan for their program. EI programs (SC & ID) complete 16-month

Routines-Based Interview (RBI) modules series with their staff.

Anticipated Outcomes: Each regional Service Coordination unit and Infant Development provider identifies an RBI Lead for the 16-month training and submits an Action Plan. Review of survey data for each of the 3 sections of the 16-modules indicates a growth in knowledge of the RBI process.

Infrastructure Strategy 3.2: Service coordinators and ID providers increase their knowledge and practice in the use of social-emotional strategies to support caregivers.

Summary Next Steps: Pyramid Model State Leadership Team is in place.

Anticipated Outcomes: An agreement is in place with national Pyramid Model consultants. A State Leadership Team (SLT) is developed.

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

NO

**If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.**

The Theory of Action and Evaluation plan were revised through stakeholder review and feedback. The new Theory of Action continues to support the four strands of Data Quality, Professional Development, Evidence-Based Practices, and Policy & Procedure, which remain priority areas for state early intervention. The SiMR and Evidence-Based Practice of DEC RP F6 also remain the same. Updates were made to the strategies and evaluation plan to align with new initiatives. The Evaluation plan outlines specific strategies for each strand.

## **Section C: Stakeholder Engagement**

### **Description of Stakeholder Input**

Using implementation science, stakeholder groups have been continuously used to provide feedback and participate in ongoing work in early intervention.

Stakeholders were used to create an updated Theory of Action and Evaluation Plan. Work with stakeholders began in FFY 21 when the current Theory of Action was reviewed with the ICC and the Statewide Early Intervention meeting. On January 12, 2022, the Statewide Early Intervention meeting offered feedback and discussion on updating the Theory of Action. On September 19, 2023, the Statewide Early Intervention meeting met to offer further edits to the Theory of Action and Evaluation plan. During 2023, meetings members were asked for their review, discussion, and feedback regarding the Theory of Action and Evaluation Plan. At the October 12, 2023, meeting, the ICC offered final edits for the plan. On January 16, 2024, Service Coordinators and EI Professionals met and reviewed the final editing for the Theory of Action and Evaluation Plan.

During the fall and winter of 2021, North Dakota Department of Health and Human Services, as the Part C Lead Agency, collaborated with our stakeholders, the North Dakota Interagency Coordinating Council (ND ICC), the Data Drill Down stakeholder work group, the Early Intervention Statewide Meeting stakeholder group, and a Parent Panel to engage in target setting activities for FFY 2020-FFY 2025. Information about each engagement is detailed in the FFY 2020 SPP/APR and posted on the Early Intervention website.

ND HHS and NDICC reviewed the trend and performance data for the previous years for all the results indicators to set targets for FFY 2019 on January 23rd, 2020.

ND HHS and NDICC had reviewed the trend and performance data for the previous 3 years for all the results indicators to set targets for FFY 2013-2018 on December 4th, 2014.

### **SSIP ACTIVITIES:**

The following groups were engaged for SSIP activities:

PD Workgroup: Regional representatives of service coordinators, EI providers, parents, and technical assistance.

Resilient Early Leadership Collaborative: 100 cross-agency leaders, including parents, in a multiyear learning collaborative.

Resilient Early Intervention Leadership Certificate: 36 interdisciplinary professionals, including parents and tribal professionals, in obtaining an EI Interdisciplinary Leadership Certificate with mentoring and coaching integrated.

Competency Assessment Team (CAT): Early childhood leaders and parents review and develop a competency assessment tool for EI.

REIL Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

Procedures Workgroup: Regional representatives of service coordinators, EI providers, parents, and Part C Coordinator.

Interagency Coordinating Council (ICC): Statewide, designated agency and caregiver stakeholders appointed by the governor.

Statewide EI Meeting Group: Group comprised of supervisory staff in the area of early intervention and service coordination across the state. In addition, EI provider staff, service coordination staff, and experienced parents attend.

In addition, stakeholders are a part of the Personnel Development To Improve Services and Results for Children With Disabilities- Leadership Development Programs: Increasing the Capacity of Leaders To Improve Systems Serving Children With Disabilities grant. The work is in collaboration with the ND Department of Health and Human Services Developmental Disabilities Division, Part C program, and the University of North Dakota Early Childhood and Special Education Program.

### **Grant Stakeholder groups:**

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Grant Advisory Group: Cross-agency leaders, parents, and higher education, to meet quarterly in support of grant projects.

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

Stakeholder Engagement. The state continues to use a variety of methods to inform and engage stakeholder groups about SSIP activities, including meetings, website, and newsletters. Several statewide meetings occur regularly where SSIP information is shared. The Statewide Early Intervention Meeting Group occurs at least six times per year and includes service coordinators, experienced parents, early interventionist, and community partners as stakeholders. The Interagency Coordinating Council (ICC) meets four times a year with a broader stakeholder group that aligns with the federal legislation requirements; ND requires a higher percentage of caregiver members in the ICC. The State's website includes minutes of meetings as well as annual SSIP reports. The Part C Coordinator periodically shares a newsletter outlining activities as well as requests regular feedback. Stakeholder's input, collaboration and feedback are built into all aspects of the SSIP strand work as follows:

Strategy 1: Data Quality. The statewide EI Meeting Group, Policy and Procedure Group and the Interagency Coordinating Council stakeholders regularly collaborate, discuss and give feedback on the child outcome results, child outcome tool, and the use of data to answer programmatic questions. An additional stakeholder group is the Caregiver Group, which reviews material from a family perspective. The ICC also reviews data and considers statewide long-term needs. Each year, the ICC reviews an APR Trend Data report, which contained data visualization and narrative.

Strategy 2: Professional Development. The Professional Development (PD) Work Group was initially created over the summer of 2016. The work group includes stakeholders from across the state (experienced parents, EI, TA, and service coordinators). The Work Group's goal was to delineate state and local responsibilities in PD, create a structure for PD and to review and develop resources, and vet PD materials. An additional stakeholder group is the Caregiver Group. The Caregiver Group reviews material from a family perspective. The Statewide EI Meeting Group also reviews material and provides feedback on the final product.

Strategy 3: Evidence-Based Practices. The Statewide EI Polycom Group, Policy and Procedure Group, Caregiver Group, REIL Grant Advisory Group, and the Interagency Coordinating Council regularly collaborate, discuss, review, and offer feedback in regard to the work of the EBP strand. The diverse stakeholders have created an effective network to inform this strand. A Statewide Leadership Team will be added in the coming year to support Pyramid Model strategies.

Strategy 4: Policy and Procedure. The Policy and Procedure Workgroup stakeholders reviews current policies, identifies procedure topics, as well as assists in writing any new policies and procedures. The Workgroup includes early intervention providers and service coordinators. Stakeholder input is crucial to ensure that policies are written with families in mind and that procedure is written effectively, so it can be carried out as efficiently as possible. The Statewide Early Intervention Meeting Group and the ICC Group review policy and procedure created by the Policy and Procedure Workgroup, supplying additional input.

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

NO

#### **Additional Implementation Activities**

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

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

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

North Dakota's barriers continue to include overall staff shortages that have impacted early intervention across the state. Early intervention professionals are very dedicated and have been creative in using strategies to counter shortages. The REIL grant has been a support to staff in its focus on resilient

early intervention leadership, and it has provided a foundation for being mindful of self-care. The state has been thoughtful in supporting professionals and considering implementation science to not overwhelm staff when planning new and ongoing initiatives. Through stakeholder feedback processes, staff have consistently expressed the need for PD support over time with deliberate planning and consideration of their ability to participate. This feedback has led to careful planning of initiatives, offering extended time for staff to participate fully. The new Evaluation Plan ties strategies to recruitment and retention.

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

### **11 - Prior FFY Required Actions**

None

### **11 - OSEP Response**

### **11 - Required Actions**

## **Certification**

### **Instructions**

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

### **Certify**

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

### **Select the certifier's role**

Designated Lead Agency Director

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

#### **Name:**

Jacqueline Adusumilli

#### **Title:**

Part C Coordinator

#### **Email:**

jadusumilli@nd.gov

#### **Phone:**

701-328-8968

#### **Submitted on:**

04/22/24 5:08:01 PM

## Determination Enclosures

### RDA Matrix

# North Dakota 2024 Part C Results-Driven Accountability Matrix

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

Percentage (%)	Determination
81.25%	Meets Requirements

#### Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	8	5	62.50%
Compliance	14	14	100.00%

#### 2024 Part C Results Matrix

##### I. Data Quality

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

Number of Children Reported in Indicator C3 (i.e., outcome data)	754
Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data)	1,368
Percentage of Children Exiting who are Included in Outcome Data (%)	55.12
<b>Data Completeness Score</b> (please see Appendix A for a detailed description of this calculation)	1

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

<b>Data Anomalies Score</b> (please see Appendix B for a detailed description of this calculation)	1
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##### II. Child Performance

###### (a) Data Comparison: Comparing your State's 2022 Outcomes Data to other States' 2022 Outcomes Data

<b>Data Comparison Score</b> (please see Appendix C for a detailed description of this calculation)	2
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###### (b) Performance Change Over Time: Comparing your State's FFY 2022 data to your State's FFY 2021 data

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

Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2022	84.63%	70.29%	69.54%	61.14%	79.71%	78.65%
FFY 2021	83.06%	69.36%	66.57%	59.62%	80.68%	76.79%

(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 2024: Part C."

2024 Part C Compliance Matrix

Part C Compliance Indicator (2)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2021 (3)	Score
Indicator 1: Timely service provision	96.81%	YES	2
Indicator 7: 45-day timeline	98.67%	YES	2
Indicator 8A: Timely transition plan	99.21%	YES	2
Indicator 8B: Transition notification	94.55%	YES	2
Indicator 8C: Timely transition conference	100.00%	NO	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/2024\\_Part-C\\_SPP-APR\\_Measurement\\_Table.pdf](https://sites.ed.gov/idea/files/2024_Part-C_SPP-APR_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 2022 Outcomes Data (Indicator C3)**

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2022 Outcomes Data (C3) and the total number of children your State reported in its FFY 2022 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 2022 in the State's FFY 2022 IDEA Section 618 Exit Data.

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

## Appendix B

### I. (b) Data Quality:

#### Anomalies in Your State's FFY 2022 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2022 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 2018 – FFY 2021 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 2022 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 2022**

<b>Outcome\Category</b>	<b>Mean</b>	<b>StDev</b>	<b>-1SD</b>	<b>+1SD</b>
Outcome A\Category a	1.57	3.26	-1.69	4.83
Outcome B\Category a	1.39	3	-1.6	4.39
Outcome C\Category a	1.26	2.6	-1.33	3.86

<b>Outcome\Category</b>	<b>Mean</b>	<b>StDev</b>	<b>-2SD</b>	<b>+2SD</b>
Outcome A\ Category b	24.07	9.01	6.05	42.08
Outcome A\ Category c	20.96	13.11	-5.27	47.19
Outcome A\ Category d	26.97	9.61	7.74	46.2
Outcome A\ Category e	26.43	15.4	-4.37	57.23
Outcome B\ Category b	25.63	9.71	6.21	45.04
Outcome B\ Category c	29.44	12.56	4.32	54.57
Outcome B\ Category d	31.02	8.11	14.8	47.25
Outcome B\ Category e	12.51	8.23	-3.96	28.98
Outcome C\ Category b	20.98	8.89	3.19	38.76
Outcome C\ Category c	23.49	13.59	-3.68	50.66
Outcome C\ Category d	33.36	8.28	16.8	49.93
Outcome C\ Category e	20.91	15.22	-9.53	51.35

<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 2022**

<b>Number of Infants and Toddlers with IFSP's Assessed in your State</b>	<b>754</b>
--------------------------------------------------------------------------	------------

<b>Outcome A — Positive Social Relationships</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	7	94	123	433	97
<b>Performance (%)</b>	0.93%	12.47%	16.31%	57.43%	12.86%
<b>Scores</b>	1	1	1	0	1

<b>Outcome B — Knowledge and Skills</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	4	208	81	403	58
<b>Performance (%)</b>	0.53%	27.59%	10.74%	53.45%	7.69%
<b>Scores</b>	1	1	1	0	1

<b>Outcome C — Actions to Meet Needs</b>	<b>Category a</b>	<b>Category b</b>	<b>Category c</b>	<b>Category d</b>	<b>Category e</b>
<b>State Performance</b>	3	108	50	386	207
<b>Performance (%)</b>	0.40%	14.32%	6.63%	51.19%	27.45%
<b>Scores</b>	1	1	1	0	1

	<b>Total Score</b>
<b>Outcome A</b>	4
<b>Outcome B</b>	4
<b>Outcome C</b>	4
<b>Outcomes A-C</b>	12

<b>Data Anomalies Score</b>	1
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**Appendix C**

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

**Comparing Your State's 2022 Outcomes Data to Other States' 2022 Outcome Data**

This score represents how your State's FFY 2022 Outcomes data compares to other States' FFY 2022 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 2022**

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	45.63%	35.29%	54.05%	27.07%	51.93%	33.56%
90	82.58%	69.37%	81.10%	56.55%	85.30%	71.29%

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

**Your State's Summary Statement Performance FFY 2022**

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 (%)	84.63%	70.29%	69.54%	61.14%	79.71%	78.65%
Points	2	2	1	2	1	2

<b>Total Points Across SS1 and SS2(*)</b>	10
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<b>Your State's Data Comparison Score</b>	2
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## Appendix D

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

#### Comparing your State's FFY 2022 data to your State's FFY 2021 data

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2021) is compared to the current year (FFY 2022) 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 2022 and FFY 2021 summary statements.

e.g.,  $C3A \text{ FFY}2022\% - C3A \text{ FFY}2021\% = \text{Difference in proportions}$

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

$\text{Sqrt}[(\text{FFY}2021\% * (1-\text{FFY}2021\%)) / \text{FFY}2021N] + ((\text{FFY}2022\% * (1-\text{FFY}2022\%)) / \text{FFY}2022N)] = \text{Standard Error of Difference in Proportions}$

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 it is less than or equal to .05.

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

0 = statistically significant decrease from FFY 2021 to FFY 2022

1 = No statistically significant change

2= statistically significant increase from FFY 2021 to FFY 2022

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 2021 N	FFY 2021 Summary Statement (%)	FFY 2022 N	FFY 2022 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	673	83.06%	657	84.63%	1.57	0.0202	0.7762	0.4376	NO	1
SS1/Outcome B: Knowledge and Skills	721	66.57%	696	69.54%	2.97	0.0248	1.1980	0.2309	NO	1
SS1/Outcome C: Actions to meet needs	585	80.68%	547	79.71%	-0.98	0.0237	-0.4118	0.6805	NO	1
SS2/Outcome A: Positive Social Relationships	780	69.36%	754	70.29%	0.93	0.0234	0.3980	0.6907	NO	1
SS2/Outcome B: Knowledge and Skills	780	59.62%	754	61.14%	1.53	0.0250	0.6107	0.5414	NO	1
SS2/Outcome C: Actions to meet needs	780	76.79%	754	78.65%	1.85	0.0212	0.8721	0.3832	NO	1

<b>Total Points Across SS1 and SS2</b>	<b>6</b>
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<b>Your State's Performance Change Score</b>	<b>1</b>
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**Data Rubric  
North Dakota**

FFY 2022 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

**APR Score Calculation**

<b>Subtotal</b>	12
<b>Timely Submission Points</b> - If the FFY 2022 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) =	17

(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: 8/30/23	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Dispute Resolution Due Date: 11/15/23	1	1	1	3

**618 Score Calculation**

Subtotal	9
Grand Total (Subtotal X 2) =	18.00

**Indicator Calculation**

A. APR Grand Total	17
B. 618 Grand Total	18.00
C. APR Grand Total (A) + 618 Grand Total (B) =	35.00
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>	35.00
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 points is 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.

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

DATE: February 2024 Submission

### SPP/APR Data

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

### Part C 618 Data

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

618 Data Collection	EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	8/30/2023
Part C Exiting	Part C Exiting Collection in EMAPS	2/21/2024
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	11/15/2023

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

**3) Passed Edit Check** – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).

## Dispute Resolution

### IDEA Part C

North Dakota

Year 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing" if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

#### Section A: Written, Signed Complaints

<b>(1) Total number of written signed complaints filed.</b>	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

<b>(2) Total number of mediation requests received through all dispute resolution processes.</b>	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 no 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

<b>(3) Total number of due process complaints filed.</b>	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

#### State Comments:

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

These data were extracted on the close date:  
11/15/2023



## 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 2024 will be posted in June 2024. 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, 2024

Honorable Wayne Salter  
Commissioner  
North Dakota Department of Health and Human Services  
600 East Boulevard Avenue, Department 325  
Bismarck, ND 58201

Dear Commissioner Salter :

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Sections 616 and 642 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that North Dakota meets the requirements and purposes of Part C of the IDEA. This determination is based on the totality of North Dakota's data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

North Dakota's 2024 determination is based on the data reflected in North Dakota's "2024 Part C Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for North Dakota 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) North Dakota'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 2024: 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 2024, as it did for Part C determinations in 2015-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD-C document and reflected in the RDA Matrix for North Dakota.) For 2024, 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 2022 data.

You may access the results of OSEP's review of North Dakota'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 North Dakota's SPP/APR on the site, you will find, in Indicators 1 through 11, the OSEP Response to the indicator and any actions that North Dakota is required to take. The actions that North Dakota 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) North Dakota's RDA Matrix;
- (2) the HTDMD [link](#);
- (3) "2024 Data Rubric Part C," which shows how OSEP calculated the State's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and
- (4) "Dispute Resolution 2022-2023," 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, North Dakota's 2024 determination is Meets Requirements. A State's 2024 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 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

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

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering two additional criteria related to IDEA Part C determinations. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three years ago). This factor would be reflected in the determination for each State through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State that would otherwise receive a score of meets requirements would not be able to receive a determination of meets requirements if the State had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is reviewing whether and how to consider IDEA Part C results data reported under three indicators in order to improve results for all infants, toddlers, and children with disabilities. This review would include considering alternative scoring options for child outcome Indicator C-3 and considering as potential additional factors the information and data that States report under child find Indicators C-5 and C-6.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part C data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part C Results Matrix and States will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 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. There will not be a resubmission period for the IDEA Section 618 Part C data.

As a reminder, North Dakota 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 North Dakota on the targets in the SPP/APR as soon as practicable, but no later than 120 days after North Dakota's submission of its FFY 2022 SPP/APR. In addition, North Dakota must:

- (1) review EIS program performance against targets in North Dakota'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, North Dakota 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 North Dakota'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 North Dakota's efforts to improve results for infants and toddlers with disabilities and their families and looks forward to working with North Dakota 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,

---

Valerie C. Williams  
Director  
Office of Special Education Programs

cc: State Part C Coordinator

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