

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2019**

New Jersey



**PART C DUE
February 1, 2021**

**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

The New Jersey Early Intervention System (NJEIS) is submitting this Part C State Performance Plan/Annual Performance Plan (SPP/APR), to the U.S. Department of Education, Office of Special Education Programs (OSEP) in accordance with the Individuals with Disabilities Education Act (IDEA). The plan was developed based upon guidance from OSEP and with broad stakeholder involvement and input. This report is submitted February 1, 2021 for federal fiscal year 2019 (FFY2019).

The New Jersey Department of Health (DOH) is the designated State lead agency for the New Jersey Early Intervention System (NJEIS) established under Part C of the IDEA. As such, DOH is ultimately responsible for implementing its general supervisory authority to ensure the availability of appropriate early intervention services for eligible infants, toddlers and their families in accordance with federal and state requirements.

The US Census Bureau (<https://www.census.gov/quickfacts/NJ>) and the World Population Review (New Jersey Population. (2020-3-12) found at <http://worldpopulationreview.com/states/new-jersey-population/> documented that New Jersey (NJ) is a geographically small north eastern state with a diverse population of 8,874,520 according to the January 2, 2021 estimate by the World Population Review. New Jersey is the 11th most populous state in the country with an average of 1,195.5 people for every square mile making it the most densely populous state in the country. New Jersey has a twenty-one (21) county governmental structure and is one of the only states to have every single county deemed "urban" as defined by the Census Bureau's Combined Statistical area. New Jersey is made up of a very diverse population and 32.2% of New Jersey's population aged 5 and older speak a native language other than English.

The U.S. Census Bureau estimates that New Jersey's median household income in 2019 was \$82,545. The median family income for families with children was \$108,421. The 2019 U.S. Census estimates include 296,619 children under three years of age in New Jersey. The US Census Bureau reported for 2019 that 12.3% of New Jersey's children were below the federal poverty level and 16.1% were living in households with Supplemental Security Income (SSI), cash public assistance income, or Food Stamps/SNAP benefits.

The NJEIS has a referral system point of entry for children and families through four Regional Early Intervention Collaboratives (REICs) that cover the state's twenty-one (21) counties. Grant/Contracts to the REICs and twelve (12) Service Coordination Units (SCUs) that provide ongoing service coordination for the twenty-one counties are executed annually. Direct early intervention services are provided by fifty (50) Early Intervention Program (EIP) provider agencies through contracts with the DOH. EIPs are contracted to serve as a comprehensive agency, a service vendor agency, and/or a targeted evaluation team (TET). Comprehensive agencies are expected to serve as an early intervention home for a child and family, providing all identified services on the IFSP. Service vendors serve as a backup in providing services not available through a comprehensive agency. Individual practitioners must be enrolled with the NJEIS through one of the contracted EIPs.

REICs are also responsible to facilitate family and community involvement in the NJEIS and assure that local resources are coordinated to assist families to meet the needs of their infants and toddlers with developmental delays and disabilities. The REICs are responsible for ensuring that families have an active voice in decision-making on Regional Boards/Councils. Each of the four REICs employs at least one full-time Training and Technical Assistance Coordinator and one full-time Family Support Specialist. The Family Support Specialist positions are required to be staffed by a parent of a child with a disability. Early intervention supports and services are provided in accordance with Part C statute and regulations and NJEIS state rules. Policies and procedures are disseminated statewide and posted on the NJEIS website.

NJEIS received a Determination of "Need Assistance" in June 2020, based on FFY 2018 data. NJEIS had a determination of "Meets Requirements" the previous year. Due to COVID-19, the state was actively collaborating and partnering with federal technical assistance partners (ECTA, DaSY) to ensure general supervision activities, professional development, public reporting requirements and overall NJEIS operations were able to pivot in response to the public health crisis.

The DaSy TA Center provided NJEIS with an in-depth review of the 618 measurement tables. NJEIS participated in an ECTA center Community of Practice for 5 weeks regarding Medicaid, private insurance and overall fiscal challenges and opportunities. ECTA also provided sustained technical assistance to the team reviewing and monitoring policies and procedures implemented in NJEIS. The assistance provided was consistently valuable to the activities conducted and decisions made throughout the year. NJEIS expects to continue accessing technical assistance in FFY 2020 from ECTA, DaSy and other OSEP funded TA centers for specific projects and the development of the new State Performance Plan (SPP) and State Systemic Improvement Plan (SSIP).

The Lead Agency relied on stakeholder participation throughout FFY2019. The DOH implemented and sustained new communication strategies within the NJEIS infrastructure and has adopted enhanced mechanisms for stakeholder input into policy, procedures, and the implementation of evidence based practices. The NJEIS is fortunate to have eight (8) new members of the Interagency Coordinating Council and five (5) new members to the Part C Steering Committee. Both the ICC and Steering Committee will be vital contributors to the revised SPP/APR and SSIP that will be submitted in February 2022.

Additional information related to data collection and reporting

General Supervision System

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

The NJEIS implements a general supervision system that identifies noncompliance, ensures verification of correction in a timely manner in accordance with federal requirements and promotes enhanced performance and results for children and families. This is accomplished through the Monitoring Unit, Procedural Safeguards Office, and the Central Management Office with ongoing activities including data verification, data analysis of performance data, fiscal monitoring, response to disputes, public reporting of data, local determinations, contracts management, personnel development, training, technical assistance, issuing of findings, corrective actions, verification of correction, on-site focused monitoring, and enforcement.

In addition, NJEIS has established and implements a Code of Conduct. All approved providers, administrators, and practitioners are required to review and sign their commitment to follow the provisions of this code. Additional information about these processes is included below:

Monitoring Activities:

A significant component of the NJEIS general supervision system is the performance desk audit process implemented using data compiled through the Early Intervention Management System (EIMS) database. The purpose of the data desk audit is to: (1) ensure data in the databases are accurate; (2) to identify noncompliance and areas for improvement; and (3) to verify correction of noncompliance in accordance with federal requirements in OSEP 09-02.

The EIMS database is an electronic central data systems that: Ensures an unduplicated count for federal reporting; Assists in the verification of data; Establishes and provides trend data for improvement planning; Identifies potential areas of non-compliance that are then targeted for follow-up by telephone, record submission or site visit; and Allows tracking of required corrective actions. In FFY2019, the DOH assigned four (4) new Data Analysts

to the REICs who assist the lead agency with on-going data verification, clean-up and analysis. Data desk audits review compliance and performance data for selected priority indicators for all counties/provider agencies. An inquiry response format has been developed and implemented to verify accuracy of data, request missing information and determine if barriers are appropriately addressed to correct performance issues. As needed, findings and corrective action plans are issued and verification of correction is completed in accordance with federal requirements. On-site focused monitoring is an important component of the NJEIS general supervision system used to address reoccurring or long standing noncompliance. In addition, on-site visits are conducted as necessary to verify correction or to determine the need for additional sanctions such as designation of at-risk or high-risk status when correction is not timely.

The NJEIS has a Procedural Safeguards Office, located within the DOH, Office of the Assistant Commissioner, to ensure the effective implementation of procedural safeguards including family rights. The Procedural Safeguards Office helps to ensure that parents receive and understand their rights and have access to formal, as well as informal systems of dispute resolution, as needed. Procedural safeguards are available to all families and are described in the document "New Jersey Early Intervention System (NJEIS) Family Rights". All NJEIS providers/practitioners are responsible to ensure that families understand their rights under Part C. To facilitate NJEIS provider agencies and practitioners working knowledge of these rights, they are all required to successfully complete six procedural safeguard online training modules prior to beginning work with children and families.

Service coordinators are given the responsibility to directly assist families in accessing informal and formal dispute resolution including completion and submission of requests for formal dispute resolution, if desired.

The Procedural Safeguards Office staff advise parents of their rights under the NJEIS, help them understand the options available to them when disputes arise, and assists in resolving informal disputes as needed. The Procedural Safeguards Office responds to parent issues/concerns and documents contacts for review and analysis. Parents can contact the Procedural Safeguards Office through a toll-free hotline. Parents who call are always advised of their right to file a request for formal dispute resolution at any time.

The Procedural Safeguards Office issues compensatory services as appropriate. The Procedural Safeguards Office documents informal and formal communications from parents by telephone, emails and/or written letters. This includes date of request, issues, resolutions, and timelines by county. This data collection tracks requests and outcome of informal and formal dispute resolutions received by the Procedural Safeguards Office. The Procedural Safeguards Office compiles information on disputes and shares with state entities including REICs, SCUs, and EIPs, as necessary to facilitate systematic training and technical assistance. In addition, a Procedural Safeguards Office report is presented at each State Interagency Coordinating Council (SICC) meeting on informal and formal complaints and resulting system responses. Formal dispute resolution procedures are used to identify and correct non-compliance through: A statewide mediation system available to ensure parents may voluntarily access a non-adversarial process for the resolution of individual disputes regarding the NJEIS including identification, evaluation and assessment, eligibility determination, placement or the provision of appropriate early intervention services. Mediators are required to undergo training as a condition of serving as mediators. The Procedural Safeguards Office maintains a list of qualified and impartial mediators who are trained in effective mediation techniques and are knowledgeable in laws, regulations and guidelines related to the provision of early intervention services. A statewide impartial hearing system available through the Office of Administrative Law (OAL) to ensure parents may voluntarily access a fair process for the resolution of individual disputes regarding the provision of early intervention services including identification, evaluation and assessment, eligibility determination, placement or the provision of appropriate early intervention services. A complaint resolution process available to address complaints filed by individual, families, groups, organizations, or from any source, including an organization or individual from another state, indicating a deficiency(s) in the fulfillment of the requirements, or a violation of the requirements, by public or private agencies, which are or have been receiving financial funding or payment under Part C of IDEA or other pertinent state or federal early intervention legislation; or by other public agencies involved in the state's early intervention system. The Procedural Safeguards Office is responsible for investigating and resolving complaints in accordance with Part C requirements.

Family Survey NJEIS utilizes the Family Survey developed by the National Center Special Education Accountability Monitoring (NCSEAM). This instrument has been selected because of the rigorous development process it underwent to ensure that the data obtained are valid and reliable. Data from the family survey are analyzed as part of the identification of issues and areas for improvement. See Indicator 4 for a discussion of how the survey is implemented and the data utilized.

Technical Assistance System:

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

Technical Assistance System:

The New Jersey Comprehensive System of Personnel Development (CSPD) consists of regional training and technical assistance coordinators (TTA) who work under the guidance of the REICs and state CSPD Coordinator. Each of the four REICs employs one full-time TTA. The CSPD team also includes one (1) full-time statewide liaison to Service Coordination and one (1) statewide support staff to assist with coordination of efforts and technology.

The REICs conduct provider meetings on a regular basis and alert the DOH to successes and challenges from the local providers and/or stakeholders.

The REICs have developed and execute yearly Community Impression Plans which use data-based decision-making to provide universal, targeted, or intensive TA to agencies or personnel in their respective region. The Regions report on their progress to the DOH at 6 month intervals. The CSPD team

1) Coordinates and prioritizes training initiatives across topic areas, including evidence-based practices and the goals and activities outlined in the State Systemic Improvement Plan; 2) Ensures consistency of messaging in professional development materials; 3) Establishes streamlined processes for on-boarding and off-boarding with accountability for agency administrators; 4) Establishes accountability measures for practitioners/SC in completing required training. The team is highly invested in maximizing and updating the use of technology platforms for training, community of practice work and general communication about NJEIS, federal and state requirements and connections with families. In addition to the established Learning Management System (LMS), and EIMS, the DOH has invested in Go-to-Training software, Zoom, and Microsoft Teams in the past year.

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.

The NJEIS has established personnel standards for all practitioners that provide early intervention services. These standards are maintained and monitored for all early intervention practitioners, requiring educational background and licensure as appropriate for each position in the state. Individual practitioners must be enrolled with the NJEIS through one of the contracted EIPs. NJEIS has specific enrollment requirements for agencies under contract with the DOH as an early intervention provider (EIP) and the individuals they use as practitioners for the provision of early intervention services. Agency and practitioner enrollment are through the Lead Agency enrollment team and verified by the Data System (EIMS) vendor. Agency requirements include proof of agency and practitioner liability insurance, certification statement for submitting claims for services, confirmation of practitioner police and background checks, and copies of signed Code of Conduct acknowledgement for agency administrative staff. Requirements for practitioner enrollment include a completed initial enrollment documents including degrees, certification and license numbers that are used to confirm the individual meets the personnel standards, background checks, a copy of a signed Code of Conduct acknowledgement and verification that the practitioner has completed required pre-enrollment training. NJEIS staff recruitment, preparation, qualification, support, and retention efforts are conducted to facilitate an adequate supply of qualified, capable and skilled early intervention personnel.

Stakeholder Involvement:

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

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council (SICC) to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR). This FFY 2019 SPP/APR was developed with broad stakeholder input obtained at a January 22, 2021 Part C SICC meeting. This included review of data for fiscal year 2019 (July 1, 2019 - June 30, 2020). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2019. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). The SICC members certified the FFY 2019 SPP/APR as their annual report.

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

YES

Reporting to the Public:

How and where the State reported to the public on the FFY 2018 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 2018 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2018 APR in 2020, is available.

The NJEIS Part C State Performance Plan/Annual Performance Report (SPP/APR) is disseminated to the public through posting to the state website (<http://nj.gov/health/fhs/eis/public-reporting/>) and the Regional Early Intervention Collaboratives (REICs) at <http://www.njreic.org/>. The SPP/APR is also disseminated electronically to representatives of the Part C Steering Committee, State Interagency Coordinating Council (SICC), state agencies (Department of Education, Department of Human Services, Department of Children and Families), advocacy organizations, Service Coordination Units and Early Intervention Program provider agencies for distribution throughout the State. Updates on this SPP/APR are prepared and submitted each February. These NJEIS reports and past reports are posted at: <http://nj.gov/health/fhs/eis/public-reporting/>.

The SPP/APR is disseminated to all of the above individuals electronically for distribution through their dissemination mechanisms (e.g., newsletters, websites, list serves, etc) throughout the State.

FFY 2019 County Performance Reports and Part C Determinations outlining the performance of each county in relation to state targets and Part C requirements will be prepared and disseminated within 120 days of the submission of this SPP/APR. Existing County Performance Reports and Part C Determinations are located at: <https://www.nj.gov/health/fhs/eis/public-reporting/>

Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State's capacity to improve its SiMR data.

OSEP notes that one or more of the attachments included in the State's FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

The State's IDEA Part C determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2018 SPP/APR

Intro - OSEP Response

The State's determinations for both 2019 and 2020 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 23, 2020 determination letter informed the State that it must report with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

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

The State's IDEA Part C determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.

The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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
2013	94.58%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	95.12%	93.13%	94.61%	97.56%	94.51%

Targets

FFY	2019
Target	100%

FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
146	153	94.51%	100%	96.08%	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.

1

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).

NJEIS established with Part C Steering Committee input, a policy for "timely services" as "All services are provided within 30 calendar days from the date the IFSP is signed by the parent(s) documenting consent for the services on the IFSP."

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

State monitoring

Describe the method used to select EIS programs for monitoring.

NJ continues to monitor all 21 counties every two years with 10 counties monitored in odd numbered FFYs (Cohort A) and 11 counties monitored in even number FFYs (Cohort B). NJEIS has a statewide database that authorizes the IFSP services consented to by the parent for assignment and billing by local provider agencies. Data from the data system assists in the process. Business rules for this monitoring include starting with all active children and all new services during a quarter (3 months) of the FFY. To ensure a representative pool, NJEIS pulls a random selection of child records within the quarter verifying there is a 95% confidence level and +/- 5 confidence interval to ensure the child records chosen, appropriately represent the state population for the entire reporting year. Therefore, the FFY 2019 timely services monitoring used the statewide database to randomly select the cohort of data which was then drilled down through a data desk audit inquiry process of all actual service claim data for the period. The data represents all active child records for the months of July through September 2019 for ten of the twenty-one counties in New Jersey. The other eleven counties were reviewed in FFY 2018 and reported in the APR submitted February 3, 2020. To ensure the data described below accurately reflects data for infants and toddlers with IFSPs for the full reporting period, NJEIS compares the pool of children to the statewide December 1 childcount by county size to ensure a representative pool of children and all their services for the entire reporting year of data.

Data Desk Audit, Inquiry and Record Review: The NJEIS state database does not yet capture all variables needed to determine whether a service is timely including reasons for delay and is unable to provide data that identifies whether a service is timely (provided within 30 calendar days) if it was first authorized under a periodic/annual IFSP. Therefore, as part of the monitoring process, the monitoring team conducts a data desk audit and inquiry to exclude any services reauthorized by a subsequent IFSP. The purpose of the data desk audit and inquiry is to: (1) identify reasons for delays, including documentation of family reasons; (2) determine if the service was added at a subsequent IFSP team meeting; (3) identify root cause and ensure correction of any systemic barriers; and (4) verify that the delayed service was provided, although late (prong 1). The monitoring team uses all the information received to determine where in the process the delay occurred and who was responsible. The identification of the data needed to conduct a timely data desk audit, inquiry, and record review is driven by the availability of actual service date claims data to ensure that complete and accurate data is available for the data desk audit. Timely service data passes through a number of edit checks including: verification that there is a valid IFSP data with a billing authorization within the IFSP period; verification there is a valid claim filed by the provider agency; verification the claim is supported by a service encounter verification log attested and signed by the parent and; an explanation of benefits provided to the family that details the services rendered as a secondary verification that the service type, actual date and intensity are accurate. The data is analyzed to verify the number of actual calendar days to the first service by comparing the parent consent date of service to the first service claim date. Further inquiry includes: Reason and explanation of delay; Identification of type of IFSP (initial, review, annual review); Date IFSP was sent by Service Coordination Unit (SCU) and received by the Early Intervention Program (EIP); EIP assignment date; Reasons and barriers that affected meeting the 30 day timely service provision; EIP and/or SCU response to correct the system barrier; Description of how the agency and/or SCU is assured that the barrier has been corrected; Submission of policies and procedures which were created or revised; and confirmation the agency followed NJEIS policies and procedures.

If needed, provide additional information about this indicator here.

Data Analysis and Results: The time period in which the data were collected was the quarter of July, August, and September of 2019. The Total Number of Children meeting the business rules stated above for the quarter =4,481 children which were taken from the state database. The DOH NJEIS analyzes timely services data by children and by individual service and reports data using actual number of calendar days (no averages) as described below:

Total Number of Records Monitored (Denominator)= 153 active children who had a total of 282 services were monitored. The desk inquiry conducted by the lead agency monitoring staff identified the following: Of the 153 children: 146 children had 275 total services which were verified as timely based on consent date of the IFSP (less than 30 days); 1 child had 1 service which was determined to have exceptional family circumstances that resulted in services being considered acceptable however untimely due to a child/family reason for delay (including child illness/hospitalization, family cancellations and requests to reschedule); and 6 children had 1 service each, were determined to have non-compliance in timely services and were verified as untimely (over 30 days). The 6 untimely service types were: Physical Therapy (1 child) and Speech Therapy (5 children). The number of days delayed were between 8-14 days (1 child) and >14 days (5 children). The reasons for the system delays were lack of providers, lack of availability of services schedules, service coordinator and provider lack of follow up.

The DOH confirmed that all six children received their services, although late and verified this through claims data, service encounter verification sign-off, and progress notes (Prong 1).

Therefore, the NJ Compliance Percentage: $(146+1)/153=96.08\%$ children; $(275+1)/282=97.87\%$ services. Overall, 96.08% (147/153) of the children had timely services including 1 child whose services were delayed due to a family reason and 97.87% (276/282) of the services were timely including 1 service which was delayed due to a family reason. As a result of the additional inquiry of the six (6) children and six (6) services which were late, NJEIS identified the responsible agencies, their percentage and determined reasons for delay (root causes). Three Findings were issued on August 11, 2020 to Burlington SCU, Cape May SCU, and Virtua EIP; the agencies would have until August 10, 2021 to verify correction of both prongs. As of September 15, 2020, all three (3) findings have been verified compliant using both prongs 1 and 2 as per OSEP-09-02 and were then closed as described below. As described above, all three agencies met prong 1 as NJEIS verified that all six children received their services although late (between 10-85 days late). To verify the three (3) agencies with identified noncompliance were now correctly implementing the regulatory requirements (Prong 2), NJEIS 1) reviewed and provided technical assistance in the revision of the three agencies' policies and procedures which may have contributed to the reasons for

delays. The three agencies submitted revised policies and procedures on September 11, 2020. Upon review of the agencies' updated/revised policies and procedures, NJEIS determined that the policies, procedures and/or practices were consistent with state and federal regulations for timely provision of services. The agencies were then required to provide an in-service training for all staff to review the state and revised agency policies and procedures. The agencies are held accountable to specific actual days at each step of the process to facilitate services starting sooner to better ensure meeting the 30-day timeline. 2) Additionally, NJEIS reviewed subsequent data in the following month of September 2020. NJEIS verified that the three agencies each had 100% compliance for all children receiving their services within 30 days of parental consent. This was verified using the NJEIS database and subsequent month's desk inquiry, child progress notes, parent attested and signed Service Encounter Verification forms; IFSPs from child records and verification of claims and service authorization data. The subsequent data pull in September 2020, verified timely service provision for all three agencies at 100%. Once each agency was verified as operating at 100% compliance for both prongs 1 and 2, the finding was closed. In Summary, based on FFY 2019 data, three (3) findings were issued on August 11, 2020. The children identified as receiving services untimely were verified to have received their services although late (prong 1). The three agencies revised/developed policies and procedures and once reviewed and approved by NJEIS, the agency provided mandatory in-service training to all their staff. NJEIS reviewed subsequent service data in the month of September 2020 and verified all services were being provided timely at 100% compliance and therefore, correctly implementing the specific regulatory requirements (prong 2). All the findings were closed timely between August 11, 2020 to September 15, 2020 after correction of both prongs were verified in accordance with federal requirements.

Correction of Findings of Noncompliance Identified in FFY 2018

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	3	1	0

FFY 2018 Findings of Noncompliance Verified as Corrected

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

NJEIS issued four (4) findings of Indicator #1 noncompliance in FFY 2018 to the following agencies: Camden SCU, CompCare EIP, Innovative Interventions EIP and TheraNorth EIP on September 20, 2019. To verify the four (4) agencies with identified noncompliance were now correctly implementing the regulatory requirements (Prong 2), NJEIS 1) reviewed and provided technical assistance in the revision of the agencies' policies and procedures which may have contributed to the reasons for delays. The four agencies submitted revised policies and procedures on October 30, 2019, October 31, 2019 and CompCare was given an extension to November 30, 2019 due to the Jewish holidays. The monitoring team reviewed the agency's revised policies, procedures and/or practices and determined they met the regulatory requirements set by OSEP and were consistent with state and federal regulations for timely provision of services. Upon review of the agencies' updated/revised policies and procedures, the agencies were then required to provide an in-service training for all staff to review the state and revised agency policies and procedures. Once the agency informed and trained all staff of the revised policy/procedures and practices, 2) NJEIS conducted a data verification of subsequent data to ensure they were implementing the specific regulatory requirements in providing timely initiation of services. NJEIS reviewed subsequent data every month until 100% compliance was verified. NJEIS reviewed subsequent data during the months of October 2019 through October 2020. NJEIS verified that the four agencies each had 100% compliance for all children receiving their services within 30 days of parental consent. Innovative Interventions verified 100% compliance upon review of subsequent data in the month of January 2020 (3 months). TheraNorth verified 100% compliance upon review of subsequent data in the month of February 2020 (4 months). Camden SCU verified 100% compliance upon review of subsequent data in the month of March 2020 (5 months). CompCare verified 100% compliance upon review of subsequent months of data from October 2019 to October 2020. CompCare obtained 100% compliance for this indicator within 13 months of the finding date whereas the other 3 agencies were able to verify 100% compliance within 12 months of the finding date. The NJEIS reviewed subsequent data during the period of October 2019 to October 2020 using the NJEIS database and subsequent monthly desk inquiry, child progress notes, parent attested and signed Service Encounter Verification forms; IFSPs from child records and verification of claims and service authorization data. The subsequent data pull occurred monthly until each agency verified 100% compliance. Once each agency was verified as operating at 100% compliance for both prongs 1 and 2, the finding was closed.

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

All four agencies met prong 1 as described in the FFY2018 APR. NJEIS verified that all 10 of the children had 13 services determined as having received their services late, received their services although late (greater than 30 calendar days from family consent), unless the child was no longer in the jurisdiction of NJEIS. However, there were no children who left the jurisdiction before the services were initiated although late. The 10 children had 13 services which were provided 1-57 days late. NJEIS accounted for all instances of noncompliance identified through the NJEIS database, review of each child's records, claims data, service encounter verification parental sign-off forms, and progress notes. NJEIS verified that the 10 children determined as having received their services late, received their services although late (greater than 30 calendar days from family consent), unless the child was no longer in the jurisdiction of NJEIS (Prong 1).

Correction of Findings of Noncompliance Identified Prior to FFY 2018

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that

each EIS program or provider with noncompliance identified in FFY 2019 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2012	99.81%

FFY	2014	2015	2016	2017	2018
Target>=	99.81%	99.84%	99.87%	99.89%	99.92%
Data	99.82%	99.79%	99.87%	99.87%	99.96%

Targets

FFY	2019
Target>=	99.92%

Targets: Description of Stakeholder Input

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council (SICC) to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR). This FFY 2019 SPP/APR was developed with broad stakeholder input obtained at a January 22, 2021 Part C SICC meeting. This included review of data for fiscal year 2019 (July 1, 2019 - June 30, 2020). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2019. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). The SICC members certified the FFY 2019 SPP/APR as their annual report.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	15,123
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	15,132

FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
15,123	15,132	99.96%	99.92%	99.94%	Met Target	No Slippage

Provide additional information about this indicator (optional)

In FFY 2019, the 618 data reported (15,123/15,132) 99.94% of infants and toddlers with IFSPs primarily received early intervention services in the home or community-based settings.

The 15,123 included 13,541 children who received services primarily in the home (89.49%) plus 1,582 who received services primarily in community-based settings (10.45%).

NJEIS finds that the requirement, which designates the primary setting as the location where the child receives most of their services, under represents the number of services provided in community settings.

A review of the December 1 data from FFY 2019 indicated that 1,756 of the 13,541 that received services primarily in the home and 4 of the 9 that received services primarily in other settings, also received at least one service in the community.

The percentage of children who received any service in the community is 22.1% $((1,582+1,756+4)/15,132)$. This is an increase of 3.69% compared to FFY 2018, which was 18.41%.

In FFY 2019, 99.94% of infants and toddlers with IFSPs primarily received early intervention services in the home or community-based settings. This is an decrease of 0.02% compared to FFY 2018 which was 99.96%.

The percentage of children receiving services in primarily community-based settings increased 2.97%, from 7.48% in FFY 2018 (1,064/14,216 children) to 10.45% in FFY 2019 (1,582/15,132).

In FFY 2019, 0.06% (9/15,132 children) of children were counted in other settings (percentage of non-natural environment settings) which is a 0.02% increased compared to FFY 2018 percentage of 0.04%.

In FFY 2019, 80.95% (17 of the 21) counties exceeded the target of 99.92% of children primarily served in natural environments.

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

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council (SICC) to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR). This FFY 2019 SPP/APR was developed with broad stakeholder input obtained at a January 22, 2021 Part C SICC meeting. This included review of data for fiscal year 2019 (July 1, 2019 - June 30, 2020). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2019. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). The SICC members certified the FFY 2019 SPP/APR as their annual report.

Historical Data

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2012	Target>=	38.15%	39.85%	41.55%	43.25%	45.00%
A1	30.62%	Data	39.87%	39.63%	43.34%	39.17%	36.08%
A2	2012	Target>=	77.29%	77.97%	78.65%	79.33%	80.00%
A2	79.03%	Data	80.11%	77.36%	79.12%	72.87%	60.84%
B1	2012	Target>=	82.59%	83.20%	83.80%	84.40%	85.00%
B1	77.32%	Data	84.11%	82.54%	85.33%	83.12%	85.82%
B2	2013	Target>=	45.87%	46.90%	47.90%	49.02%	50.00%
B2	45.87%	Data	47.54%	46.65%	49.93%	43.27%	43.32%
C1	2012	Target>=	92.85%	92.85%	92.88%	92.88%	93.00%
C1	92.25%	Data	93.43%	93.01%	94.92%	94.57%	93.24%
C2	2012	Target>=	78.75%	79.81%	80.87%	81.93%	83.00%
C2	80.37%	Data	80.23%	79.79%	79.80%	75.81%	88.34%

Targets

FFY	2019
Target A1>=	45.00%
Target A2>=	80.00%
Target B1>=	85.00%
Target B2>=	50.00%
Target C1>=	93.00%
Target C2>=	83.00%

FFY 2019 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

5,355

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	219	4.09%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,650	30.81%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	390	7.28%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	512	9.56%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2,584	48.25%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	902	2,771	36.08%	45.00%	32.55%	Did Not Meet Target	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	3,096	5,355	60.84%	80.00%	57.82%	Did Not Meet Target	Slippage

Provide reasons for A1 slippage, if applicable

As part of the NJEIS SSIP focused on Child Outcomes Indicator 3A, significant efforts have been in place to improve the distribution of the progress data in 3A. As the NJEIS utilizes 1 standard assessment tool, attention to fidelity of administration for the personal-social domain is an ongoing technical assistance project. The Results Accountability Matrix in the state's FFY16 and FFY17 Determination, identified a data anomaly for the percentage of children in "e". Previously the state reported 70% of children had an outcome progress rating of "e", indicating an issue with the identification of children with challenges in their social development upon entry to the program. The FFY18 and this FFY19 data have a progress category distribution reflective of improved identification of children's needs regarding their social emotional skill. Although the State is pleased with the improved distribution, there is concern for the slippage that occurred in FFY19. In response to the overall state-wide need for improvement in children's social-emotional development, the NJEIS primarily implemented a "universal TA" approach with system personnel. In July 2020, the TTA providers at the REICs, shifted their approach and created Community Impression Plans aimed at using county-level data to provide targeted and intensive TA. Drilling down, the DOH identified that Essex County has an unexpectedly high percentage of children in "b" (46.19%) The regional TA team is investigating the root cause for this anomaly, and will plan improvement strategies as a result of their conclusions. As the NJEIS prepares to submit a new State Performance Plan and Systemic Improvement Plan, the DOH will engage additional stakeholders in 1) re-evaluating the methodology used to report in C-3 and 2) reviewing and setting targets as part of the new, updated plan.

Provide reasons for A2 slippage, if applicable

Drilling into the county data in A2 shows Essex County as an outlier for the percentage (35.7%) of children who left the program "with peers". The range of progress for the 21 counties in A2 is 35.7% -79.0%, with an overall state performance of 57.82%. When Essex County is removed from the data set, the state performance becomes 63% which would be a 2% improvement over last year's performance. As in 3A1, the data demonstrates a need to provided intensive TA to the teams in Essex County through the regional Community Impression Plan.

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	112	2.09%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,413	26.39%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	719	13.43%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,053	38.34%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,058	19.76%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	2,772	4,297	85.82%	85.00%	64.51%	Did Not Meet Target	Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	3,111	5,355	43.32%	50.00%	58.10%	Met Target	No Slippage

Provide reasons for B1 slippage, if applicable

County data for B1 indicates that slippage occurred in all counties. In FFY18, the percentage of children in progress category "c" was 43.96% and in FFY19 13.43% were reported in "c". Alternatively, progress category "b" shows a statewide percentage in FFY18 11.74% and FFY19 26.39%. The shift in these 2 progress categories accounts for the slippage in the Indicator. NJEIS uses both the cognitive and communication domains on the BDI to answer this Indicator and the business rules require at least 1 of the domain scores meet the "with peers" criteria (SS>80) in order to be reported in progress category "c". Children's Raw Scores are another progress measurement on the BDI2. Drilling down to the 1413 children in "b", the average Raw Score upon entry was 32.5 points, and the average Raw Score upon exit were 49.27. This indicates that children did make progress in their development while in the program, however under NJEIS business rules the children did not move closer to their peers.

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	33	0.62%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	208	3.88%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	81	1.51%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,496	27.94%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	3,537	66.05%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,577	1,818	93.24%	93.00%	86.74%	Did Not Meet Target	Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	5,033	5,355	88.34%	83.00%	93.99%	Met Target	No Slippage

Provide reasons for C1 slippage, if applicable

County data for C1 indicates that 3 counties (Atlantic, Mercer and Union) account for the slippage in the statewide data. NJEIS uses the Motor and Adaptive Domains on the BDI to answer the summary statement C1. In FFY18, Mercer and Union counties each had 90% each in C1, while both counties slipped to 82% and 77% respectively in FFY19. Atlantic county slipped from 95.4% in FFY18 to 82% in FFY19. The remaining 18 counties maintained their performance or have non-significant slippage. The NJEIS business rules for C1 include the scores of both the motor and adaptive domains on the BDI and require at least 1 of the domain scores meet the "with peers" criteria (SS>80) to be reported in progress category "c". The county data will be provided to the TA providers for the 3 counties identified with the greatest slippage for further root cause analysis.

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	14,003
The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.	1,527

Sampling Question	Yes / No
Was sampling used?	NO

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

NO

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

NJEIS uses the BDI-2 to report child outcomes and to measure progress against peers. NJEIS uses the domain scores of a child upon entry to the program compared to the child's domain scores upon exit from the program

The Personal -Social Domain of the BDI is used to answer question 3A and "Peers" is defined as a standard score equal to or above the standard score of 80 in the domain area.

The Communication and Cognitive Domains are used to answer question 3B, NJEIS uses this business rule for consideration of "with peers": The child must have a standard score equal to or greater than 80 in both domains to be counted as "with peers".

The Adaptive and Motor domains are used to answer question 3C. NJEIS uses this business rules for consideration of "with peers": The child must have a standard score equal to or greater than 80 in both domains to be counted as "with peers".

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

The Battelle Developmental Inventory 2nd Edition, (BDI) is used by NJEIS to collect baseline information on each outcome area at entry into the program and again upon exit from the program. The business rules answer each of the three questions using the 5 domains on the BDI. Personal-Social Domain to answer progress on 3A, Communication and Cognitive Domains answer 3B and the Motor and Adaptive Domains are used to answer 3C. NJEIS has used the same business rules since 2008 and the procedures allow for comparison over time and across populations. All children who participate in the program for at least 6 months and who are exiting the program, are eligible for an exit evaluation.

NJEIS does not sample for this indicator, although the FFY2019 data is inclusive of 9 months of data, NJEIS does not consider this a sample as all exiting children who participated in the program for at least 6 months were provided the opportunity to have an exit evaluation during the 9 months.

Provide additional information about this indicator (optional)

Due to COVID-19, the N for this indicator is based on 9 months of data instead of 12. The NJEIS uses the BDI-2 to answer the questions C-3 by conducting an entry and exit evaluation with the standardized tool. On March 17, 2020 Governor Murphy placed NJ in a "stay at home" order, which prevented in-home Part C services. The program continued to provide services via telehealth for children, however administration of the BDI is difficult to be done by telehealth. Therefore, the NJEIS stopped conducting "exit" evaluations using the BDI-2 per our normal business rules. Evaluators instead chose different tools and methods which were more conducive to telehealth administration for determining eligibility and progress monitoring. In FFY2018, the N for this indicator was 5,960 for 12 months which equates to an average of 496 "exit" evaluations per month. The N for FFY2019 is 5,355 which averages 595 per month. Had NJ been able to conduct BDI evaluations for the months of April, May and June, the State estimates an additional 1,785 children may have been included in the performance data. The slippage in all C-3 indicators may be partially accounted for by the lower overall N.

3 - Prior FFY Required Actions

None

3 - OSEP Response

The State reported that the COVID-19 pandemic impacted the data for this indicator. Specifically, the State reported, "[d]ue to COVID-19, the N for this indicator is based on 9 months of data instead of 12. The NJEIS uses the BDI-2 to answer the questions C-3 by conducting an entry and exit evaluation with the standardized tool. On March 17, 2020 Governor Murphy placed NJ in a "stay at home" order, which prevented in-home Part C services. The program continued to provide services via telehealth for children, however administration of the BDI is difficult to be done by telehealth."

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.

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

If the analysis shows that the demographics of the families responding are not representative of the demographics of infants, toddlers, and families enrolled 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.

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2012	Target>=	71.18%	72.14%	73.09%	74.05%	75.00%
A	69.37%	Data	72.78%	66.22%	78.78%	75.52%	75.38%
B	2012	Target>=	66.67%	67.50%	68.34%	69.17%	70.00%
B	64.77%	Data	69.11%	62.85%	75.55%	72.97%	71.68%
C	2012	Target>=	83.09%	83.57%	84.05%	84.52%	85.00%
C	80.96%	Data	83.42%	82.29%	88.96%	85.06%	86.05%

Targets

FFY	2019
Target A>=	75.00%
Target B>=	70.00%
Target C>=	85.00%

Targets: Description of Stakeholder Input

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council (SICC) to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR). This FFY 2019 SPP/APR was developed with broad

stakeholder input obtained at a January 22, 2021 Part C SICC meeting. This included review of data for fiscal year 2019 (July 1, 2019 - June 30, 2020). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2019. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). The SICC members certified the FFY 2019 SPP/APR as their annual report.

FFY 2019 SPP/APR Data

The number of families to whom surveys were distributed	6,776
Number of respondent families participating in Part C	1,179
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	838
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,179
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	808
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,179
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	974
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,179

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 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)	75.38%	75.00%	71.08%	Did Not Meet Target	Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	71.68%	70.00%	68.53%	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)	86.05%	85.00%	82.61%	Did Not Meet Target	Slippage

Provide reasons for part A slippage, if applicable

On 3/17/20, NJ Governor Murphy declared a State of Emergency Quarantine due to surging COVID-19 infections. NJ was one of the first states with a rapid increase in COVID-19 infections during March-May 2020 and highest Infection Rates (IR) and number of deaths. The Department of Health (DOH) is the lead agency for the Part C program and as the public health crisis intensified, department resources were redirected to meet needs of the state's residents. Governor Murphy issued a "Stay at Home" order on 3/20/20 which affected the NJEIS direct service practitioners, service coordinators and lead agency staff. The NJEIS halted all early intervention in-person services effective 3/17/20 to reconfigure the EI system, revise procedures, trainings and billing system. Service coordinators were designated as essential personnel during the closure to assist families with adjusting their IFSP based on updated concerns, priorities and resources. The NJ Department of Education closed all schools on 3/16/20, resulting in remote instruction for all k-12 students and preschools and childcare closed under an executive order.

NJ identified families affected by the digital divide without access to equipment or internet. NJEIS quickly provided funding/equipment to implement a Tech Library for EI families. On 4/1/20, NJEIS re-opened with IFSP services being provided 100% through tele-health. In late June, the Governor approved childcare to re-open and NJEIS followed by resuming services within service provider locations beginning 7/1/20. Less than 1% of families received their services in these environments, however these families reported satisfaction with the availability of this option for in-person supports in controlled environments. NJ's COVID IR improved throughout the summer and on 9/1/20, NJEIS reinstated in-home services, while maintaining telehealth and center-based options. NJEIS provided safety training to all personnel and additional funding for PPE and supplies for families and staff for in-home services. Since allowing in-home services, 40-45% of IFSP services per week are being provided in-person and 60-55% remain via telehealth and 100% remote service coordination.

In general, the major factor in the slippage for Indicator 4 is likely attributed to the pandemic. The instability and uncertainty of the course of COVID -19 presented multiple challenges for families. The closure of childcare, schools and business, created new routines, concerns and priorities for families in the Part C program. NJEIS leadership stressed the importance of family decision making in the development of IFSPs and families made significant changes to their IFSPs. Prior to the shutdown, NJEIS had 15,153 families with active IFSPs which needed to be revised. Between March-April, the service coordinators logged 45,000 more hours of activity than previously logged. Overall, the program provided approximately 40% less services in April-June 2020 compared to the same time period the year before. DOH notes the reduction of services was due to family reasons brought on by numerous factors related to the pandemic.

Generally, the survey is distributed in the summer/fall. For FFY 2019, the distribution of the survey used to collect the data for Indicator 4 was delayed for a number of reasons due to COVID-19. The combination of remote work, delayed mailing of the surveys, delayed postal delivery to families, and other COVID related priorities resulted in less time for follow-up and analysis that is part of the state's process. In anticipation of a potential decreased response, NJEIS mailed out an additional 2,000 surveys to meet acceptable return rates and county representativeness. Upon analysis, NJEIS found certain counties, particularly in northern NJ, which had a higher IR had lower response for their county size. This was specifically found in Essex and Ocean counties. Both counties experienced 2 large surges in the virus IR and the Governor and Mayors reinstated mandatory quarantine in many towns and counties. NJEIS also found a direct correlation of increased IR of certain race categories and the decrease in representativeness with these same race categories of African American and Hispanic populations. Many hypotheses can be made however, without a thorough study, NJEIS can only make

hypotheses and assumptions about the reasons the response rate was lower as was the slippage in performance. These includes: NJ has a visible digital divide across our state which made the electronic survey unavailable to some who could no longer go to libraries or schools, internet bandwidth access as all family members worked and schooled from home; families with school-age children needing to provide support in teaching and supervising siblings; families who lost jobs and unsuccessful in obtaining unemployment. In addition, although tele-health EI was offered, approximately 4% of families decided to disenroll, 10% chose to have Public Expense only services and almost all families adjusted their IFSP services. NJEIS referral rates decreased dramatically to 87% less than our average weekly referrals pre-COVID-19. Also, a subset of families was not satisfied with telehealth services and were critical of the system for not providing in-home, in-person services earlier in the summer. During the survey process, the follow-up call staff reported some families requested NJEIS cease sending emails and calling during the pandemic. Due to the methodology in which the NJEIS administers the annual family survey, individual family responses are not identifiable back to the lead agency. The NJEIS steering committee's decision was based on assuring that families were able to answer the survey anonymously without influence in their response. However, every year the NJEIS receives a few personal responses and comments from families. There were a few families that commented that it was unfair to complete the survey since COVID restrictions have altered their perceptions. Families commented that prior to COVID, they were very satisfied with the staff and services. Another family commented her displeasure of tele-health services and hoped for her in-home services to return. The data identified a direct correlation between northern counties, who were the first affected and had the largest surges, also had the most slippage in all 3 sub-indicators. However, without a thorough study of these demographic groups on the effects of COVID-19 and their early intervention experience, NJEIS can only speculate that COVID-19 dramatically impacted the Family Outcomes results in FFY 2019 and most likely will continue in FFY 2020. In January 2021, the DOH hired a full-time researcher to investigate the effects of COVID on the NJEIS system generally and to discern the variables that contributed to positive or negative outcomes for families and children. The NJEIS understands there are multitude of personal issues including finances, fear, emotions and struggles which may have made the NJEIS survey less of a priority and may have affected families' attitudes, experiences and response to the questionnaire. NJEIS anticipates this new staff member will be key in the work of data analyses and target setting that NJEIS will be undertaking in 2021. Specifically, for indicator #4A, the percent of families participating in Part C who reported that early intervention services have helped their family know their rights, 100% of all active children with an IFSP had an IFSP review in order for NJEIS' move to all tele-health services. During the IFSP review meetings, service coordinators were instructed to provide families with a review of their family rights. However, due to the number of reviews each service coordinator had to provide within the 2 week pause, families may not have understood the content of their rights and/or felt, due to the pandemic and quarantine, they did not have a choice in the way their services were going to be conducted.

Provide reasons for part B slippage, if applicable

In general, the major factor in the slippage for Indicator 4 is likely attributed to the pandemic. The instability and uncertainty of the course of COVID -19 presented multiple challenges for the families in NJEIS. The closure of childcare, schools and business, created new routines, concerns and priorities for families participating in the Part C program. NJEIS leadership stressed the importance of family decision making in the development of IFSPs and during the early part of the pandemic, families made significant changes to their IFSPs.

At the start of the state shutdown, NJEIS had 15,153 families with active IFSPs that needed review. Between March-April, the NJEIS service coordinators logged 45,000 more hours of service coordination activities than compared to their usual monthly contact performance.

Overall, the program provided approximately 40% less services in April-June 2020 compared to the same time period the year before.

DOH notes the reduction of services was due to family reasons brought on by numerous factors related to the pandemic.

Generally, the survey is distributed in the late summer/early fall. For FFY 2019, the distribution of the survey used to collect the data for Indicator 4 was delayed for a number of reasons due to COVID-19. The combination of remote work, delayed mailing of the surveys, delayed postal delivery to families, and other COVID related priorities resulted in less time for follow-up and analysis that is part of the state's process.

In anticipation of a potential decreased response, NJEIS mailed out an additional 2,000 surveys to meet acceptable return rates and county representativeness. Upon analysis, NJEIS found certain counties which had a higher IR had lower response for their county size. This was specifically found in Essex and Ocean counties. Both counties experienced 2 large surges in the virus and the Governor and Mayors reinstated mandatory quarantines in many towns and counties.

NJEIS also found a direct correlation of increased IR of certain race categories and the decrease in representativeness with these same race categories of African American and Hispanic populations.

Many hypotheses can be made however, without a thorough study, NJEIS can only make hypotheses and assumptions about the reasons the response rate was lower as was the slippage in performance. These includes: NJ has a visible digital divide across our state which made the electronic survey unavailable to some who could no longer go to libraries or schools, internet bandwidth access as all family members worked and schooled from home; families with school-age children needing to provide support in teaching and supervising siblings; families who lost jobs and unsuccessful in obtaining unemployment.

In addition, although tele-health EI was offered, approximately 4% of families decided to disenroll, 10% chose to have Public Expense only services and almost all families adjusted their IFSP services. NJEIS referral rates decreased dramatically to 87% less than our average weekly referrals pre-COVID-19. Also, a subset of families was not satisfied with telehealth services and were critical of the system for not providing in-home, in-person services earlier in the summer. During the survey process, the follow-up call staff reported some families requested that NJEIS cease sending emails and calling during the pandemic.

Due to the methodology in which the NJEIS administers the annual family survey, individual family responses are not identifiable back to the lead agency. The NJEIS steering committee's decision was based on assuring that families were able to answer the survey anonymously without influence in their response. However, every year the NJEIS receives a few personal responses and comments from families. There were a few families that commented that it was unfair to complete the survey since COVID restrictions have altered their perceptions. Families commented that prior to COVID, they were very satisfied with the staff and services. Another family commented her displeasure of tele-health services and hoped for her in-home services to return.

The analysis of Indicator 4 data by county, identified a direct correlation between the northern locations of the state where counties such as Bergen, Passaic, Hudson, Morris and Union were the first affected and had the largest surges of COVID infections in the state, also had the most slippage for all 3 sub-indicators. Cape May county, which is the most southern of NJ counties, had significant slippage in performance for all 3 sub-indicators as well however, their slippage can be attributed to the transition to a new service coordination unit which became effective July 1, 2020 and maybe not as much due to COVID. NJEIS identified that the counties of Essex and Camden were primarily affected multiple times with increase in surges in their lower socio-economic cities of Newark and Camden City respectively, which in turn required additional shut downs of these cities. NJEIS found that Camden county's performance for all 3 sub-indicators were dramatically affected and show a significant slippage compared to last FFY 2018 performance. NJEIS also identified, the predominantly Hasidic communities within Ocean county were affected with multiple surges of COVID and in turn required modified shut downs throughout the county, had also demonstrated significant slippage in 4B.

However, without a thorough study of these demographic groups on the effects of COVID-19 and their early intervention experience, NJEIS can only speculate that COVID-19 dramatically impacted the Family Outcomes results in FFY 2019 and most likely will continue in FFY 2020.

In January 2021, the DOH hired a full-time researcher to investigate the effects of COVID on the NJEIS system generally and to discern the variables that contributed to positive or negative outcomes for families and children. The NJEIS understands there are multitude of personal issues including finances, fears, emotions and struggles which may have made the NJEIS survey less of a priority and may have affected families' attitudes, experiences and response to the questionnaire. NJEIS anticipates this new staff member will be key in the work of data analyses and target setting that NJEIS will be undertaking in 2021.

Specifically for indicator #4B, the percent of families participating in Part C who reported that early intervention services have helped their family effectively communicate their children's needs, 100% of all active children with an IFSP had an IFSP review in order for NJEIS' move to tele-health services. During the IFSP review meetings, service coordinators were instructed to provide families with a review of their child's services and the options of making changes to any of their services. However, due to the number of reviews each service coordinator had to provide within the 2 week pause, families may not have felt they could voice their concern or have a choice in how their services were to be delivered due to the pandemic and quarantine.

Provide reasons for part C slippage, if applicable

In general, the major factor in the slippage for Indicator 4 is likely attributed to the pandemic. The instability and uncertainty of the course of COVID -19 presented multiple challenges for the families in NJEIS. The closure of childcare, schools and business, created new routines, concerns and priorities for families participating in the Part C program. NJEIS leadership stressed the importance of family decision making in the development of IFSPs and during the early part of the pandemic, families made significant changes to their IFSPs.

At the start of the state shutdown, NJEIS had 15,153 families with active IFSPs that needed review. Between March-April, the NJEIS service coordinators logged 45,000 more hours of service coordination activities than compared to their usual monthly contact performance.

Overall, the program provided approximately 40% less services in April-June 2020 compared to the same time period the year before.

DOH notes the reduction of services was due to family reasons brought on by numerous factors related to the pandemic.

Generally, the survey is distributed in the late summer/early fall. For FFY 2019, the distribution of the survey used to collect the data for Indicator 4 was delayed for a number of reasons due to COVID-19. The combination of remote work, delayed mailing of the surveys, delayed postal delivery to families, and other COVID related priorities resulted in less time for follow-up and analysis that is part of the state's process.

In anticipation of a potential decreased response, NJEIS mailed out an additional 2,000 surveys to meet acceptable return rates and county representativeness. Upon analysis, NJEIS found certain counties which had a higher IR, had lower response for their county size. This was specifically found in Essex and Ocean counties. Both counties experienced 2 large surges in the virus and the Governor and Mayors reinstated mandatory quarantine in many towns and counties.

NJEIS also found a direct correlation of increased IR of certain race categories and the decrease in representativeness with these same race categories of African American and Hispanic populations.

Many hypotheses can be made however, without a thorough study, NJEIS can only make hypotheses and assumptions about the reasons the response rate was lower as was the slippage in performance. These includes: NJ has a visible digital divide across our state which made the electronic survey unavailable to some who could no longer go to libraries or schools, internet bandwidth access as all family members worked and schooled from home; families with school-age children needing to provide support in teaching and supervising siblings; families who lost jobs and unsuccessful in obtaining unemployment.

In addition, although tele-health EI was offered, approximately 4% of families decided to disenroll, 10% chose to have Public Expense only services and almost all families adjusted their IFSP services. NJEIS referral rates decreased dramatically to 87% less than our average weekly referrals pre-COVID-19. Also, a subset of families was not satisfied with telehealth services and were critical of the system for not providing in-home, in-person services earlier in the summer. During the survey process, the follow-up call staff reported some families requested that NJEIS cease sending emails and calling during the pandemic.

Due to the methodology in which the NJEIS administers the annual family survey, individual family responses are not identifiable back to the lead agency. The NJEIS steering committee's decision was based on assuring that families were able to answer the survey anonymously without influence in their response. However, every year the NJEIS receives a few personal responses and comments from families. There were a few families that commented that it was unfair to complete the survey since COVID restrictions have altered their perceptions. Families commented that prior to COVID, they were very satisfied with the staff and services. Another family commented her displeasure of tele-health services and hoped for her in-home services to return.

The analysis of Indicator 4 data by county, identified a direct correlation between the northern locations of the state where counties such as Bergen, Passaic, Hudson, Morris and Union were the first affected and had the largest surges of COVID infections in the state, also had the most slippage for all 3 sub-indicators. Cape May county had significant slippage in performance for all 3 sub-indicators however, their slippage can be attributed to the transition to a new service coordination unit which became effective July 1, 2020 and maybe not as much due to COVID. NJEIS identified that the counties of Essex and Camden were primarily affected multiple times with increase in surges in their lower socio-economic cities of Newark and Camden City respectively, which in turn required additional shut downs of these cities. NJEIS found that Camden county's performance for all 3 sub-indicators were dramatically affected and show a significant slippage compared to last FFY 2018 performance. In Essex county, NJEIS found a slight slippage in indicator 8C where historically, Essex county had demonstrated higher performance in meeting the state's target.

However, without a thorough study of these demographic groups on the effects of COVID-19 and their early intervention experience, NJEIS can only speculate that COVID-19 dramatically impacted the Family Outcomes results in FFY 2019 and most likely will continue in FFY 2020.

In January 2021, the DOH hired a full-time researcher to investigate the effects of COVID on the NJEIS system generally and to discern the variables that contributed to positive or negative outcomes for families and children. The NJEIS understands there are multitude of personal issues including finances, fears, emotions and struggles which may have made the NJEIS survey less of a priority and may have affected families' attitudes, experiences and response to the questionnaire. NJEIS anticipates this new staff member will be key in the work of data analyses and target setting that NJEIS will be undertaking in 2021.

Specifically, for indicator #4C, the percent of families participating in Part C who reported that early intervention services have helped their family help their children develop and learn, 100% of services were changed to tele-health services during the pandemic. However, several families notified the lead agency of their hesitation of telehealth services and requested the state to reconsider resuming in-person services. The NJEIS expanded the option of in-person center-based services however, not all providers have brick and mortar facilities and therefore, several families insisted in resuming in-home services. The NJEIS and EI programs put out training and videos of how to have a successful tele-health EI session. The pandemic did result in some positive forward momentum within the NJEIS. The program has gathered data that indicates the necessity of telehealth services and, has strengthened the use of the evidence-based coaching practices known to be effective with the 0-3 population. Practitioners and families needed to take extra efforts to engage and exchange information across remote platforms, plan activities and materials ahead of time and, needed to adjust to new routines. NJ saw creative and out-of-the-box ideas and descriptive and demonstrative examples that both practitioner and parents developed. The team process was more prominent now than in previous years. That is why this year's slippage is quite surprising. Although we do know that while many of our practitioners and families valued and appreciated the telehealth model, there were others who felt there was a lack of experience and support to help them with their child's development compared to when they previously received majority of services in-person.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously-approved sampling plan changed?	NO

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

The following business rules were applied in the selection of families to receive the family survey:

1. Children must have been in the system for at least 9 months from referral; and 2. Children that had an active IFSP or exited early intervention 3 months or less from the population selection date. The analysis of NJEIS data using the above business rules identified a total population size of 11,040 families. The NJEIS filters out all duplicates (siblings, multiple births). The total un-duplicated survey population was 10,906 as documented in Table 1 . Sampling Plan

NJEIS conducted a two year analysis of historic family survey data to identify a potential return rate in an effort to prevent a high margin of error. The return rate in FFY 2006 was 15%. Historically, African American/Not Hispanic (AA/NH) and Hispanic (H) families have lower return rates than other race groups (White/Asian/American Indian/Hawaiian-Pacific Islander/Multi Race) (W/A/AI/PI/MULTI). This difference was documented in the analysis of the FFY 2005 survey return rates. Therefore, NJEIS continues to over sample these two race groups.

NJEIS population varies widely for each county. A minimum and maximum sample size was set to ensure that the sample size from small and densely populated counties was appropriately represented. NJEIS not only wanted to examine the results for the overall population, but also wanted to understand the difference between key demographic subgroups within the population. In order to be certain to obtain a sample that is representative of the NJEIS population and based on analysis results from previous family surveys, NJEIS implemented the use of a county stratified random sampling without replacement, unequal allocation. African American/Not Hispanic and Hispanic race group were pulled at higher percentages than other race groups. The detailed plan follows:

Step 1: Target number of survey returns per county.

The sampling plan is a county stratified random sample without replacement, unequal allocation.

The sampling rate is 20% with a minimal county stratum size of 20 and a maximum stratum size of 75.

The margin of error (MOE) per county varied from 11% to 20%. The margin of error for 11 out of the 21 counties was less than or equal to 15%. The overall state wide margin of error (MOE) was 3% as documented in Table 2.

Step 2: Calculate outgoing sample.

To compensate for a projected lower response rate from African American/Not Hispanic and Hispanic race groups, an additional sample was drawn in each of the county stratum. With a 20% expected return rate, the expected number of surveys mailed was 6,789 for the population of 10,906 as documented in Table 2 & 3.

Step 3: Analysis Weights

Both stratification and differential response cause samples to deviate from representativeness and therefore weights were adjusted for both. As part of the analysis, a weight inverse was implemented to the Sampling Fraction (s.f.) (Including all differentials in target n and field sampling rate (fsr)) and the Response rate as documented in Table 2 .

Promotion of the survey and Follow-up

Each year, families mail the completed survey directly to an outside contractor to analyze the survey results. A unique child identification number is documented on each survey to allow for demographic analysis. The contractor conducting the analysis only provides a listing of the child identification numbers of families responding to the survey back to the NJEIS. This enables the NJEIS to conduct follow-up activities to obtain a representative sample. The contractor doesn't share information with NJEIS on how an individual family responded to the survey (Table 5).

To ensure NJEIS receives the representative sample, the following are implemented annually: 1. Distributing the survey with the impact questions on one form with both English and Spanish on each side so that all families in the sample receive the survey in both languages (Attachment 1 & 2). 2. Families who do not identify English as their primary language are identified through the demographic data and are provided with a translated version of the survey (if available); or 3. offers to conduct a phone survey utilizing Language Line. The breakdown of primary languages is documented in Table 4. Since FFY 2008, NJEIS has added an option for families to respond to the survey through the Internet using a unique child identification number (PLINK number). To improve response rates, the lead agency reviews and verifies family addresses with the service coordinators prior to the initial mailing. The response rate is reviewed and any race/county under-represented on the expected return rate are identified. Additional follow up surveys have been conducted to the under-represented race groups by using an independent consultant to contact families and offer assistance to complete the survey by mail or the internet. Once there is sufficient response, the survey is closed.

The NJEIS analyzed both the performance and response rate. The response rate increased in FFY 2019 from 16.92% to 17.4% and the number of returned surveys exceeds the minimum number required for an adequate confidence level based on established survey sample guidelines and remains representative of the population and adequately reflects the distribution by county.

Due to NJEIS' slippage in all indicator 4 sub-indicators in FFY 2015, NJEIS identified several factors that may have contributed to the performance. NJEIS uses the National Center for Special Education Accountability Monitoring (NCSEAM) survey with Rasch analysis. For some of the survey questions, there was a shift in the level of agreement (agree (4), strongly agree (5) and very strongly agree (6) or disagree (3), strongly disagree (2) and very strongly disagree (1)) reported by families. Also, there was a significant increase in the overall number of surveys completed and a significant increase in the number of survey responses completed by telephone interview. NJEIS dis-aggregated the data, discussing with staff who assisted in the process to determine if the method of survey completion could have been a factor in the performance. As a result of preliminary data analysis and discussions with stakeholders, the following decisions were made regarding the implementation of all future surveys:

1. Continue to analyze the shift in distribution in scores by questions and by county to look for patterns that may assist in the development of improvement activities; 2. Revise current survey protocols including development of standard scripts to be used when interviewing families to complete the survey; and 3. Contract with an independent research firm to make the calls to parents to ensure consistency in how the survey calls are conducted. In the following years, the performance in all three sub-indicators increased. The use of the of an outside research firm to interview families with a consistent established script, has increased NJEIS' confidence in the quality of the data. Therefore, NJEIS continued to institute the same procedures for all future surveys. In FFY 2017, NJEIS began emailing the non-responding families reminders with their personal PLINK password and a link to the on-line survey. Due to the change in the Early Intervention Management System database, NJEIS was able to collect families' email addresses. On October 22, 2020, 6,776 surveys were mailed to families. Cover letters as well as postage-paid business reply envelopes were included. The return deadline was November 30, 2020. Respondents were also given the option of completing an online version of the survey. In an effort to increase the response rate, over 2,500 non-respondent families were contacted via telephone to provide options for completing the survey. Additionally, reminder emails were sent to families who provided email addresses to NJEIS. NJEIS continues to explore ways to increase response rates.

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

If not, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

The NJEIS works to ensure the response data are representative of NJEIS demographics in the following ways:

1. Population Size by County Location

Since the NJEIS population varies widely for each county. A minimum and maximum sample size was set to ensure that the sample size from small and

densely populated counties was appropriately represented. Each year the sample pull is compared to the most recent December 1 Headcount. Adjustments are made to ensure the appropriate number of family responses by county and by race are received prior to closing the survey as depicted in Table 2 and Table 5.

2. Race by County Location

NJEIS not only wanted to examine the results for the overall population, but also wanted to understand the differences between key demographic subgroups within the population. In order to be certain to obtain a sample that is representative of the NJEIS population and based on analysis results from previous family surveys, NJEIS implemented the use of a county stratified random sampling without replacement, unequal allocation. As part of the sampling methodology and to decrease the Margin of Error (MOE), NJEIS annually over samples the African American/Not Hispanic (AA/NH) and Hispanic (H) families due to historically lower return rates than other race groups (White/Asian/American Indian/Hawaiian-Pacific Islander/Multi Race) (W/A/Al/Hi/PI/MULTI).

3. Confidentiality and Unbiased Analysis

Each year, families mail the completed survey using the postage paid return envelope directly to an outside contractor to analyze the survey results. Due to NJEIS' slippage in all three indicator 4 sub-indicators in FFY 2015, NJEIS identified several factors that may have contributed to the performance. One of the issues found in FFY 2015, was a significant increase in the overall number of surveys completed as well as a significant increase in the number of telephone survey interview responses completed by Regional Early Intervention Collaborative Family Support Coordinators. NJEIS disaggregated the data, discussing with staff who assisted in the family survey process to determine if the method of survey completion could have been a factor in the performance. As a result of preliminary data analysis and discussions with stakeholders, the following decisions were made regarding the implementation of future surveys:

- a. Continued to analyze the shift in distribution in scores by questions and by county to look for patterns that may assist in the development of improvement activities;
 - b. Revised current survey protocols including development of standard scripts to be used when interviewing families to complete the survey; and
 - c. Contracted with a research firm to make the calls to parents to ensure consistency in how the survey calls are conducted.
- NJEIS was pleased that the performance in all three sub-indicators increased significantly over the following years by utilizing these changes. The use of the of an outside research firm to interview families with a consistent established script, has increased NJEIS confidence in the quality of the data. Therefore, NJEIS continued to institute the same procedures for all future surveys.

4. Language and Accessibility

To ensure NJEIS receives the representative sample, the following are implemented annually:

- a. Distributing the survey with the impact questions on one form with English on one side and Spanish on the other side so that all families in the sample receive the survey in both languages (Attachment 1 and 2).
- b. Families who do not identify English as their primary language are identified through the demographic data and the NJEIS provides families with a translated version of the survey (if available); or
- c. Offer to conduct a phone survey with the family utilizing Language Line; and
- d. NJEIS has an option for families to respond to the survey through the Internet using a unique child identification number (PLINK number).

5. Additional Follow up of Non-Responders of Under-Represented Race Groups

The unique child identification PLINK number is documented on each survey to allow for demographic analysis. This enables the NJEIS to conduct follow-up activities to obtain a representative sample by race and county. The response rate is reviewed and any race/county under-represented on the expected return rate are identified as depicted in Table 5. Additional follow up surveys were conducted to the under-represented race groups by using an independent consultant to contact families and offer assistance to complete the survey by mail or the internet. Once there was a sufficient representative response up until the deadline of November 30, 2020, the survey was closed.

In FFY 2017, NJEIS began emailing reminders to non-responding families which included their personal PLINK password and a link to the on-line survey due to the change in the Early Intervention Management System database which has the capacity to store email addresses.

In FFY 2019, NJEIS instructed the consultant to send out additional scripted email reminders to the families who did not respond to the survey. This allowed NJEIS to target counties and races that were underrepresented in comparison to the Dec 1 Headcount population. Also, in an effort to increase the response rate, over 2,500 non-respondent families were contacted via telephone by the consultant agency to provide options for completing the survey.

At the close of the survey, NJEIS analyzed both the performance and response rate and the number of returned surveys exceeded the minimum number required for an adequate confidence level based on established survey sample guidelines and was closely representative of the population and adequately reflected the distribution by county between +/- 3.32% by county (Table 6) and +/-10% by race (Table 7) for the state.

On March 17, 2020, New Jersey Governor Murphy declared a state of emergency and issued a stay-at-home order due to surges of COVID-19 infections. In more typical times without the concern of COVID-19, NJEIS' additional strategies to ensure a representative response rate as referenced above, have been sufficient in obtaining a statistically sound representative demographic. However, due to the unexpected upheaval of COVID-19 that affected families' attitudes, experiences, financial, educational, social lifestyle, and mental and physical health, the NJEIS could not have predicted how difficult and time and resource intensive it would be to ensure a more representative sample as compared to previous years. There wasn't sufficient preparation time to institute additional changes prior to the survey response deadline to report in this FFY 2019 APR.

The NJEIS will need to reconvene the Steering Committee to set new targets for the FFY 2020 SPP/APR. This would be the appropriate time for the committee to recommend and discuss other strategies that could be performed in the anticipation that the pandemic continues in future years.

Include the State's analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.

For the fourteenth (14) year, NJEIS implemented the 22 item Impact on Family Scale (IFS) family survey developed and validated by the National Center for Special Education Accountability Monitoring (NCSEAM) and analyzed through the Rasch measurement framework.

While OSEP requires that the state's performance be reported as the "percent" of families who report that early intervention services helped them achieve specific outcomes deriving a percent from a continuous distribution requires application of a standard, or cut-score. The NJEIS elected to apply the Part C standards recommended by a nationally representative stakeholder group convened by NCSEAM.

The Impact on Family Scale (IFS) measures the extent to which early intervention helped families achieve positive outcomes specified in Indicator 4. The IFS was developed by NCSEAM to provide states with a valid and reliable instrument to measure (a) positive outcomes that families experience as a result of their participation in early intervention and (b) families' perceptions of the quality of early intervention services.

Data from the scale was analyzed through the Rasch measurement framework. For the IFS scale, the analysis produced a measure for each survey respondent. Individual measures can range from 0 to 1,000. For the IFS, each family's measure reflects the extent to which the family perceives that early intervention has helped them achieve positive family outcomes. The IFS measures of all respondents were averaged to yield a mean measure reflecting overall performance of the state in regard to the impact of early intervention on family outcomes. The mean measure on the IFS was 655. The standard deviation was 184, and the standard error of the mean was 5.4. The 95% confidence interval for the mean was 644.5 - 665.5. This means that there is a 95% likelihood that the true value of the mean is between these two values.

On October 22, 2020, 6,776 surveys were mailed to a sample of families served by NJEIS. Cover letters as well as postage paid business reply envelopes were included with the surveys.

The final cut off date for processing surveys was extended to November 30, 2020 to allow families additional time to respond. Respondents were also given the option of completing an online version of the survey. In an effort to increase the response rate, over 2,500 non-respondent families were contacted via telephone to provide options for completing the survey.

Of the 6,776 surveys distributed across twenty-one counties, 1,179 were returned for a response rate of 17.4%. The number of return surveys exceeds the minimum number required for an adequate confidence level based on established survey guidelines (e.g., <https://www.surveysystems.com/sscalc.htm>).

In total, 369 paper surveys and 810 web responses were collected.

There were 1,074 responses in English and 105 in Spanish.

The county return distribution for the state adequately represented the NJEIS county population. The range of variance between the return rate and the December 1, 2019 rate by county was -3.32% to +2.07%. The median percent difference was 0.2% as depicted in the Table 6.

Bergen county is slightly over represented by 2.07%. Essex county was slightly under represented by 3.32%.

The December 1, 2019 population by race/ethnicity matched the FFY 2019 survey race/ethnicity of respondents within -6 to 10% for all race/ethnicity groups as depicted in Table 7.

The NJEIS has historically observed an under-representation in survey response from the African American/Not Hispanic (AA/NH) and Hispanic (H) race/ethnicity groups and therefore has conducted surveys with an over-sampling of these two populations. In addition, secondary follow-up was attempted to families from these race/ethnicity groups that did not respond to the initial survey request.

The final county return race/ethnicity distribution for the state adequately represented the NJEIS county race/ethnicity population surveyed with a slight variation in the White/Not Hispanic and Hispanic population.

The range of variance between the return race/ethnicity population and the December 1 2019 race/ethnicity by county was -6% to +10%.

The Median difference between the race/ethnicity population and the returns was -0.43%.

The Caucasian/Not Hispanic population was over-represented by 10%, and the Hispanic population was under-represented by -6% as depicted in the Table 7.

The over and under-representation in race categories is much higher than in previous years. Due to the restrictions and quarantine that were caused by COVID-19 in calendar year 2020, NJEIS had limited time and resources to do additional follow-up to the targeted populations that were under-represented. Typically, NJEIS mails the survey in late September and provides 7-8 weeks for additional follow-up to non-responding families. This year, the survey was not mailed out until late October which only allowed for a 5 week turn-around in order to have analysis and data available for the FFY19 APR. There was not sufficient time and staff available to pursue more targeted follow-up to the Hispanic community.

Another issue which directly impacted our demographics this year, was the lack of response of families from Hispanic and African-American non-Hispanic communities when additional follow up of non-responders was pursued. Many families requested the consultants to cease sending emails and calling during the pandemic.

Although NJEIS offers families multiple methods of data collection: a postage paid paper survey; a web-based survey and; the option of completing the survey over the phone, many families did not respond to the additional follow-up. Many hypotheses can be made but without a thorough study, NJEIS can only make hypotheses and assumptions about the responses. These include: New Jersey has a visible digital divide across our state which made the electronic survey unavailable to some who could no longer go to libraries or schools, internet bandwidth access as all family members worked and schooled from home; families with school-age children needing to provide support in teaching and supervising siblings; families who lost jobs and had not been successful in obtaining unemployment. In addition, although tele-health EI was offered, approximately 4% of families decided to disenroll, 10% chose to have Public Expense only services and almost all families adjusted their IFSP services to some extent. NJEIS referral rates continued to decrease dramatically to 87% less than our average weekly referrals pre-COVID-19. NJEIS can speculate a multitude of other issues, finances, fears, emotions and struggles which made the NJEIS survey less a priority for families this year.

Due to the methodology in which the NJEIS administers the annual family survey, individual family responses are not identifiable back to the lead agency. The NJEIS steering committee's decision was based on assuring that families were able to answer the survey anonymously without influence in their response. However, every year the NJEIS receives a few personal responses and comments from families. There were a few families that commented that it was unfair to complete the survey since COVID restrictions. Families commented that prior to COVID, they were very satisfied with the staff and services they had received. Another family commented her displeasure of tele-health services and hoped for her in-home services to return once COVID restrictions were lifted. However, without a thorough study of these demographic groups on the effects of COVID-19 and their early intervention experience, NJEIS can only speculate that COVID-19 dramatically impacted the Family Outcomes results in FFY 2019 and most likely will continue in FFY 2020.

The FFY19 Performance by Race is described on Table 8.

The FFY19 Percent of Respondents Meeting or Exceeding each of the Standards for Indicator #4 by Race/Ethnicity groups is described on Table 9.

Provide additional information about this indicator (optional)

Survey responses were received from 1,179 families, representing all 21 counties and a 17.4% return rate (1179/6776).

The targets were not met for 4A, 4B and 4C and there was slippage in all three sub indicators. Specifically:

Performance decreased 4.3% in 4A from 75.38% in FFY 2018 to 71.08% in FFY 2019.

Performance decreased 3.15% in 4B from 71.68% in FFY 2018 to 68.53% in FFY 2019.

Performance decreased 3.44% in 4C from 86.05% in FFY 2018 to 82.61% in FFY 2019.

As reported under Slippage and Representativeness, NJEIS summarized the effects of COVID-19 on the FFY19 performance

On 3/17/20, NJ Governor Murphy declared a State of Emergency Quarantine due to surging COVID-19 infections. NJ was one of the first states with a rapid increase in COVID-19 infections during March-May 2020 and highest Infection Rates (IR) and number of deaths. The Department of Health (DOH) is the lead agency for the Part C program and as the public health crisis intensified, department resources were redirected to meet needs of the state's residents. Governor Murphy issued a "Stay at Home" order on 3/20/20 which affected the NJEIS direct service practitioners, service coordinators and lead agency staff. The NJEIS halted all early intervention in-person services effective 3/17/20 to reconfigure the EI system, revise procedures, trainings and billing system. Service coordinators were designated as essential personnel during the closure to assist families with adjusting their IFSP based on updated concerns, priorities and resources. The NJ Department of Education closed all schools on 3/16/20, resulting in remote instruction for all k-12 students and preschools and childcare closed under an executive order.

NJEIS identified families affected by the digital divide without access to equipment or internet. NJEIS quickly provided funding/equipment to implement a Tech Library for EI families. On 4/1/20, NJEIS re-opened with IFSP services being provided 100% through tele-health. In late June, the Governor approved childcare to re-open and NJEIS followed by resuming services within service provider locations beginning 7/1/20. Less than 1% of families received their services in these environments, however these families reported satisfaction with the availability of this option for in-person supports in controlled environments. NJ's COVID IR improved throughout the summer and on 9/1/20, NJEIS reinstated in-home services, while maintaining telehealth and center-based options. NJEIS provided safety training to all personnel and additional funding for PPE and supplies for families and staff for in-home services. Since allowing in-home services, 40-45% of IFSP services per week are being provided in-person and 60-55% remain via telehealth and 100% remote service coordination.

In general, the major factor in the slippage for Indicator 4 is likely attributed to the pandemic. The instability and uncertainty of the course of COVID -19 presented multiple challenges for families. The closure of childcare, schools and business, created new routines, concerns and priorities for families in the Part C program. NJEIS leadership stressed the importance of family decision making in the development of IFSPs and families made significant changes to their IFSPs. Prior to the shutdown, NJEIS had 15,153 families with active IFSPs which needed to be revised. Between March-April, the service coordinators logged 45,000 more hours of activity than previously logged. Overall, the program provided approximately 40% less services in April-June 2020 compared to the same time period the year before. DOH notes the reduction of services was due to family reasons brought on by numerous factors related to the pandemic.

Generally, the survey is distributed in the summer/fall. For FFY 2019, the distribution of the survey used to collect the data for Indicator 4 was delayed for a number of reasons due to COVID-19. The combination of remote work, delayed mailing of the surveys, delayed postal delivery to families, and other COVID related priorities resulted in less time for follow-up and analysis that is part of the state's process. In anticipation of a potential decreased response, NJEIS mailed out an additional 2,000 surveys to meet acceptable return rates and county representativeness. Upon analysis, NJEIS found certain counties, particularly in northern NJ, which had a higher IR had lower response for their county size. This was specifically found in Essex and Ocean counties. Both counties experienced 2 large surges in the virus IR and the Governor and Mayors reinstated mandatory quarantine in many towns and counties. NJEIS also found a direct correlation of increased IR of certain race categories and the decrease in representativeness with these same race categories of African American and Hispanic populations. Analysis of data by county identified a significant correlation between the counties most affected by the pandemic. The data identified a direct correlation between northern counties, who were the first affected and had the largest surges, also had the most slippage in all 3 sub-indicators. Many hypotheses can be made however, without a thorough study, NJEIS can only make hypotheses and assumptions about the reasons the response rate was lower as was the slippage in performance. These includes: NJ has a visible digital divide across our state which made the electronic survey unavailable to some who could no longer go to libraries or schools, internet bandwidth access as all family members worked and schooled from home; families with school-age children needing to provide support in teaching and supervising siblings; families who lost jobs and unsuccessful in obtaining unemployment. In addition, although tele-health EI was offered, approximately 4% of families decided to disenroll, 10% chose to have Public Expense only services and almost all families adjusted their IFSP services. NJEIS referral rates decreased dramatically to 87% less than our average weekly referrals pre-COVID-19. Also, a subset of families was not satisfied with telehealth services and were critical of the system for not providing in-home, in-person services earlier in the summer. During the survey process, the follow-up call staff reported some families requested NJEIS cease sending emails and calling during the pandemic. Due to the methodology in which the NJEIS administers the annual family survey, individual family responses are not identifiable back to the lead agency. The NJEIS steering committee's decision was based on assuring that families were able to answer the survey anonymously without influence in their response. However, every year the NJEIS receives a few personal responses and comments from families. There were a few families that commented that it was unfair to complete the survey since COVID restrictions have altered their perceptions. Families commented that prior to COVID, they were very satisfied with the staff and services. Another family commented her displeasure of tele-health services and hoped for her in-home services to return. However, without a thorough study of these demographic groups on the effects of COVID-19 and their early intervention experience, NJEIS can only speculate that COVID-19 dramatically impacted the Family Outcomes results in FFY 2019 and most likely will continue in FFY 2020. In January 2021, the DOH hired a full-time researcher to investigate the effects of COVID on the NJEIS system generally and to discern the variables that contributed to positive or negative outcomes for families and children. The NJEIS understands there are multitude of personal issues including finances, fear, emotions and struggles which may have made the NJEIS survey less of a priority and may have affected families' attitudes, experiences and response to the questionnaire. NJEIS anticipates this new staff member will be key in the work of data analyses and target setting that NJEIS will be undertaking in 2021.

4 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 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 2018 SPP/APR

The NJEIS works to ensure the response data are representative of NJEIS demographics in the following ways:

1. Population Size by County Location

Since the NJEIS population varies widely for each county. A minimum and maximum sample size was set to ensure that the sample size from small and densely populated counties was appropriately represented. Each year the sample pull is compared to the most recent December 1 Headcount. Adjustments are made to ensure the appropriate number of family responses by county and by race are received prior to closing the survey.

2. Race by County Location

NJEIS not only wanted to examine the results for the overall population, but also wanted to understand the differences between key demographic subgroups within the population. In order to be certain to obtain a sample that is representative of the NJEIS population and based on analysis results from previous family surveys, NJEIS implemented the use of a county stratified random sampling without replacement, unequal allocation. As part of the sampling methodology and to decrease the Margin of Error (MOE), NJEIS annually over samples the African American/Not Hispanic (AA/NH) and Hispanic (H) families due to historically lower return rates than other race groups (White/Asian/American Indian/Hawaiian-Pacific Islander/Multi Race) (W/A/Al/HI/PI/MULTI).

3. Confidentiality and Unbiased Analysis

Each year, families mail the completed survey using the postage paid return envelope directly to an outside contractor to analyze the survey results.

Due to NJEIS' slippage in all three indicator 4 sub-indicators in FFY 2015, NJEIS identified several factors that may have contributed to the performance. One of the issues found in FFY 2015, was a significant increase in the overall number of surveys completed as well as a significant increase in the number of telephone survey interview responses completed by Regional Early Intervention Collaborative Family Support Coordinators. NJEIS disaggregated the data, discussing with staff who assisted in the family survey process to determine if the method of survey completion could have been a factor in the performance. As a result of preliminary data analysis and discussions with stakeholders, the following decisions were made regarding the implementation of future surveys: a. Continued to analyze the shift in distribution in scores by questions and by county to look for patterns that may assist in the development of improvement activities; b. Revised current survey protocols including development of standard scripts to be used when interviewing families to complete the survey; and c. Contracted with a research firm to make the calls to parents to ensure consistency in how the survey calls are conducted. NJEIS was pleased that the performance in all three sub-indicators increased significantly the following FFY 2016. The use of the of an outside research firm to interview families with a consistent established script, has increased NJEIS confidence in the quality of the data. Therefore, NJEIS continued to institute the same procedures for all future surveys.

4. Language and Accessibility

To ensure NJEIS receives the representative sample, the following are implemented annually: a. Distributing the survey with the impact questions on one form with English on one side and Spanish on the other side so that all families in the sample receive the survey in both languages (Attachment 1). b. Families who do not identify English as their primary language are identified through the demographic data and the NJEIS provides families with a translated version of the survey (if available); or c. offers to conduct a phone survey with the family utilizing Language Line. Since FFY 2008, NJEIS has added an option for families to respond to the survey through the Internet using a unique child identification number (PLINK number).

5. Additional Follow up of Non-Responders of Under-Represented Race Groups

The unique child identification PLINK number is documented on each survey to allow for demographic analysis. This enables the NJEIS to conduct follow-up activities to obtain a representative sample by race and county. The response rate is reviewed and any race/county under-represented on the expected return rate are identified. Additional follow up surveys were conducted to the under-represented race groups by using an independent consultant to contact families and offer assistance to complete the survey by mail or the internet. Once there was a sufficient representative response up until the deadline of November 18, 2019, the survey was closed.

In FFY 2017, NJEIS began emailing reminders to non-responding families which included their personal PLINK password and a link to the on-line survey due to the change in the Early Intervention Management System database which has the capacity to store email addresses.

In FFY 2018, NJEIS instructed the consultant to send out 2 email reminders to the families who did not respond to the survey. This allowed NJEIS to target counties and races that were underrepresented in comparison to the Dec 1 Headcount population. Also, in an effort to increase the response rate, over 1,800 non-respondent families were contacted via telephone by the consultant agency to provide options for completing the survey.

At the close of the survey, NJEIS analyzed both the performance and response rate and the number of returned surveys exceeded the minimum number required for an adequate confidence level based on established survey sample guidelines and was significantly representative of the population and adequately reflected the distribution by county between +/- 4.48% by county and +/-4% by race for the state.

In addition, in January 2021, the DOH hired a full-time researcher to investigate the effects of the NJEIS system and to discern the variables that contributed to positive or negative outcomes for families and children. The new staff member will be essential as we move forward to the new SPP/APR and set targets for future years.

4 - OSEP Response

4 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 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 compared to national data. (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 and compare the results to the target and to national data. 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
2012	0.62%

FFY	2014	2015	2016	2017	2018
Target >=	0.65%	0.65%	0.66%	0.66%	0.67%
Data	0.70%	0.75%	0.88%	0.78%	0.81%

Targets

FFY	2019
Target >=	0.67%

Targets: Description of Stakeholder Input

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council (SICC) to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR). This FFY 2019 SPP/APR was developed with broad stakeholder input obtained at a January 22, 2021 Part C SICC meeting. This included review of data for fiscal year 2019 (July 1, 2019 - June 30, 2020). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2019. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). The SICC members certified the FFY 2019 SPP/APR as their annual report.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	740
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	99,459

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
740	99,459	0.81%	0.67%	0.74%	Met Target	No Slippage

Compare your results to the national data

When compared with FFY 2018, the FFY 2019 New Jersey state percentage of children birth to one year of 0.74% (740/99,459) decreased by 0.07% (0.74% - 0.81%).

The FFY 2019 national percentage of 1.37% (51,939/3,783,052) increased by 0.12% compared to FFY 2018 (1.37%-1.25%) .

Although both the national (-1.69%) and the New Jersey (-0.90%) birth to one census decreased, the federal number of birth to one children with IFSPs increased (+3,990 children) whereas the New Jersey birth to one children with IFSPs reflected the decrease (-76 children).

Therefore, the nation had a 8.32% increase in the number of children zero to one with an IFSP compared to the previous year whereas, the New Jersey number of children zero to one with an IFSP had a decrease of -9.31% compared to the previous year.

Provide additional information about this indicator (optional)

Although the FFY 2019 status of 0.74% is 0.07% lower than the FFY 2018 performance, NJEIS exceeded the target of 0.67% by 0.07% . In FFY 2019, 81% (17/21), seventeen of the twenty-one NJEIS counties met or exceeded the target of 0.67%.

The total number of referrals from July 1, 2019 through June 30, 2020 examined by age and eligibility outcomes indicates the following:

The total number of referrals of children, birth to age one year, received from July 1, 2019 through June 30, 2020 comprised 20% of the total number of referrals (3,840 out of a total of 19,226 referrals).

In FFY 2019, these 3,840 referrals to early intervention comprised 3.9% of the 99,585 live births (3,840/99,585) in 2019 as per the Centers for Disease Control and Prevention National Center for Health Statistics website (most current data as of January 21, 2021).

The ineligibility rate for children referred birth to age one was 34.56% in FFY 2019 compared to an overall ineligibility rate of 25.88% for children referred birth to age three.

From FFY 2017- FFY 2019, the following ineligibility rates have been recorded for children referred birth to one: 24.5%, 29.5% and 34.6% respectively.

Whereas the ineligibility rates from FFY 2017-2019 for children referred birth to age three were: 19.6%, 23.6% and 25.9% respectively.

Although New Jersey may receive referrals of children at an early age of birth to one, a high percentage of ineligibility has traditionally been observed.

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 compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

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

Measurement

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

Instructions

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

Describe the results of the calculations and compare the results to the target and to national data. 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
2012	3.22%

FFY	2014	2015	2016	2017	2018
Target >=	3.38%	3.40%	3.42%	3.43%	3.45%
Data	3.61%	3.98%	4.38%	4.40%	4.61%

Targets

FFY	2019
Target >=	3.45%

Targets: Description of Stakeholder Input

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council (SICC) to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR). This FFY 2019 SPP/APR was developed with broad stakeholder input obtained at a January 22, 2021 Part C SICC meeting. This included review of data for fiscal year 2019 (July 1, 2019 - June 30, 2020). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2019. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). The SICC members certified the FFY 2019 SPP/APR as their annual report.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	15,132
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	304,425

FFY 2019 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
15,132	304,425	4.61%	3.45%	4.97%	Met Target	No Slippage

Compare your results to the national data

For FFY 2019, New Jersey served 4.97% (15,132/304,425) of infants and toddlers, birth to three, with IFSPs, compared to the national average of 3.70% (427,234/11,534,695).

When compared to FFY 2018, the percentage of infants, birth to three, with IFSPs in New Jersey increased by 0.36% (4.97%-4.61) while the national percentage increased 0.22% (3.70%-3.48%).

Although both the national and New Jersey birth to three census decreased, New Jersey's number of birth to three children with IFSPs increased (+916 children) and the national birth to three children with IFSPs increased (+17,919). Although New Jersey and the nation had a decrease in populations, both New Jersey and the nation served a higher percentage of the 0-3 population compared to last year. More specifically, New Jersey had a +6.44%

increase in the number of children zero to three with an IFSP compared to the previous year whereas, the national number of children zero to three with an IFSP had an increase of +4.38% compared to the previous year.

Provide additional information about this indicator (optional)

New Jersey exceeded the target of 3.45% as set by stakeholders for this reporting period and 100% of the twenty-one NJEIS counties met or exceeded the target of 3.45%.

The number of children aged zero to three being referred to New Jersey early intervention continued to increase as documented in last three FFY years 2016-2018: 2016=22,427, 2017=19,637 and 2018=22,610 respectively.

However, the total number of referrals for children age birth to three, received in FFY 2019 (July 1, 2019 through June 30, 2020) slightly decreased to 19,226 with an average 25.88% ineligibility rate (4,976/19,226). The FFY 2019 decrease in referrals is attributed to the COVID-19 pandemic. During the months prior to March 2020, NJEIS' weekly average of referrals was 498. During the months of March-April 2020 the NJEIS' weekly average of referrals was 117 with an all time low of 71 per week. Toward the end of FFY 2019 of May-June 2020, NJEIS' weekly average referrals was 267.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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
2012	98.21%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.26%	98.61%	99.76%	99.71%	99.69%

Targets

FFY	2019
Target	100%

FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
287	320	99.69%	100%	99.69%	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.

32

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

29

State monitoring

Describe the method used to select EIS programs for monitoring.

The NJEIS continues to report data which is collected from the NJEIS state data system and reflect actual days from the date of referral to the date of the initial IFSP meeting for every eligible child for whom an initial IFSP meeting was required to be conducted.

The FFY 2019 timely initial IFSP monitoring used the statewide database to determine there were 3,685 eligible infants and toddlers who should have had and did have a timely IFSP meeting. To ensure a representative pool, NJEIS pulls a random selection of child records within the quarter verifying there is a 95% confidence level and +/- 5 confidence interval to ensure the child records chosen, appropriately represent the state population for the entire reporting year. The NJEIS monitoring team randomly selected 320 records to review and drill down through a data desk audit inquiry process of all actual service claim data for the period. The data represents all active child records for the months of August, September, and October 2019 for all the twenty-one counties in New Jersey. To ensure the data described below, accurately reflects data for infants and toddlers for the full reporting period, NJEIS compares the pool of children to the statewide December 1 child count by county size to ensure a representative pool of children for the entire reporting year of data.

Data Desk Audit, Inquiry and Record Review: Monitoring included inquiry where the monitoring team conducted a drill down to obtain child specific information, reasons for delays and verification of an initial IFSP meeting, although late. The inquiry required the Service Coordination Units (SCU), Regional Early Intervention Collaboratives (REIC) and Early Intervention Program Targeted Evaluation Teams (TETs) to submit copies of child progress notes, and parent signed service encounter verification logs as verification of the data in the statewide database and claims submission. The Lead Agency monitoring team used all the information received and reviewed service claim data to determine where in the process the delay occurred and who was responsible.

Of the 3,685 eligible children for whom an initial IFSP meeting was required to be conducted during the three months of inquiry, child records from a random selection of 320 children were monitored. Of the 320 children reviewed, 287 of the IFSPs were compliant with the 45-calendar day requirement, including 32 initial IFSP meetings which occurred however, were delayed because of family reasons. The 32 family-initiated reasons for delay were included in the calculations and documented in service coordination notes and the NJEIS data system. Family reasons include child illness or hospitalization, family response time, missed scheduled appointments and family requested delays related to the parent's schedule. There was one (1) child who received their initial IFSP at day 50, which occurred 5 days late (Prong 1). The reason for the delay was due to the Targeted Evaluation Team not notifying the service coordinator of the child's eligibility timely.

Total Number of eligible Children for Quarter of August-October 2019= 3,685

Number of Records Monitored (Denominator) =320

Timely Initial IFSPs =287

Family Reason & Extreme weather =32

Untimely IFSPs =1

State Compliance = ((287 Timely + 32 Family Reason)/320) =99.69%

The one (1) initial IFSP meeting delayed for a systems reason was due to the Sunny Days Targeted Evaluation Team's (TET) delay in notifying the System Point of Entry Service Coordination Unit of the child's eligibility. This caused the family's IFSP to be five (5) days delayed. The agency was given a finding on July 20, 2020. NJEIS verified the one (1) child's IFSP meeting was held although late. The meeting occurred and the IFSP was signed on day 50 (5 days late) (prong 1). The TET involved was required to provide and review their current policies and procedures on July 20, 2020. Once the revised policies and procedures were reviewed by the NJEIS monitoring team, Sunny Days TET conducted an in-service training with staff. NJEIS then reviewed additional subsequent data in the months of July and August 2020. On August 13, 2020, NJEIS found no systemic issues as the agency met 100% compliance for this indicator (prong 2) therefore, the agency's finding was closed on August 13, 2020, as correction was verified for both prongs 1 and 2 as required.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2018

Since NJEIS did not issue any findings in FFY 2018 although did not obtain 100% statewide compliance, the 2 eMaps sections, Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements; and Describe how the State verified that each individual case of noncompliance was corrected, are not available for the state to respond.

Note: Therefore, NJEIS is responding to Correction of Finding of Noncompliance Identified in FFY 2018 in this section.

FFY 2018 Findings of Noncompliance Verified as Corrected

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

In FFY 2018, there was one (1) IFSP meeting that was two (2) days late in Union county. The reason for delay was due to the Regional Early Intervention Collaborative (REIC) Service Coordinator's delay in submitting the referral to the Targeted Evaluation Team (TET) in a timely manner. NJEIS verified the one (1) child's IFSP meeting was held although two days late as the meeting occurred and the IFSP was signed on day 47 (prong 1). The REIC involved was required to provide and review their current policies and procedures and conduct training with staff. NJEIS reviewed their existing procedures and verified the policies and procedures were compliant with all regulatory requirements. NJEIS therefore, reviewed additional subsequent data and found no systemic issues as the agency met 100% compliance for this indicator with the subsequent current data pull (prong 2) prior to the final summary report being submitted. Therefore, the agency's finding was verified as corrected for both prongs 1 and 2 as per OSEP-09-02 memo prior to the NJEIS Monitoring Results Summary and therefore, no finding was issued and none reported.

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

There was one (1) IFSP meeting that was 2 days late in Union county. The monitoring team drilled down to determine the reason for delay. The Regional Early Intervention Collaborative (REIC) Service Coordinator caused a delay in submitting the referral to the Targeted Evaluation Team (TET) timely. NJEIS verified the one (1) child's IFSP meeting occurred and the IFSP was signed although at day 47 (2 days late). The NJEIS reviewed additional subsequent data and found no systemic issues as the agency met 100% compliance for this indicator with the current data pull. Therefore, the agency's finding was verified as corrected for both prongs 1 and 2 as per OSEP-09-02 memo prior to the NJEIS Monitoring Results Summary was mailed.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

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 SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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
2011	98.10%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2019
Target	100%

FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
306	306	100.00%	100%	100.00%	Met 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

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

State monitoring

Describe the method used to select EIS programs for monitoring.

The NJEIS continues to report data which is collected from the NJEIS state data system and reflects actual days from the date of birth to the date of transition planning activities during which the NJEIS 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 child's third birthday. NJEIS reported for all twenty-one counties, utilizing the NJEIS data system to determine the number of children that turned age three in a quarter of FFY19 for the months of December 2019, January, and February 2020. The NJEIS data system identified 2,359 children turned age three during this period. To ensure a representative pool, NJEIS pulled a random selection of child records within the quarter verifying there was a 95% confidence level and +/- 5 confidence interval to ensure the child records chosen, appropriately represent the state population for the entire reporting year. Therefore, the FFY 2019 transition monitoring used the statewide database to determine there were 2,359 eligible infants and toddlers who turned three.

The NJEIS monitoring team randomly selected 306 records to review and drill down through a data desk audit inquiry process of all actual service claim data for the period. The data represents all active child records for the months of December 2019, January, and February 2020 for all twenty-one counties in New Jersey. To ensure the data described below accurately reflected data for infants and toddlers who turned three for the full reporting period, NJEIS compared the pool of children to the statewide December 1 child count by county size to ensure a representative pool of children for the entire reporting year of data.

Data Desk Audit, Inquiry and Record Review: The monitoring team first confirmed the child's date of birth was accurate in the NJEIS state database. Based on the child's date of birth, an inquiry was prepared for the agency to identify possible non-compliance. Transition data were monitored through the annual desk audit record review process. Data reported on the desk audit is verified against what is in the child's record (e.g., NJEIS IFSP Review Transition Information Page). The monitoring team implemented inquiry which drilled down to obtain child specific information, reasons for delays and verification of transition steps, although late. The Service Coordination Units were required to submit copies of child progress notes, IFSPs and service encounter verification logs. The monitoring team used all the information received to determine where in the process the delay occurred and who was responsible.

Provide additional information about this indicator (optional)

In summary, the NJEIS Total Number of Eligible Children who turned 3 for the Quarter of December 2019, January, and February 2020= 2,359 children. NJEIS Monitored 306 child records. NJEIS found that all 306 records verified there were Transition Steps and Services documented between greater than or equal to 90 days to less than or equal to 9 months prior to the children's third birthday. Therefore, the State Compliance= 306/306=100%. NJEIS achieved 100% compliance on 306/306 child records. NJEIS has continued 100% compliance on this indicator from FFY 2012-FFY 2019.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY Required Actions

None

8A - OSEP Response

8A - Required Actions

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:

- 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;
- Notified (consistent with any opt-out policy adopted by the State) the SEA and the 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
- 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

- 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.
- 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.
- 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 timely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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
2012	90.24%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	95.74%	96.84%	97.30%	95.55%	96.36%

Targets

FFY	2019
Target	100%

FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
270	306	96.36%	100%	100.00%	Met Target	No Slippage

Number of parents who opted out

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

36

Describe the method used to collect these data

The NJEIS continues to report data which is collected from the NJEIS state data system and reflects actual days from the date of birth to the date of transition planning activities including for whom and when the NJEIS Notified, consistent with the NJEIS opt-out policy, 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 children potentially eligible for Part B preschool services. NJEIS reported for all twenty-one counties, utilizing the NJEIS data system to determine the number of children that turned age three in a quarter of FFY19 for the months of December 2019, January, and February 2020. The NJEIS data system identified 2,359 children turned age three during this period. To ensure a representative pool of records to monitor, NJEIS pulled a random selection of child records within the quarter verifying there was a 95% confidence level and +/- 5 confidence interval to ensure the child records chosen, appropriately represent the state population for the entire reporting year. Therefore, the FFY 2019 transition monitoring used the statewide database to determine there were 2,359 eligible infants and toddlers who turned three. The NJEIS monitoring team then randomly selected 306 records to review and drill down through a data desk audit inquiry process of all actual Notification document data for the period. To ensure the data described below, accurately reflected data for infants and toddlers who turned three for the full reporting period, NJEIS compared the pool of children to the statewide December 1 child count by county size to ensure a representative pool of children for the entire reporting year of data.

The NJEIS methodology for monitoring 8B notification to the SEA and LEA consists of reviewing data using the annual desk audit record review process. Data reported on the desk audit is verified against what was in the child's record (e.g., NJEIS IFSP Review Transition Information Page, progress notes, opt out letters and notification/identification letters). A data desk audit was conducted on one quarter of FFY 2019 for the months of December 2019, January and February 2020 that identified 2,359 children that turned age three. Of the 2,359 children, a random selection of 306 child records were monitored. Of the 306 children, thirty-six (36) families opted out of SEA/LEA notification therefore, changing the denominator to 270 (306-36=270). The LEA Notification is the responsibility of service coordination units. The SEA Notification is the responsibility of the Lead Agency. The monitoring team first confirmed the child's date of birth was accurate in the NJEIS database. Based on the child's date of birth, an inquiry was prepared and forwarded to the appropriate county to address possible non-compliance. The monitoring team implemented inquiry which drilled down to obtain child specific information, reasons for delays and verification of transition notice, although late. The Service Coordination Units were required to submit copies of child progress notes, IFSPs, service encounter verification logs, signed opt out forms and LEA notification letters. The monitoring team verified the Lead Agency's monthly reporting submission of SEA Notification to the NJ Department of Education. The monitoring team used all the information received to determine if and where in the process a delay occurred and who was responsible. Of the 306 child records reviewed, 36 families' records recorded an opt-out option and the remaining 270 records documented Notification was submitted to both the SEA and the LEA at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services which documents 100% compliance for LEA and SEA Notification.

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.

NJEIS reported for all twenty-one counties, utilizing the NJEIS data system to determine the number of children that turned age three in a quarter of FFY19 for the months of December 2019, January, and February 2020. The NJEIS data system identified 2,359 children turned age three during this period. To ensure a representative pool of records to monitor, NJEIS pulled a random selection of child records within the quarter verifying there was a 95% confidence level and +/- 5 confidence interval to ensure the child records chosen, appropriately represent the state population for the entire reporting year. Therefore, the FFY 2019 transition monitoring used the statewide database to determine there were 2,359 eligible infants and toddlers who turned three. The NJEIS monitoring team then randomly selected 306 records to review and drill down through a data desk audit inquiry process of all actual Notification document data for the period. To ensure the data described below, accurately reflected data for infants and toddlers who turned three for the full reporting period, NJEIS compared the pool of children to the statewide December 1 child count by county size to ensure a representative pool of children for the entire reporting year of data.

Provide additional information about this indicator (optional)

In summary, the NJEIS Total Number of eligible Children who turned 3 for the Quarter of December 2019, January, and February 2020= 2,359 children. NJEIS Monitored 306 child records. NJEIS verified 36 families Opted out of Notification. NJEIS verified that all remaining 270 child records verified Notification to both the LEA and SEA at least 90 days prior to the child's third birthday for children potentially eligible for Part B preschool services.

Therefore, the State Compliance= 270/270=100%. DOH sent 100% (270/270) of notifications that were required (consistent with any opt-out policy adopted by the state) directly to the SEA at least 90 days prior to toddlers with disabilities turning three in December 2019, January, and February 2020. NJEIS service coordination achieved 100% compliance based on 270/270 records of notification that were required sent (consistent with any opt-out policy adopted by the state) to the LEA at least 90 days prior to toddlers with disabilities turning three (December 2019-February 2020).

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

Based on FFY 2018 data, six (6) agencies were found to have noncompliance for 8B: Atlantic SCU, Middlesex SCU, Monmouth SCU, Ocean SCU, Passaic SCU and Sussex SCU. The six agencies were each given a finding issued on October 2, 2019. NJEIS required the agencies to develop and/or revised current procedures regarding children who enter NJEIS less than 90 days but before 45 days prior to their third birthday. Once reviewed, the agencies were required to re-train all staff and provide verification and acknowledgment of their training and understanding of the requirements. Additionally, one of the agencies needed a Corrective Action Plan to address concerns including: Infrastructure/Staffing; Provision of training; and the Provision of Technical Assistance regarding LEA Notification and the state's Opt-Out policy. To verify the agencies with previous noncompliance were now correctly implementing the regulatory requirements for Transition Notification, NJEIS reviewed subsequent data and verified each of the six (6) agencies had met 100% correction of the noncompliance. NJEIS accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, policy and procedure review and record review. Activities for documentation and verification of the correction include review of updated/revised procedures; updated data from the database; review of progress notes and IFSPs from child records; verification of claims and service authorization data.

In Summary, NJEIS: Identified the responsible agencies, their percentage of noncompliance in each county and determined reasons for delay (root causes). NJEIS reviewed each agencies' policy and procedure revisions and ensured that each was correctly implementing the specific regulatory requirements. Once each agency provided required policy and procedure in-service training, NJEIS reviewed updated subsequent data based on a review and verification of timely transition notification events. These reviews continued until the agency was operating at 100% compliance for this indicator. Each of the six agencies verified correction of both prong 1 and 2 and NJEIS reviewed subsequent updated data during the months of November 2019 through April 2020. Atlantic, Middlesex, Monmouth, Ocean and Sussex SCUs verified 100% correction by March 2020 and were closed as of March 13, 2020. Passaic SCU verified correction in April 2020 and was closed as of April 28, 2020 after correction of both prongs was verified in accordance with federal requirements.

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

The comprehensive process NJEIS used to verify correction that each individual case of noncompliance was corrected is through a data drill down to the child-specific level. In FFY 2018, there were eight (8) children who had untimely notification to the LEA. Through the data drill down, the eight (8) children who were identified, were no longer in the jurisdiction of NJEIS (prong 1) at the time of the inquiry however, notification to the SEA occurred timely by the lead agency. Subsequent data were reviewed to verify timely notification and their monthly performance was used to track and verify correction of all noncompliance. Activities for documentation and verification of the correction include updated data from the database; review of progress notes and IFSPs from child records; verification of claims and service authorization data. Once the agency was operating at 100% compliance for this indicator and both prongs were verified, the finding was closed. In summary, NJEIS has accounted for all individual instances of non-compliance identified through the NJEIS database and verified the notification occurred although untimely unless the child was no longer in the jurisdiction of NJEIS as described in the FFY 2018 APR. The DOH confirmed that the eight incidences of noncompliance from FFY18 were provided notification to the SEA, consistent with the NJEIS opt-out policy and were provided at least 90 days prior to the toddlers third birthday for toddler potentially eligible for Part B preschool services consistent with OSEP memo 09-02 and as verified by the monitoring team (prong 1). However, Notification to the LEA where the toddler resides, was not able to be provided as the SCU documented the families were no longer in the jurisdiction of NJEIS at the time of the finding (prong 1). In summary, there were eight (8) children in FFY 2018 who were notified to the SEA in a timely manner but did not have timely transition notification to the LEA and however, were no longer in the jurisdiction of NJEIS.

Correction of Findings of Noncompliance Identified Prior to FFY 2018

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8B - Prior FFY Required Actions

None

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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
2013	93.38%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	95.94%	99.27%	99.66%	100.00%	99.47%

Targets

FFY	2019
Target	100%

FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
208	306	99.47%	100%	97.18%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

The NJEIS performance for this indicator showed slippage of 2.29% from 99.47% in FFY 2018 to 97.18% in FFY 2019. The slippage was due to 7 children who did not receive a timely TPC nor had documentation of declining the TPC. The slippage can be attributed to the following reasons and in more detail below: Lack of training for the service coordinators regarding late referrals of children entering early intervention; Lack of time management skills of several service coordinators; Lack of detailed documentation by the service coordinator; and inability to coordinate a meeting date between the service coordinator, LEA representatives with the family's schedule. Although the service coordinators met with families and discussed transition, there was no documentation of a formal invite to convene a TPC for five (5) families. This was an issue with Hudson SCU, Morris SUC and Passaic SCU. One (1) family did not move forward with the TPC process due to a late referral and the newly hired service coordinator did not fully understand the requirements of offering a TPC for the family. This was an issue with Monmouth SCU. One (1) TPC was delayed 62 days due to a service coordinator's lack of time management and poor documentation. This was an issue with Passaic SCU.

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.

58

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.

33

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

State monitoring

Describe the method used to select EIS programs for monitoring.

NJEIS reported for all twenty-one counties, utilizing the NJEIS data system to determine the number of children that turned age three in a quarter of FFY19 for the months of December 2019, January, and February 2020. The NJEIS data system identified 2,359 children turned age three during this period. To ensure a representative pool of records to monitor, NJEIS pulled a random selection of child records within the quarter verifying there was a 95% confidence level and +/- 5 confidence interval to ensure the child records chosen, appropriately represented the state population for the entire reporting year. Therefore, the FFY 2019 transition monitoring used the statewide database to determine there were 2,359 eligible infants and toddlers who turned three. The NJEIS monitoring team then randomly selected 306 records to review and drill down through a data desk audit inquiry process of all actual Transition Planning Conferences documented for the period. To ensure the data described below, accurately reflected data for infants and toddlers who turned three for the full reporting period, NJEIS compared the pool of children to the statewide December 1 Headcount by county size to ensure a representative pool of children for the entire reporting year of data.

The 306 records monitored for 8C Transition Planning Conference (TPC) were analyzed through the NJEIS database and annual desk audit record review process. The NJEIS used two sources of data from the database: (1) date of the TPC obtained from the team page signed by the parent; and (2) date of the TPC recorded from the service coordinator verification log. Based on these dates, and the child's date of birth, an inquiry was prepared and forwarded to the appropriate county to review possible non-compliance. The monitoring team confirmed this data through desk audit analysis. The monitoring team conducted a drill down to obtain child specific information, reasons for delays and verification of a transition planning conference, although late. Data reported on the desk audit is verified against what is in the child's record (e.g., NJEIS IFSP Review Transition Information and Team pages, progress notes, service encounter verification; service authorizations and TPC invitation letter/emails). The Service Coordination Units were required to submit copies of child progress notes, TPC and LEA notification letters, IFSPs, and service encounter verification logs. The monitoring team used all the information received and reviewed service claim data to determine where in the process the delay occurred and who was responsible.

Provide additional information about this indicator (optional)

In summary, the NJEIS Total Number of eligible Children who turned 3 for the Quarter of December 2019, January, and February 2020= 2,359 children. NJEIS Monitored 306 child records. NJEIS verified 58 families declined a Transition Planning Conference (TPC) and 248 families required a TPC. NJEIS verified that 208 child records verified having conducted a timely Transition Planning Conference 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 child's third birthday for toddlers potentially eligible for Part B preschool services. NJEIS verified there were 33 families which documented the TPC was delayed due to an exception family reason. However, NJEIS verified there were 7 families that did not receive a TPC in a timely manner these reasons included: Lack of training; Lack of time management skills; Lack of

detailed documentation; and inability to coordinate a meeting date between the service coordinator, LEA representatives and the family's schedule. The State Compliance= (208 timely TPC+33 Family reason)/(306 child records-58 family declines). Therefore, 241/248=97.18% of all children exiting Part C, received timely transition planning to support their transition to preschool and other appropriate community services by their third birthday including a transition conference within the required timeline. The numerator and denominator do not include the 58 families who did not provide approval to conduct a transition planning conference. Of the 306 children, 208 were timely and 33 were delayed due to family reasons. The 33 family-initiated reasons were included in the calculation and documented in service coordinator notes. Family reasons included: family vacations; child illness or hospitalization; family response time; family not keeping scheduled appointments and family requested delays. The NJEIS performance for this indicator showed slippage of 2.29% from 99.47% in FFY 2018 to 97.18% in FFY 2019. The slippage was due to 7 children who did not receive a timely TPC nor had documentation of declining the TPC. The slippage can be attributed to the following specific reasons below: Lack of training for the service coordinators regarding late referrals of children entering early intervention; Lack of time management skills of several service coordinators; Lack of detailed documentation by the service coordinator; and inability to coordinate a meeting date between the service coordinator, LEA representatives and the family's schedule. The seven (7) children who did not have a timely transition planning conference were from the following four (4) county service coordination units: Hudson, Monmouth, Morris, and Passaic SCUs. Although the service coordinators met with families and discussed transition, there was no documentation of a formal invite to convene a TCP for five of the seven families. This was an issue with Hudson SCU, Morris SUC and Passaic SCU. One of the seven families did not move forward with the TPC process due to a late referral and the newly hired service coordinator did not fully understand the requirements of offering a TPC the family. This was an issue with Monmouth SCU. One of the seven families had a TPC that was delayed 62 days due to a service coordinator's lack of time management and poor documentation. This was an issue with Passaic SCU. Therefore, of the seven (7) children, one (1) of the children had their TPC although it was 62 days late; and six (6) of the children were no longer in the jurisdiction of NJEIS (prong 1) at the time of the inquiry. Therefore, all 4 agencies and seven (7) children met the requirements of prong 1.

NJEIS ensured that each agency was correctly implementing the specific regulatory requirements (prong 2) and that each child received a Transition Planning Conference unless the child was no longer in the jurisdiction of NJEIS (prong 1). Upon the monitoring of these prongs and the additional subsequent data pull, four findings were issued to: Hudson SCU, Monmouth SCU, Morris SCU and Passaic SCU. To ensure the agencies were correctly implementing the regulatory requirements, the NJEIS reviewed their current policies and procedures. As a result of the review, the agencies were required to develop/revise the following procedures: Transition procedures on all children exiting early intervention; Transition Procedures of children entering the EI system <30 months of age; Transition Planning tracking procedures; and Transition Supervision Plans for service coordination Unit Coordinator managers. Once the agencies made the appropriate revisions to their policies and procedures, the NJEIS reviewed the agencies' infrastructure, staffing and provision of training and technical assistance. As a result of the review, NJEIS required the identified agencies to provide additional targeted Transition training to staff; review newly revised policies and procedures with all staff; continue to address Transition requirements, procedures and required documentation at monthly staff meetings; and required supervisors to administer additional direct supervision, internal monthly chart audits and observation of staff upon the additional training. In addition, one agency, Passaic SCU, who continually has difficulty in transition issues, was required to collaborate with the Northeast Regional Training and Technical Assistance Coordinator to provide additional targeted training and technical assistance. Transition activities are formally an Improvement Activity of the Northeast Regional Early Intervention Collaborative's Community Impressions Plan and the regional office will continue to provide training, support and technical assistance to Passaic SCU and inform the lead agency on Passaic SCU's progress in this area. Upon the agency providing the additional updated training and technical assistance for staff, the NJEIS monitoring team pulled current data of subsequent children who would be turning three to verify the agencies were implementing the correct policies and procedures (prong 2). The NJEIS reviewed additional monthly data to verify procedures have been implemented and effective with SCU staff and their TPC compliance performance each month until the agency verified 100% compliance. Once all prongs have been verified as corrected, the agency's finding is closed. The agencies have until October 1, 2021 to verify 100% correction. As of 2/1/21, three (3) of the four findings have verified 100% correction of both prongs and were closed. Monmouth and Morris SCU's findings were closed when NJEIS verified 100% compliance on January 8, 2021. Hudson SCU's finding was closed when NJEIS verified 100% compliance on January 15, 2021. One agency, Passaic SCU, continues to show progress in correction and has until October 1, 2021 to verify 100% correction.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

Based on FFY 2018 data as reported in the FFY 2018 APR, NJEIS' compliance was 99.47% (189/190) due to one child who did not have their TPC in a timely manner. The NJEIS identified Passaic SCU as the responsible agency, and they were issued a finding on October 2, 2019. The NJEIS determined their percentage of noncompliance and reasons for delay (root causes) and required review of their policies, procedures and practices which may have contributed to the reasons for delays. As part of the corrective action plan, NJEIS required the agency to establish and/or revise appropriate policies, procedures and/or practices and then provide mandatory in-service training to all staff (prong 2). Once completed, NJEIS reviewed subsequent data, tracked, and verified monthly correction of the noncompliance. Activities for documentation and verification of the correction include review of updated data from the database, review of progress notes and IFSPs from child records, verification of claims and service authorization data. These monthly reviews continued until the agency was operating at 100% compliance for this indicator. The agency verified 100% correction of subsequent data in the month of March 2020 which ensured that Passaic SCU was correctly implementing the specific regulatory requirements at which point the finding was closed (prong 2).

In summary, based on FFY 2018 data, one (1) finding was issued. The agency revised/developed policies and procedures that were reviewed by NJEIS. NJEIS reviewed subsequent periodic data, tracked, and verified correction of the non-compliance. The finding was closed timely on March 13, 2020, after correction of both prongs was verified as 100% compliant in accordance with federal requirements.

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

The process NJEIS used to verify correction is comprehensive with data drill down to the child specific level. NJEIS has accounted for all instances of non-compliance identified through the NJEIS database, desk inquiry, and record review. In FFY 2018, NJEIS found that 99.47% (189/190) of toddlers with disabilities exiting Part C had a transition planning 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. The NJEIS confirmed there was one child that the transition planning conference was not held at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday. The TPC did not occur in a timely manner as the child was no longer in the jurisdiction of NJEIS at the time of the finding, consistent with OSEP memo 09-02 (prong 1).

Correction of Findings of Noncompliance Identified Prior to FFY 2018

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8C - Prior FFY Required Actions

None

8C - OSEP Response

8C - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

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 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 EDFacts 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.

NJEIS uses the Part C Due Process Hearing procedures in accordance to 34 CFR §303.435-§303.438. These procedures do not include resolution sessions.

9 - Prior FFY Required Actions

None

9 - OSEP Response

This Indicator is not applicable to the State.

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/04/2020	2.1 Mediations held	0
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/04/2020	2.1.a.i Mediations agreements related to due process complaints	0
SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/04/2020	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council (SICC) to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR). This FFY 2019 SPP/APR was developed with broad stakeholder input obtained at a January 22, 2021 Part C SICC meeting. This included review of data for fiscal year 2019 (July 1, 2019 - June 30, 2020). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2019. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). The SICC members certified the FFY 2019 SPP/APR as their annual report.

Targets were not set for this indicator because the total number of mediations received in FFY 2019 (2019-2020) was zero (0).

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2014	2015	2016	2017	2018
Target>=					
Data		100.00%	100.00%	100.00%	

Targets

FFY	2019
Target>=	

FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

No Mediations or Due Process complaints were received in FFY 2019 (2019-2020).

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2019. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Lead Agency Director

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

Name:

Susan Evans

Title:

Part C Coordinator

Email:

susan.evans@doh.nj.gov

Phone:

606777-7734

Submitted on:

04/27/21 3:48:12 PM