

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2023**

Florida



**PART C DUE
February 3, 2025**

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The Florida Department of Health (FDOH) is the lead agency for Part C of the Individuals with Disabilities Education Act (IDEA) in Florida. Within FDOH, the Division of Children's Medical Services (CMS), Bureau of Early Steps and Newborn Screening is responsible for the program oversight, which includes, but is not limited to: the development and implementation of the state policies that are consistent with Part C of IDEA regulations, state law and agency policies and procedures; oversight of the dispute resolution system; programmatic and contract monitoring of Local Early Steps Programs (local programs); continuous improvement process; local determinations process; public reporting; development and implementation of statewide personnel standards; a professional development system; federal reporting; federal grant management; and fiscal oversight and accountability.

Structure

The Early Steps State Office funds 30 positions through the Part C grant: Program Administrator, who is the designated Part C Coordinator; a Part C Operations Manager and four unit supervisors; programmatic staff, who provide program consultation and technical assistance for the local programs; budgetary and contract management staff; data analysts; and a portion of four positions within FDOH who support grant activities.

The Early Steps Program is administered throughout the state in 15 geographic regions through contracts with 13 organizations. The local programs determine individual eligibility based on the state criteria by evaluating or assessing all referred infants and toddlers and providing direct early intervention services for eligible infants and toddlers by working with internal and community service providers, and other community resources.

Additional information related to data collection and reporting

Florida continues to enhance the current legacy data system, including adding new codes, removing obsolete codes, and clarifying code definitions. In FY 2021-2022, FDOH reviewed and redesigned a multi-year timeline to successfully develop and implement a new administrative data system. In May 2022, a solicitation of quotes for the implementation of a new Early Steps Data System was initiated. In August 2022, FDOH awarded the contract to a vendor to develop the new data system. The first phase of development launched in December 2022, and the program anticipates a go-live date summer 2025.

General Supervision System

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

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

Florida uses a competitive procurement process and contracts with the local programs who are responsible for service provision. Due to the service driven nature of the contracts, FDOH has determined these to be subrecipient contracts and not vendor contracts. It is important to note that the FDOH does not consider this to be a subgrant as the Early Steps State Office provides general oversight of the program and FDOH is not acting as a pass-through agency.

State-Specific Monitoring Requirements: Programmatic contract monitoring occurs annually for all 15 local program offices; typically, half of the programs have an in-person monitoring visit while the other half is completed remotely on Teams and as a part of a desk review. Selection of in-person or remote monitoring is determined by a risk assessment (e.g., highest dollar amount, length of time providing services, etc.) and the length of time it has been since an on-site visit was completed. Monitoring visits are typically completed in mid-fall October-November and January-March each year. Administrative contract monitoring occurs every three years and is always completed in-person via site visit. Quarterly expenditure reviews are completed every three months, for each program. E-Verify reviews occur annually for each contract, and year-end reconciliation is also completed for each contract annually.

Part C-Specific Monitoring Process: A sample of case files are reviewed for each local program annually for the period of July-December. This review includes compliance indicators such as timeliness of the IFSP, timeliness of services, and timeliness of transition. Additionally, the review assesses the individualization and quality of services, and the setting of these services. Part C claims are also reviewed for these samples, and all documentation and consents, to ensure the system of payments policy is followed.

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

Annual Part C monitoring is completed for the State Performance Plan/Annual Performance Report (SPP/APR) through a child record review of a statistically significant, randomized sample of the statewide Early Steps population. For this SPP/APR cycle, a total of 395 records were reviewed. Each LES received a random sample of child records proportionate to the size of their office, and case file documents must be submitted to the Early Steps Program for a desk review of these records. Documents requested include:

- Authorization to Disclose Confidential Information Form
- Informed Consent for the Use of Private Insurance and Medicaid
- All versions of the Individualized Family Support/Service Plans (IFSP)
- Start Date of Authorized Services Form
- Case notes and visit/call log
- Referral documentation
- Transition Plan
- Local Education Agency/State Education Agency notification
- Documentation of justifiable use of Part C funds (insurance denial, family denial of consent for using insurance, etc.)

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

A list of eligible child records are pulled from the Early Steps Data System to ensure that the sample will provide appropriate data for the measure. For example, running a report of children exiting during a specific time period to ensure that the record reviewed for Indicator 8 is a child who has transitioned. The review time frame for each sample is July to December of each year.

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

Once the case file review process is complete, the QA Team prepares a comprehensive report for each local program. The QA Report consists of:

- Description of each standard, the data source, and the percent of achievement
- Summary by standard of the local program performance
- Findings of noncompliance
- Identified historical noncompliance for each performance standard
- Due date for the correction of the identified noncompliance, which is no later than one year from the date of identification of noncompliance

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

Florida's current procedures do not allow for pre-finding correction.

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

Florida first utilizes mandatory technical assistance. If issues of noncompliance continue, then increased reporting requirements may be implemented. The state and the local program both maintain written documentation of subsequent correction, including root cause analysis, plan for correction, and the actions taken to correct the noncompliance.

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

Results of the QA monitoring for Indicators 1, 7, and 8, IFSP reviews, and Fiscal Reviews are assessed on the following determination categories:

The LES's Determination is defined as follows:

- Meets Requirements (if the overall percentage is 95–100%)
- Needs Assistance (if the overall percentage is 81–94%)
- Needs Intervention (if the overall percentage is 71–80%)
- Needs Substantial Intervention (if the overall percentage is 70% or less)

There are four factors used to identify annual program determinations: (1) performance on compliance indicators; (2) valid and reliable data; (3) correction of identified noncompliance; and (4) other data available to the State about the EIS program's compliance with IDEA, including any relevant fiscal audit findings.

Any noncompliance identified during monitoring that is related to compliance with IDEA, leads to technical assistance between the state and the local program, corrective action, and financial penalties. Programs found to be in Needs Assistance are identified as a high-risk grantee and is required to have an in-person annual programmatic monitoring, rather than a virtual or desk review.

The Program website does publicly display the indicator data by local program, but does not display it by determination status. The program data can be found at the following link: <https://floridaearlysteps.com/early-steps-performance-and-accountability/>.

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

The state's general supervision policies can be found on in the Early Steps Policy Handbook, Component 1. <https://floridaearlysteps.com/program-policies-and-guidance/>

Technical Assistance System:

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

Technical assistance (TA) is provided in response to requests from individual programs or if a need is identified by the Early Steps State Office. Focused TA is provided through statewide policy clarifications via email, conference calls, or webinars and, when necessary, individual local technical calls. TA is related to strategies for meeting federal timelines for evaluations, IFSP meetings, service delivery, transition planning, implementation of evidence-based practices, and ensuring efficient use of resources. Monthly business conference calls with local program directors and coordinators are used to provide TA and maintain open, clear statewide communication. The local programs are provided a functional directory to contact Early Steps State Office staff for issues the program may have. The Early Steps State Office continues to implement ongoing data manager calls, where state data managers provide feedback and in-service training on recent database system changes, how to implement those changes, and where or how to submit requests or changes to the data system.

The Early Steps State Office has made efforts in developing a TA framework to assist programs to identify sustainable improvement strategies. Teams have been organized around a continuum of supports, including training, technical assistance, policies, and technology improvements to assist the local programs in improving performance and compliance. The Early Steps State Office will use this framework to also help those programs where compliance is difficult to meet or for those programs who have not corrected noncompliance with specific indicators. TA framework teams' leads for the State Office have been established.

Materials created by ECTA, DaSy, and CIFR are shared and discussed by the State Office during on-going technical assistance calls with local program directors, including improvement strategies regarding provider enrollment, service delivery, and the child outcomes summary process.

Professional Development System:

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

Florida's professional development system includes mandatory pre-service training consisting of three orientation modules, service coordinator apprenticeship training, and data system training. The trainings are in the process of being updated and revised, to coincide with policy updates, evidence-based practices, and new information.

In-service training includes the Florida Embedded Practices and Intervention with Caregivers (FL-EPIC), which is an approach to early intervention service delivery where providers coach caregivers to use strategies during everyday routines that support their child's development and learning; Autism

Navigator for Early Intervention Providers, a web-based instructional training program; an interactive e-learning community to support use of the Autism Navigator; and a train-the-trainer system for training assessors on the Battelle Developmental Inventory, Third Edition (BDI-3) assessment.

The Early Steps State Office is working to enhance the professional development infrastructure and increase training opportunities at the state and local levels.

Stakeholder Engagement:

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

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

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

YES

Number of Parent Members:

19

Parent Members Engagement:

Describe how the parent members of the Interagency Coordinating Council, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.

Parent members of the FICCIT and the local program Family Resource Specialists (FRS) participated in various stakeholder meetings to discuss, analyze, and review data to recommend targets and evaluate program performance. Each local program must employ at least one FRS to ensure family involvement. The FRS must be a parent or primary caregiver of a child who received early intervention services or would have been eligible for Early Steps Program services. The FRS ensure the experiences and opinions of families are represented in the Early Steps Program system. Information was shared with the FRS s to allow them to communicate and seek input from local families on strategies and activities to improve outcomes for infants and toddlers and their families.

Florida has a State Parent Consultant who is a parent of two children who previously received early intervention services from the Early Steps Program. This position is responsible for providing technical assistance to local programs on including and engaging with families. A meeting was held with 18 FRSs to discuss and analyze Early Steps Program performance data and discuss recommended targets for FY 2020-2025 prior to submittal.

FRSs convene monthly in a peer learning collaborative to support each other by sharing practices and ideas aimed at increasing the participation and involvement of families enrolled in the program. Being parents of children who have disabilities themselves, and active members of their communities, FRSs are skilled at making connections with and obtaining feedback from families on personal experiences and priorities and relaying that information to the local program and the State Office. FRSs recruit the participation of families through support groups, play groups, surveys (local and state), committees, and other community activities, virtually and in-person.

At the recommendation of the FRSs, the Early Steps Program is in the early stages of formulating guidance that will help families feel knowledgeable, confident, and prepared to participate fully on statewide workgroups. Further development of guidance and practices to support strong family engagement on state workgroups and FICCIT is ongoing.

Activities to Improve Outcomes for Children with Disabilities:

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

As mentioned above, FRS have an important role in all areas where family representation is sought, which includes the implementation of activities designed to improve outcomes for children and families served by the program across the state. FRS come from a variety of demographic backgrounds, socioeconomic status, etc. and all have a child or children, biological, adopted, or fostered, who have a range of disabilities involving physical limitations, genetic or metabolic conditions, developmental or intellectual conditions, and vision or hearing differences. These backgrounds and experiences allow for the FRS to fill a critical role that ensures the experiences and opinions of families, based on demographics or, are represented in the Early Steps Program system.

As work continues towards the SSIP goals, and Florida Embedded Practices and Intervention with Caregivers (FL-EPIC) enters the next stages of scaling and sustainability, the FRS role is reaching beyond involvement in stakeholder workgroups and into influencing the implementation of practices that impact families. In many of the local programs, the FRS has been invited to participate as member on the FL-EPIC Leadership Team. Likewise, some local programs have begun including FRS in the Child Outcome Summary (COS) process in various ways, such as being included in COS meetings with families to assist families in understanding the process and their role, and to provide feedback and guidance to the IFSP team on the COS process through the lenses of the family. FRS are being consulted when developing materials intended for families to ensure that the materials are family-centered and socially adapted. FRS are also involved in the target setting process and the FRS seek input from local families on strategies and activities to improve outcomes for infants and toddlers and their families. FRS are an incredible source of knowledge and inspiration for families and for the Program. The State Parent Consultant meets with the FRS monthly. Educational materials were provided to all Local Early Steps Programs and FRS to engage and increase knowledge and understanding of the target setting process, increase capacity to provide support in development of program improvement activities and improve overall participation.

Soliciting Public Input:

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

All FICCIT and workgroup meetings were publicly noticed in the Florida Administrative Register for a minimum of seven days prior to each meeting being held to solicit participation and involvement from the public and obtain input for target setting, analyzing data, and developing improvement strategies.

Making Results Available to the Public:

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

All FICCIT and workgroup meetings are public meetings, and the public is welcome to attend. The targets, improvement strategies, and evaluation are all included as a part of Florida's SPP/APR and are posted on the website as well as much of this information is included in the Early Steps Program Annual Report and State Plan which is also posted on the program's website.

Reporting to the Public:

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

Florida reported to the public on the FFY 2022 performance of each local program in the state by posting local performance profiles on the Early Steps Program website on May 23, 2024. This reporting can be found at: <https://floridaearlysteps.com/early-steps-performance-and-accountability/>.

The Early Steps State Office ensures this reporting is updated annually, no later than 120 days following the state's submission of the SPP/APR. Also available to the public on this website are the State Performance Plan/Annual Performance Report (SPP/APR) submitted February 2024.

<https://floridaearlysteps.com/early-steps-performance-and-accountability/>

Intro - Prior FFY Required Actions

The State's IDEA Part C determination for both 2023 and 2024 is Needs Assistance. In the State's 2024 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 2023 SPP/APR submission, due February 1, 2025, 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 2022 SPP/APR

The Early Steps Program participated in a number of a Technical Assistance opportunities in FFY 2023 including participating in the intensive cohort for Using Data and Systems Thinking for Systems Change sponsored by DaSy, ECTA, and the Waters Center. This cohort was instrumental in Florida's transition to an online referral process and assisted the Program with examining the Child Find data that resulted and helped to plan for the transition to the new data system in 2025.

The Program also participated in the Part C Dispute Resolution Learning Community, which has led to Florida reviewing dispute resolution processes and working to improve family materials related to dispute resolution.

The Program also participated in CIFR Monthly Communities of Practice, as well as a webinar on engaging ICCs in fiscal discussions, maintenance of effort, and the new general supervision guidance. These resources from CIFR have assisted the Early Steps Program with communicating fiscal responsibilities to the new members of Florida's ICC. As well as enhancing the procedural documents related to the fiscal compliance for maintenance of effort and other fiscal requirements to comply with the new indicator.

Intro - OSEP Response

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

The State's determinations for both 2023 and 2024 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 18, 2024 determination letter informed the State that it must report with its FFY 2023 SPP/APR submission, due February 3, 2025, 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 did not provide the required information.

OSEP notes that in its description of how it makes annual determinations of EIS program performance, the State did not include all the factors that must be considered when making annual determinations, consistent with OSEP's QA 23-01. Specifically, the State did not include valid, reliable and timely data and correction of identified noncompliance in its description of the criteria the State uses to make annual determinations. OSEP may follow up with the State regarding how it makes annual determinations of EIS program performance outside of the SPP/APR process.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	57.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	89.39%	90.30%	96.97%	90.38%	91.14%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
322	392	91.14%	100%	89.54%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

This indicator is impacted by provider shortages, the increase in referrals, and the increase in children served. This has contributed to delays in starting services. The Early Steps State Office is working with each local program to monitor provider capacity and to increase service provider recruitment and retention.

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.

29

Provide reasons for delay, if applicable.

Exceptional family circumstances included family schedule conflicts, child illness, and unsuccessful attempts to contact the family. Systems related reasons causing delays in receiving timely services were due to appointments not scheduled within the 30-day timeline and delayed referral between Service Coordinator and Provider causing delays in scheduling.

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).

Florida's criteria for "timely" receipt of early intervention services is as soon as possible, but within 30 calendar days from when the family consented to the service, unless there is documentation of a child or family related issue or natural disaster which caused the delay.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All 15 local programs are monitored annually. The monitoring uses a review of child record documentation and data. The monitoring sample was comprised of a random sample of child records based on the local program's size. A total of 392 records were reviewed for this indicator which is statistically significant for the statewide number of enrollments with a 95% confidence level.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
11	10	1	0

FFY 2022 Findings of Noncompliance Verified as Corrected

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a second round of reviews of child records for each of the 11 local programs with findings of noncompliance. The Early Steps State Office reviewed updated data through a subsequent sample of 205 records for the 11 programs. This was completed by reviewing the record for each child's IFSP documents and case notes with service start date information. Ten of the 11 local programs achieved 100% compliance in this review. Another review of data was completed for the 11th program with a sample of 15 records. This was done by reviewing the referral and IFSP dates in the data system and verifying the information with the referral form and IFSP documents provided by the local program. The program achieved 100% compliance in the subsequent review.

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

Thirty-five children in the 11 local programs did not receive early intervention services in a timely manner. For each individual case of noncompliance, the Early Steps State Office verified that the responsible program did initiate services for each of the 35 children, although late. Verification was completed by requiring the local programs to provide follow up with documentation that confirms services were initiated.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2021	1	1	0

FFY 2021

Findings of Noncompliance Verified as Corrected

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a second round of reviews of child records for the local programs with findings of noncompliance. The Early Steps State Office reviewed updated data through a subsequent sample of records for the program. This was done by reviewing the record for each child's IFSP documents and case notes with service start date information. The local program achieved 100% compliance in this review.

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

Four children in the one local program did not receive early intervention services in a timely manner. For each individual case of noncompliance, the Early Steps State Office verified that the responsible program initiated services for each of the four children, although late. Verification was completed by requiring the local programs to provide follow up documentation that confirmed services were initiated.

1 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the one remaining uncorrected finding of noncompliance identified in FFY 2021 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2022 and each EIS program or provider with remaining noncompliance identified in FFY 2021: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

1 - OSEP Response

1 - Required Actions

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	45.00%

FFY	2018	2019	2020	2021	2022
Target>=	92.00%	94.11%	90.06%	90.10%	90.30%
Data	94.11%	90.06%	90.33%	95.72%	90.36%

Targets

FFY	2023	2024	2025
Target >=	91.00%	91.50%	92.00%

Targets: Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	16,253
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Total number of infants and toddlers with IFSPs	17,965

FFY 2023 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
16,253	17,965	90.36%	91.00%	90.47%	Did not meet target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

- a. Percent of infants and toddlers who did not improve functioning = [(# 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)

YES

Targets: Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

Will your separate report be just the at-risk infants and toddlers or aggregated performance data on all of the infants and toddlers it serves under Part C?

Aggregated Performance Data

Historical Data

Outcome	Baseline	FFY	2018	2019	2020	2021	2022
A1	2019	Target>=	44.00%	32.00%	26.03%	26.04%	26.05%
A1	26.03%	Data	29.75%	26.03%	26.32%	59.05%	66.41%
A1 ALL	2019	Target>=		32.00%	26.03%	26.04%	26.05%
A1 ALL	26.03%	Data		50.00%	26.34%	59.12%	66.41%
A2	2019	Target>=	76.00%	69.00%	50.54%	50.55%	50.56%
A2	50.54%	Data	55.00%	50.54%	45.78%	38.88%	36.35%
A2 ALL	2019	Target>=		69.00%	50.54%	50.55%	50.56%
A2 ALL	50.54%	Data	100.00%	94.12%	46.02%	39.12%	36.79%
B1	2019	Target>=	60.00%	74.60%	74.27%	74.30%	74.63%
B1	74.27%	Data	74.63%	74.27%	68.80%	70.04%	72.91%
B1 ALL	2019	Target>=		74.60%	74.27%	74.30%	74.63%
B1 ALL	74.27%	Data	100.00%	66.67%	68.65%	70.07%	72.89%
B2	2019	Target>=	50.00%	51.00%	47.78%	47.80%	47.90%
B2	47.78%	Data	50.91%	47.78%	44.34%	24.55%	22.87%
B2 ALL	2019	Target>=		51.00%	47.78%	47.80%	47.90%
B2 ALL	47.78%	Data	100.00%	94.12%	44.48%	24.81%	23.37%
C1	2019	Target>=	60.00%	86.80%	84.36%	84.38%	84.40%
C1	84.36%	Data	86.75%	84.36%	73.76%	59.76%	63.30%
C1 ALL	2019	Target>=		86.80%	84.36%	84.38%	84.40%

C1 ALL	84.36%	Data	100.00%	83.33%	73.63%	59.79%	63.29%
C2	2019	Target>=	70.00%	89.10%	87.66%	87.68%	87.70%
C2	87.66%	Data	89.05%	87.66%	78.47%	49.16%	43.52%
C2 ALL	2019	Target>=		89.10%	87.66%	87.68%	87.70%
C2 ALL	87.66%	Data	100.00%	94.12%	78.50%	49.34%	43.85%

Targets

FFY	2023	2024	2025
Target A1 >=	26.06%	26.50%	27.00%
Target A1 ALL >=	26.06%	26.50%	27.00%
Target A2 >=	51.00%	53.00%	55.00%
Target A2 ALL >=	51.00%	53.00%	55.00%
Target B1 >=	74.90%	75.20%	75.50%
Target B1 ALL >=	74.90%	75.20%	75.50%
Target B2 >=	48.50%	49.50%	50.91%
Target B2 ALL >=	48.50%	49.50%	50.91%
Target C1 >=	84.42%	84.44%	84.46%
Target C1 ALL >=	84.42%	84.44%	84.46%
Target C2 >=	87.72%	87.74%	87.76%
Target C2 ALL >=	87.72%	87.74%	87.76%

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

Not including at-risk infants and toddlers	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	124	1.14%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2,853	26.30%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	3,878	35.75%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,777	25.60%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,215	11.20%

Just at-risk infants and toddlers/All infants and toddlers	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	124	1.19%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2,863	27.56%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	3,878	37.33%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,283	21.98%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,241	11.95%

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	6,655	9,632	66.41%	26.06%	69.09%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	3,992	10,847	36.35%	51.00%	36.80%	Did not meet target	No Slippage

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	6,161	9,148	66.41%	26.06%	67.35%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	3,524	10,389	36.79%	51.00%	33.92%	Did not meet target	Slippage

Provide reasons for A2 AR/ALL slippage, if applicable

The Early Steps State Office plans to collect and review additional data (e.g., eligibility reasons, medical diagnosis, and service delivery methods) to determine potential reasons for a decline in this summary statement.

While the Program did see slippage for Summary Statement A2, it should be noted that the number of children who were functioning within age expectations in Outcome A by the time they turned three or exited the program increased by 12.59% between FY 22 and FY 23. Between FY 21 and FY 23 there is a 97.42% increase in children who were functioning within age expectations.

The number of children participating in the program is also growing, with a 20.66% increase from FY22 to FY23, and from FY21 to FY23 there is a 126.29% increase in the number of children exiting. While Florida is seeing improvements in the number of children in category D and E between years, because the population size is growing so rapidly it continues to bring down the total percentage because the eligibility criteria in Florida is more rigid.

As the state moves forward with the new data system, the Program will have more access to data elements and plans to do a deeper analysis and work to trend Child Outcomes on a regional level.

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

Not including at-risk infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	108	1.04%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2,631	25.43%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	5,206	50.32%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,029	19.61%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	372	3.60%

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	108	1.04%

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2,640	25.41%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	5,208	50.13%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,041	19.65%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	392	3.77%

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	7,235	9,974	72.91%	74.90%	72.54%	Did not meet target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	2,401	10,346	22.87%	48.50%	23.21%	Did not meet target	No Slippage

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	7,249	9,997	72.89%	74.90%	72.51%	Did not meet target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	2,433	10,389	23.37%	48.50%	23.42%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Not including at-risk infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	127	1.23%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3,154	30.48%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	2,936	28.37%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,937	28.38%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,194	11.54%

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	127	1.22%

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3,166	30.47%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	2,936	28.26%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,946	28.36%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,214	11.69%

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	5,873	9,154	63.30%	84.42%	64.16%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	4,131	10,348	43.52%	87.72%	39.92%	Did not meet target	Slippage

Provide reasons for C2 slippage, if applicable

The Early Steps State Office plans to collect and review additional data (e.g., eligibility reasons, medical diagnosis, and service delivery methods) to determine potential reasons for a decline in this summary statement. Florida experienced slippage in Summary Statement C2, however the number of children who were functioning within age expectations in Outcome C by the time they turned three or exited the program increased by 11.02% between FY 22 and FY 23, and an 84.32% percent increase from FY 21 and FY 23.

The number of children participating in the program is also growing, with a 20.66% increase from FY22 to FY23, and from FY21 to FY23 there is a 126.29% increase in the number of children exiting. As noted with the A2 results, Florida is seeing improvements in the number of children in category D and E between years but is also serving a larger population size with larger and more significant developmental delays.

As the state moves forward with the new data system, the Program will have more access to data elements and plans to do a deeper analysis and work to trend Child Outcomes on a regional level.

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	5,882	9,175	63.29%	84.42%	64.11%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	4,160	10,389	43.85%	87.72%	40.04%	Did not meet target	Slippage

Provide reasons for C2 AR/ALL slippage, if applicable

The Early Steps State Office plans to collect and review additional data (e.g., eligibility reasons, medical diagnosis, and service delivery methods) to determine potential reasons for a decline in this summary statement.

Florida experienced slippage in Summary Statement C2, however the number of children who were functioning within age expectations in Outcome C by the time they turned three or exited the program increased by 11.02% between FY 22 and FY 23, and an 84.32% percent increase from FY 21 and FY 23. The number of children participating in the program is also growing, with a 20.66% increase from FY22 to FY23, and from FY21 to FY23 there is a 126.29% increase in the number of children exiting. As noted with the A2 results, Florida is seeing improvements in the number of children in category D and E between years but is also serving a larger population size with larger and more significant developmental delays.

As the state moves forward with the new data system, the Program will have more access to data elements and plans to do a deeper analysis and work to trend Child Outcomes on a regional level.

FFY 2023 SPP/APR Data

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	18,605
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.	5,795
Number of infants and toddlers with IFSPs assessed	10,389

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

Early Steps began using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process with all children entering the program on or after December 1, 2020. The COS process uses multiple sources of information rather than only one standardized tool. The COS process guides a team of parents, providers, and other community members who interact with a child during their daily routines to share and discuss all the available evidence of how that child functions. The team comes to a consensus that aligns with a rating scale. The COS scores are entered into the UF Early Steps Data System to calculate the OSEP progress category information. The scores are submitted to the University of Miami to complete the analyses.

Provide additional information about this indicator (optional).

3 - Prior FFY Required Actions

None

3 - OSEP Response

Although the State's FFY 2023 data represent slippage from the FFY 2022 data for A2 and C2, and the State did not meet its FFY 2023 target for A2 and C2, the State did not, as required, provide an explanation of slippage for A2 and C2.

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

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

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2018	2019	2020	2021	2022
A	2005	Target>=	77.50%	84.60%	87.00%	87.50%	88.00%
A	55.90%	Data	84.60%	86.44%	87.61%	83.53%	78.52%
B	2005	Target>=	74.50%	81.49%	83.60%	83.80%	84.00%
B	52.50%	Data	81.49%	83.60%	84.45%	80.38%	74.64%
C	2005	Target>=	89.50%	92.26%	93.40%	93.60%	93.80%
C	57.60%	Data	92.26%	93.28%	94.47%	91.22%	87.94%

Targets

FFY	2023	2024	2025
Target A>=	88.50%	89.00%	89.50%
Target B>=	84.20%	84.40%	84.60%
Target C>=	94.00%	94.20%	94.40%

Targets: Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

FFY 2023 SPP/APR Data

The number of families to whom surveys were distributed	2,558
Number of respondent families participating in Part C	1,360
Survey Response Rate	53.17%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,049
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,360
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	992
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,360
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,185
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,360

Measure	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	78.52%	88.50%	77.13%	Did not meet target	Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family	74.64%	84.20%	72.94%	Did not meet target	Slippage

Measure	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
effectively communicate their children's needs (B1 divided by B2)					
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)	87.94%	94.00%	87.13%	Did not meet target	No Slippage

Provide reasons for part A slippage, if applicable

The survey distribution process was modified to include a parent access code for eligible families to prevent duplication. This process has increased the validity of the survey response data; however, it resulted in a decreased percentage of performance compared to the previous year. Service Coordinator retention issues and training gaps were noted as contributing factors to the decreased percentage of families reporting that the services helped the family to know their rights. Additional videos and materials have been developed for Service Coordinators and families to better understand their procedural safeguards and to increase their confidence in communicating their children's needs.

Provide reasons for part B slippage, if applicable

The survey distribution process was modified to include a parent access code for eligible families to prevent duplication. This process has increased the validity of the survey response data; however, it resulted in a decreased percentage of performance compared to the previous year. Service Coordinator retention issues and training gaps were noted as contributing factors to the decreased percentage of families reporting that early intervention services helped the family effectively communicate their child's needs. Additional videos and materials have been developed for Service Coordinators and families to better understand their procedural safeguards and to increase their confidence in communicating their children's needs.

Sampling Question	Yes / No
Was sampling used?	NO

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

Response Rate

FFY	2022	2023
Survey Response Rate	54.74%	53.17%

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

The ECTA Center Response Rate and Representativeness Calculator was used to determine overall representativeness. The calculator uses an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon the 90% confidence intervals for each indicator (significance level = .10). There was a difference in the number of families in the target population and the number of responses to the survey: -3% for African American or Black, 0% for American Indian or Alaskan Native, 0% for White, 0% for Native Hawaiian or Pacific Islander, 1% for Asian, and 2% for Multiracial in the response rate.

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

The representativeness of the survey was assessed by examining the demographic characteristics of the children by the parents that responded to the survey with the demographic characteristics of children enrolled in Florida Part C Program. The race/ethnicity as received in survey response data 0% indicated American Indian or Alaskan Native and .17% were reported in Child Count; 5% indicated Asian and 2.13% were reported in the Child Count; 21% indicated Black or African American and 23.8% were reported in Child Count; 41% indicated Hispanic/Latino and 40.07% were reported in Child Count; 8% indicated Multiracial and 3.77% were reported in Child Count; 0% indicated Native Hawaiian or Other Pacific Islander and .2% were reported in Child Count; 51% indicated White and 30.49% were reported in Child Count. There was slightly lower representativeness from Native Hawaiian or Pacific Islander and Multiracial demographic groups.

The socioeconomic status demographic was reviewed by comparing the children enrolled in Medicaid in Florida Part C program to the children enrolled in Medicaid in the survey response data: 70.14% of children were enrolled in Medicaid in the Part C program and 55% of children were enrolled in Medicaid in the survey response data. These percentages also indicate a lower representativeness of Medicaid enrolled families responding to the survey versus enrolled in the Part C program.

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

NO

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

The Early Steps State Office is working with each Family Resource Specialist and the Parent Training and Information Center to create additional educational materials to increase access and response to the survey. Additional methods and survey tools are being explored to increase access.

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

The Family Resource Specialist from each local program will identify all families who are eligible to take the family survey and attempt multiple contacts to ensure survey completion. Additional survey methods are being explored to increase access.

The Early Steps State Office is reviewing other survey tools/approaches. Gaining information from families on any deterrents to completing the current survey will help inform future decisions regarding the survey tool or approach.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of families that received Part C services.

The Early Steps State Office continues to work with the Family Resource Specialists to educate families on the importance of collecting Family Outcomes data and to promote the increase of overall responses for all families enrolled in the Part C Program. Family Survey Leads meet monthly during the Family Survey period to discuss strategies to streamline methods of distribution and ideas to increase responsiveness of all families. As stated above, the ECTA Center Response Rate and Representativeness Calculator was used to determine overall representativeness. The Early Steps State Office works with the University of Miami's Mailman Center for Child Development to collect and analyze the Family Survey data. The Mailman Center's expertise will continue to be utilized to look for ways to improve the survey process to increase response rates from the underrepresented populations and to better understand barriers or deterrents to response. Increasing the survey pool of eligible families is a strategy that may be used to help promote responses from a broader cross section of the families served. The Program is planning to increase the survey pool in the future but is holding until the new data system launches and plans to utilize the parent portal to expand and push out the survey and reminders related to the survey.

As stated above, the ECTA Center Response Rate and Representativeness Calculator was used to determine overall representativeness. The race/ethnicity as received in survey response data 0% indicated American Indian or Alaskan Native and .17% were reported in Child Count; 5% indicated Asian and 2.13% were reported in the Child Count; 21% indicated Black or African American and 23.8% were reported in Child Count; 41% indicated Hispanic/Latino and 40.07% were reported in Child Count; 8% indicated Multiracial and 3.77% were reported in Child Count; 0% indicated Native Hawaiian or Other Pacific Islander and .2% were reported in Child Count; 51% indicated White and 30.49% were reported in Child Count. There was slightly lower representativeness from Native Hawaiian or Pacific Islander and Multiracial demographic groups.

The socioeconomic status demographic was reviewed by comparing the children enrolled in Medicaid in Florida Part C program to the children enrolled in Medicaid in the survey response data: 70.14% of children were enrolled in Medicaid in the Part C program and 55% of children were enrolled in Medicaid in the survey response data. These percentages also indicate a lower representativeness of Medicaid enrolled families responding to the survey versus enrolled in the Part C program.

Provide additional information about this indicator (optional).

The National Center for Special Education Accountability Monitoring (NCSEAM) survey was utilized as the measurement tool for Indicator 4. All families with children who had an initial IFSP for at least six months and exiting the program between February 1, 2024, and May 1, 2024, were offered the opportunity to submit a survey. The distribution process utilized personal contact with the families by the Service Coordinator, Family Resource Specialist, and providers working with the child and family.

4 - Prior FFY Required Actions

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

Response to actions required in FFY 2022 SPP/APR

4 - OSEP Response

The State did not analyze the response rate to (1) identify potential nonresponse bias and (2) the steps taken to reduce any identified bias to promote response from a broad cross section of families that received Part C services, as required by the Measurement Table.

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2012	0.71%

FFY	2018	2019	2020	2021	2022
Target >=	0.74%	0.74%	0.74%	0.75%	0.77%
Data	0.71%	0.87%	0.67%	0.63%	0.63%

Targets

FFY	2023	2024	2025
Target >=	0.80%	0.83%	0.87%

Targets: Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 1 with IFSPs	1,484
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 1	224,670

FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1,484	224,670	0.63%	0.80%	0.66%	Did not meet target	No Slippage

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

N/A

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response**5 - Required Actions**

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

6 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2012	1.89%

FFY	2018	2019	2020	2021	2022
Target >=	1.93%	2.47%	2.85%	2.90%	3.00%
Data	2.47%	2.84%	2.35%	2.43%	2.69%

Targets

FFY	2023	2024	2025
Target >=	3.05%	3.10%	3.15%

Targets: Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/31/2024	Number of infants and toddlers birth to 3 with IFSPs	17,965
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2023	06/25/2024	Population of infants and toddlers birth to 3	668,059

FFY 2023 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
17,965	668,059	2.69%	3.05%	2.69%	Did not meet target	No Slippage

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

N/A

Provide additional information about this indicator (optional).

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	85.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	90.30%	91.21%	98.18%	92.15%	90.89%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
298	395	90.89%	100%	92.91%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

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Provide reasons for delay, if applicable.

Exceptional family circumstances included family schedule conflicts, child illness and unsuccessful attempts to contact the family. Other system related delays were due to evaluation appointments not scheduled within the 45-day timeline.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All 15 local programs are monitored annually. This year's monitoring utilized a review of child record documentation and data. The monitoring sample was comprised of randomly selected child records based on local program size. A total of 395 records were reviewed. State staff reviewed each record to determine if an initial IFSP meeting was conducted within Part C's 45-day timeline.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2022

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

FFY 2022 Findings of Noncompliance Verified as Corrected

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a subsequent review of child records for each of the four local programs with a finding of noncompliance for this indicator. The Early Steps State Office reviewed updated data through a subsequent sample of 94 records for the four programs. This was done by reviewing the referral and IFSP dates in the data system and verifying the information with the referral form and IFSP documents provided by the local programs. Three of the four programs achieved 100% compliance in the subsequent review within one year. Another review of data was completed for the fourth program with a sample of 15 records. This was done by reviewing the referral and IFSP dates in the data system and verifying the information with the referral form and IFSP documents provided by the local program. The program achieved 100% compliance in the subsequent review.

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

Thirty-six children did not receive an initial evaluation and assessment and an initial IFSP meeting conducted within Part C's 45-day timeline. For each individual case of noncompliance, the Early Steps State Office verified that the local programs conducted the evaluation and assessment and Individualized Family Support Plan (IFSP) meeting for each child, although late. The verification was based on follow up reporting and reviews by the local program with documentation of individual children whose evaluation and assessment and initial IFSP meeting had not been completed within the original 45 days.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

7 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01.

In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

7 - OSEP Response

7 - Required Actions

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	64.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	95.45%	92.73%	98.18%	96.71%	94.18%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
372	395	94.18%	100%	97.72%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

14

Provide reasons for delay, if applicable.

Exceptional family circumstances included family schedule conflicts, child illness, and unsuccessful attempts to contact the family. Other system related delays were due to service coordinator error in scheduling timely transition conferences with the family which resulted in the 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 being late.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All 15 local programs are monitored annually. This year's monitoring utilized a review of child record documentation and data. The monitoring sample was comprised of randomly selected child records based on local program size. A total of 395 records were reviewed. State staff reviewed each record to determine if an IFSP with transition steps and services was developed at least 90 days, and at the discretion of all parties, not more than nine months prior to the toddler's third birthday.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2022

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

FFY 2022 Findings of Noncompliance Verified as Corrected

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a second review of child records for each of the six local programs with findings of noncompliance. The Early Steps State Office reviewed updated data through a subsequent sample of 83 records for the six local programs. This was conducted by reviewing a subsequent sample of IFSP records to ensure steps and services were provided within at least 90 days and not more than nine months prior to the toddler's third birthday. The six local programs achieved 100% compliance in the subsequent review of the sample of records.

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

Twenty-three children did not receive an IFSP with transition steps and services within at least 90 days and at the discretion of all parties, not more than nine months prior to the toddler's third birthday. The Early Steps State Office verified that the local programs developed an IFSP with transition steps and services, although late, for the 23 children. This verification was based on follow up reporting and review of documentation provided by the local programs.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

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

8A - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01.

In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

8A - OSEP Response

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:

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	88.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	96.30%	97.53%	98.44%	94.49%	98.97%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
388	395	98.97%	100%	99.23%	Did not meet target	No Slippage

Number of parents who opted out

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

4

Provide reasons for delay, if applicable.

Several local programs did not track the notification due date in a timely manner when the child entered the program very close to 90 days before the child's third birthday which resulted in the notifications being sent late to the Local Education Agency and State Education Agency.

Describe the method used to collect these data.

The data source for this indicator is monitoring documentation. All 15 local programs are monitored annually. This year's monitoring utilized a review of child record documentation and data verifying both notification to each Local Education Agency and the State Education Agency. The monitoring sample was comprised of randomly selected child records based on local program size. A total of 395 records were reviewed.

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.

All 15 local programs are monitored annually for this indicator. This year's monitoring utilized a review of child record documentation and data. The monitoring sample was comprised of randomly selected child records based on local program size. A total of 395 records were reviewed.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2022

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

FFY 2022 Findings of Noncompliance Verified as Corrected

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a subsequent review of child records for each of the two local programs with findings of noncompliance. The Early Steps State Office reviewed a subsequent sample of 30 records for the two local programs with findings. The two local programs achieved 100% compliance on the subsequent reviews. This was completed by reviewing a subsequent sample of notification lists sent to the Local Education Agency and State Education Agency and verifying the information was sent in a timely manner at least 90 days prior to the toddler's third birthday.

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

Notification to the State Education Agency (SEA) and the Local Education Agency (LEA) where the toddler resides was late for four children. The Early Steps State Office verified that the local program provided notification to the State Education Agency (SEA) and the Local Education Agency (LEA) where the toddler resides. Although notification was sent outside of the 90-day notification period requirement, it did occur prior to each toddler's third birthday for the four toddlers. This verification was based on follow up reporting and review of documentation provided by the local program.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

8B - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01.

In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR**8B - OSEP Response**

The State did not provide valid and reliable data for this indicator. These data are not valid and reliable because the State did not indicate if the data include notification to both the SEA and LEA. Therefore, OSEP could not determine whether the State met its target.

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	70.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	95.76%	92.73%	98.18%	96.71%	94.43%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

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

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
372	395	94.43%	100%	97.72%	Did not meet target	No Slippage

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

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

0

Number of documented delays attributable to exceptional family circumstances

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

14

Provide reasons for delay, if applicable.

Exceptional family circumstances included family schedule conflicts, child illness and unsuccessful attempts to contact the family. Other system related delays were due to service coordinator error in scheduling timely transition conferences with the family which resulted in the transition conference being completed late.

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

State monitoring

Describe the method used to select EIS programs for monitoring.

All 15 local programs are monitored annually. This year's monitoring utilized a review of child record documentation and data. The monitoring sample was comprised of randomly selected child records based on local program size. A total of 395 records were reviewed

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2022

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

FFY 2022 Findings of Noncompliance Verified as Corrected

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a second review of child records for each of the six local programs with findings of noncompliance. The Early Steps State Office reviewed updated data through a subsequent sample of 83 records for the six local programs. This was completed by reviewing a subsequent sample of IFSP records to ensure the transition conference was conducted within at least 90 days and not more than nine months prior to the toddler's third birthday. The six local programs achieved 100% compliance in the subsequent review of the sample of records.

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

Twenty-two children did not receive a transition conference within at least 90 days and at the discretion of all parties, not more than nine months prior to the toddler's third birthday. The Early Steps State Office verified that the local program did conduct a transition conference. Although late, the transition

conference was held before the toddler's third birthday for all 22 children. This verification was based on follow up reporting and review of documentation provided by the local program.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

8C - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01.

In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

8C - OSEP Response

8C - Required Actions

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Select yes to use target ranges.

Target Range not used

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

NO

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1 Number of resolution sessions	0
SY 2023-24 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

Historical Data

Baseline Year	Baseline Data

FFY	2018	2019	2020	2021	2022
Target>=					
Data					

Targets

FFY	2023	2024	2025
Target>=	0.00%		

FFY 2023 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
0	0		0.00%		N/A	N/A

Provide additional information about this indicator (optional)

The State reported fewer than 10 resolution sessions held in FFY 2023. The State is not required to provide targets until any fiscal year in which 10 or more resolution sessions were held.

9 - Prior FFY Required Actions

None

9 - OSEP Response

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

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2018	2019	2020	2021	2022
Target>=					
Data					

Targets

FFY	2023	2024	2025
Target>=			

FFY 2023 SPP/APR Data

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

Provide additional information about this indicator (optional)

The State reported fewer than 10 mediations held in FFY 2023. The State is not required to provide targets until any fiscal year in which 10 or more mediations are held.

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

11 - Indicator Data

Section A: Data Analysis

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

(Indicator 3.A.1) Increase the percentage of infants and toddlers who exit early intervention with an increase rate of growth in positive social-emotional skills.

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

NO

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

NO

Is the State’s theory of action new or revised since the previous submission? (yes/no)

NO

Please provide a link to the current theory of action.

<http://floridaearlysteps.com/wp-content/uploads/2024/01/Theory-of-Action.pdf>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2019	26.03%

Targets

FFY	Current Relationship	2023	2024	2025
Target	Data must be greater than or equal to the target	26.06%	26.50%	27.00%

FFY 2023 SPP/APR Data

3A1 – Positive social-emotional skills- 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. (Numerator Progress Category C+D)	3A1-Positive social-emotional skills- 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. (Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
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	Description Category A+B+C+D)					
6,161	9,148	66.41%	26.06%	67.35%	Met target	No Slippage

Provide the data source for the FFY 2023 data.

The data source used for FFY 2023 data is from Indicator 3A Summary Statement 1: percentage of infants and toddlers who entered early intervention below age expectations in each outcome, the percentage who substantially increased their rate of growth by the time they turned three years of age or exited the program. The numerator is the number of infants and toddlers who improved functioning to a level nearer to same-aged peers, but did not reach it; plus, the number of infants and toddlers who improved functioning to reach a level comparable to same-aged peers. The denominator is (a) the number of infants and toddlers who did not improve functioning, (b) the number of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers (c) the number of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it; in addition to (d) the number of infants and toddlers who improved functioning to reach a level comparable to same-aged peers.

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

In FY 2019-2020, the Early Steps Program began the process of transitioning from using the Battelle Developmental Inventory, 2nd Edition (BDI-2) to determine a child's entry-exit progress to the Early Childhood Outcomes Center (ECO) Child Outcome Summary (COS) process. For those children who received an entry assessment before December 1, 2020, Early Steps continued using the BDI-2 tool for their exit assessment. The BDI-2 is a "standardized, individually administered assessment battery of key developmental skills in children from birth through seven years of age" [Source: Battelle Developmental Inventory – Examiner's Manual]. Local Early Steps Program employees enter results for evaluations in the BDI-2 Data Manager online scoring and reporting program. Data are exported from the Data Manager, and a de-identified data file is sent to the Mailman Center, whose staff completes the analyses that produce the category assignments. The COS process was used for all children entering the program on or after December 1, 2020. The COS process uses multiple sources of information rather than only one standardized tool. This process guides a team of parents, providers, and other community members who interact with a child during their daily routines to share and discuss all the available evidence of how that child functions. The team comes to a consensus that aligns with a rating scale. The COS scores are entered into the UF Early Steps Data System to calculate the OSEP progress category information. This COS data is submitted to the Mailman Center, whose staff complete the analyses. Both BDI-2 and COS data were combined and reported together for this Indicator thru November 30, 2023. Beginning December 1, 2023, all data reported will be based on the COS process only, for all children entering and exiting the Early Steps Program.

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

YES

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

Florida Early Steps continued its partnership with the Institutions of Higher Education (IHE) subject matter experts at the Anita Zucker Center for Excellence in Early Childhood Studies, University of Florida (UF), and the Communication and Early Childhood Research and Practice Center (CEC-RAP), Florida State University. The UF IHE tTeam collects and reports data from sites implementing Florida Embedded Practices and Intervention with Caregivers Early Steps Professional Development (FL-EPIC ESPD). FL-EPIC ESPD was implemented in all 15 local program sites in FFY 2022-2023, resulting in statewide implementation. Since July 2023, all 15 sites have been engaged in the sustainability and scale-up of FL-EPIC ESPD implementation activities. There are 33 coaches supporting the implementation of FL-EPIC ESPD across the 15 sites: 15 Lead Implementation Coaches (LICs) and 18 Provider Coaches (PCs). In addition, 15 Professional Development Credentialing Coordinators (PDCCs) were hired in FFY 2023-2024 to support the implementation of quality assurance activities for FL-EPIC ESPD implementation and other aligned professional development activities. Fidelity data for FL-EPIC workshops, monthly Provider Learning Community meetings, and practice-based coaching (PBC; Snyder et al., 2022) were collected using fidelity checklists completed by the IHE tTeam and coaches to measure progress in FL-EPIC ESPD implementation. Across the 15 program sites, 28 workshops were implemented in FFY 2023-2024. The mean IHE-reported percentage implementation fidelity for FL-EPIC workshops was 96% (range = 91 - 100). The mean coach-reported percentage implementation for the workshops was 97% (range = 94 - 100). For monthly Provider Learning Community meetings, the IHE tTeam completed 27 video observations of monthly Provider Learning Community meetings for five local program sites as part of comprehensive fidelity check evaluations. In addition, coaches from all 15 program sites completed implementation fidelity checklists for each Provider Learning Community meeting. The mean IHE-reported percentage implementation across 27 monthly Provider Learning Community meetings was 94% (range = 81 - 100). The mean coach-reported percentage implementation across 169 monthly Provider Learning Community meetings was 95% (range = 73 - 100). These data show that IHE-reported and coach-reported workshop and Provider Learning Community meeting implementation fidelity data remain comparable. Implementation fidelity of practice-based coaching practices was assessed at least once for each coach. The IHE-reported percentage implementation fidelity across 73 sessions was 79% (range = 31 - 100). Coach-reported practice-based coaching implementation fidelity across 1079 sessions was 91% (range = 38 - 100). In addition to practice-based coaching sessions coaches conducted with providers during their initial participation in FL-EPIC ESPD, coaches completed implementation fidelity checklists for 283 individual and 24 small group practice-based coaching sessions for providers who had completed participation in the initial 6 - 9 months of FL-EPIC ESPD and were engaged in ongoing ESPD activities. The mean coach-reported percentage implementation for these individual ongoing and small group practice-based coaching sessions was 88% (range = 56 - 100) and 88% (range = 38 - 100), respectively. These practice-based coaching data show that, on average, most coaches continue to implement at fidelity.

Caregivers of children served by providers who completed FL-EPIC ESPD in FFY 2023-2024 reported between a 5% and 12% increase across five items focused on their embedded intervention self-efficacy ratings. For child outcomes, providers enrolled in FL-EPIC ESPD use a FL-EPIC ESPD Child Outcomes Summary (COS) process, which is used to guide periodic progress monitoring and examine child progress between the time providers attend FL-EPIC workshops and their completion of Provider Learning Community meetings and coaching (i.e., 6 - 9 months). FL-EPIC COS data is used to monitor the success of the SSIP effort and is not used or affiliated with the Child Outcome Indicator reporting data which uses entry and exit COS ratings for all children. FL-EPIC COS data from FFY 2023-2024 showed that 63% of children substantially increased their rate of growth in social interactions and well-being and 38% were within age expectations. Sixty-four percent (64%) of children substantially increased their rate of growth related to the acquisition and use of knowledge and skills and 23% were within age expectations. Fifty-seven percent (57%) of children substantially increased their rate of growth related to the use of appropriate behaviors to meet their needs and 29% were within age expectations.

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

<https://floridaeearlysteps.com/wp-content/uploads/2024/01/SSIP-Evaluation-Plan.pdf>

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

NO

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

Improvement Strategy 1: Florida will improve its capacity to support local implementation of evidence-based practices that result in positive social interactions and well-being for infants and toddlers through improvements to state-level infrastructure.

Related to Accountability and Quality Improvement, the IHE Team continues to revise and enhance the Tools for Early Steps Teams (TEST) Toolkit. The TEST Toolkit is a resource for coaches and providers that provides information specific to the embedded practices taught with elements such as making the first contact, exchanging information, using information, implementing FL-EPIC, tracking progress, and planning transitions.

Related to Data System and Child Outcomes Data Quality, Early Steps Program staff and stakeholders remain actively involved in the system design and development of a new state-of-the-art data system. Early Steps Program staff have worked with Technical Assistance (TA) partners, Early Childhood Technical Assistance (ECTA) Center, and Center for IDEA Early Childhood Data Systems (DaSy) to adapt the Child Outcomes Summary Excel calculator tool for use to generate OSEP progress category information and charts on child outcomes, OSEP summary statement percentages, entry and exit COS ratings, and identify data issues. Elements from the calculator will be incorporated into the new data system.

Related to Governance, the IHE Team will provide recommendations, and the Early Steps Program will revise Early Steps policies to align with updates to the child outcomes measurement system and evidence-based practices.

In the area of Finance, the Early Steps Program continues to pursue funding to support infrastructure enhancements and to scale up and sustain the implementation of evidence-based practices in additional areas of the state.

Improvement Strategy 2: Florida will establish, implement, and sustain a framework for statewide professional development to promote positive social interactions and well-being infants and toddlers based on identified evidence-based coaching practices.

In the area of Personnel/Workforce, Early Steps continues to implement a professional development framework for FL-EPIC coaching practices. The IHE Team has provided updated Early Steps Orientation Modules and Service Coordinator Apprenticeship Modules. A new Functional Outcomes training was developed, and recommended updates were made for the Infant Toddler Developmental Specialist (ITDS) Training curriculum.

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

Improvement Strategy 1: Florida will improve its capacity to support local implementation of evidence-based practices that result in positive social interactions and well-being for infants and toddlers through improvements to state-level infrastructure.

Accountability and Quality Improvement Short-Term/Intermediate Outcome(s): Service Coordinators at local programs, trained to use the TEST Toolkit, increased their knowledge of developing family-centered functional outcomes to address a child's social interaction and well-being which is important for scale-up to assist with increasing the knowledge of the full Early Steps System.

Data System and Child Outcomes Data Quality Short-Term/Intermediate Outcome(s): The data system includes elements for tracking and reporting child outcomes. • The new data system being developed will include elements to track provider credentials and training. This step is necessary for the sustainability of system improvement efforts as well as scale-up.

Governance Short-Term/Intermediate Outcome(s): Service Coordinators, evaluators, providers, and families understand and implement policies and procedures that are clear and consistent with IDEA and state requirements. Systems improvement can only be achieved if the local program staff and providers are following approved procedures and practices and remain in compliance.

Finance Short-Term/Intermediate Outcome(s): The Florida Legislature granted funding to support the final three implementation sites beginning in July 1, 2022 and the base funds are recurring from year to year. Fiscal support from the state legislature will be vital to ongoing system improvement efforts as well as scale-up.

Improvement Strategy 2: Florida will establish, implement, and sustain a framework for statewide professional development to promote positive social interactions and well-being for infants and toddlers based on identified evidence-based coaching practices.

Personnel/Workforce Short-Term/Intermediate Outcome(s): Florida has adopted and requires all local program staff, service coordinators, and providers involved in the COS process to complete eight self-directed COS training modules developed by the ECTA Center and DaSy Center. Florida has adopted and required the six-module training package on Developing High-Quality Functional Individualize Family Support Plan (IFSP) Outcomes developed by ECTA. The IHE Team has developed a Functional Outcome Training for Florida providers based on the ECTA training. This training along with a revised Early Steps Orientation training and Service Coordinator training is expected to be implemented in Spring of 2025.

Expected SiMR Impact: Service Coordinators and providers will increase knowledge and skills in working with families to develop functional outcomes using information gathered in the development of the COS. These functional outcomes will be aligned with evidence-based practices to increase children's social interactions and well-being skills. The Early Steps State Office anticipates the implementation of a new Early Steps Data System (ESDS) in Spring 2025. The ESDS will ensure timely, accurate child outcome data collection and a means for tracking provider training status in evidence-based practice strategies. This data can be used to facilitate state and local programs to improve SiMR.

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

YES

Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

During FFY 2023-2024, 15 Professional Development Credentialing Coordinators (PDCCs) were hired by the Local Early Steps programs to support the implementation of quality assurance activities for FL-EPIC ESPD implementation and other aligned professional development activities. Three group trainings for PDCCs were provided during FFY 2023-2024. The training was six to eight hours in length and included information about how to score videos using the Home Visiting Fidelity Checklist. During the training, participants reviewed scoring guidance for the Home Visiting Fidelity Checklist, viewed video clips of providers implementing Evidence Based Practices, practiced scoring provider implementation of Evidence Based Practices, and engaged in discussion about scoring agreements and disagreements. Following the training, participants engaged in calibration activities to ensure the

accuracy of Home Visiting Fidelity Checklist scoring. Calibration activities included viewing master-scored home visit videos, scoring checklist for the videos observed, and participating in individual or group meetings with the IHE Team to discuss scoring feedback and clarify scoring guidance.

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

As a part of the next steps of FL-EPIC ESPD, in FFY 2023, the ESSO and IHE Team collaborated to develop a plan for adapting FL-EPIC for use in early care and education setting. The initial plan for the expansion of FL-EPIC ESPD to early care and education settings was developed in September 2023 and the initial exploration activities are in progress. The anticipated outcome from this expansion is to allow more providers to participate in the FL-EPIC programs and engage in partnerships with the early care and education sites to increase access for children to receive early intervention with FL-EPIC practices so that early intervention is embedded in their daily school routines as well as home routines.

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

Florida Embedded Practices and Intervention with Caregivers (FL-EPIC), Setting the Stage, Observation and Opportunities to Embed, Problem-Solving and Planning, Reflection and Review (SOOPR), 5 Question (5Q), Pyramid Model, and Tools for Early Steps Teams (TEST) Toolkit.

Provide a summary of each evidence-based practice.

Florida continues to use a multi-tiered evidence-based practices approach to improve the social interactions and well-being and two additional child outcomes. Embedded Practices and Intervention with Caregivers (EPIC: Woods et al., 2018) was adapted for use in Florida as FL-EPIC. FL-EPIC is a caregiver-coaching and naturalistic intervention approach for enhancing caregivers' capacity to embed intervention in child and family routines. Providers coach caregivers using evidence-based home visiting practices organized under a caregiver coaching approach referred to as SOOPR (Setting the Stage, Observation and Opportunities to Embed, Problem-Solving and Planning, Reflection and Review). Caregivers are coached by providers to use a 5-question (5Q) embedded intervention (EI) framework to support their child's development and learning. A 5Q Family Visual Model promotes the daily use of EI practices in child and family routines. Pyramid Model social interactions and well-being practices are used with FL-EPIC to support EI focused on social interactions and well-being competence and positive behavior supports (Hemmeter et al., 2016). TEST (Tools for Early Steps Teams) Toolkit evidence-based practices were adapted from the Tennessee Early Intervention Data System (TEIDS)-Plus Project (Ridgley et al., 2011) for use in Florida. The TEST Toolkit has six elements that include family- and child-centered evidence-based practices to support the multi-tiered approach. TEST ensures alignment of evidence-based practices, including FL-EPIC, are used by all Early Steps personnel from first contacts with families through evaluation/assessment, IFSP development and implementation, FL-EPIC service deliver, and transition. (<https://www.flearlystepslearningcenter.com/testtoolkit>).

Provide a summary of how each evidence-based practices and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g., behaviors), parent/caregiver outcomes, and/or child/outcomes.

The evidence-based practices are used together to increase provider competence and confidence to implement caregiver coaching, which in turn increases families' confidence and competence to embed intervention that supports child learning and development, including social, emotional, and behavioral learning. Statewide FL-EPIC ESPD implementation and scale up and sustainability activities are guided by the Active Implementation Frameworks (Fixsen, Blase, et al., 2019). State Systemic Improvement Plan implementation activities by the IHE Team have focused on professional development as a competency driver to support the fidelity of implementation of FL-EPIC ESPD, integrated with local and state leadership and organizational drivers.

The SOOPR (Setting the Stage, Observation and Opportunities to Embed, Problem-Solving and Planning, Reflection and Review) coaching model is designed to increase families' confidence and competence to embed intervention that supports child learning and development. This evidence-based practice model has demonstrated effectiveness with the SiMR which is to increase the percentage of infants and toddlers who exit early intervention with an increased rate of growth in social interactions and well-being. Using the 5Q Family Visual model also supports the SiMR as it serves as a daily reminder to use EI practices in child and family routines. The TEST Toolkit has six elements that include family- and child-centered evidence-based practices to support the multi-tiered approach. TEST ensures alignment of evidence-based practices, including FL-EPIC, are used by all Early Steps personnel from first contacts with families through evaluation/assessment, IFSP development and implementation, FL-EPIC service delivery, and transition.

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

The evidence-based practices are used together to increase provider competence and confidence to implement caregiver coaching, which in turn increases families' confidence and competence to embed intervention that supports child learning and development, including social, emotional, and behavioral learning. Statewide FL-EPIC ESPD implementation and scale up and sustainability activities are guided by the Active Implementation Frameworks (Fixsen, Blase, et al., 2019). State Systemic Improvement Plan implementation activities by the IHE Team have focused on professional development as a competency driver to support the fidelity of implementation of FL-EPIC ESPD, integrated with local and state leadership and organizational drivers.

As a part of the statewide sustainability and scale-up of FL-EPIC ESPD, in FFY 2023-2024, the ESSO and IHE Team collaborated to develop a plan for adapting FL-EPIC for use in early care and education setting. The initial plan for the expansion of FL-EPIC ESPD to early care and education settings was developed in September 2023 and the initial exploration activities are in progress.

Describe any additional data (e.g., progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.

Checklists and rating scales are used to monitor implementation fidelity and assess practice change and child outcomes. The data collected include fidelity of FL-EPIC Caregiver Coaching Workshops and monthly Provider Learning Communities, coach implementation of practice-based coaching (PBC; Snyder et al., 2022) with providers, provider implementation of SOOPR caregiver coaching practices with caregivers, and caregiver embedded instruction practices. These data inform changes to ongoing implementation and intervention supports. In FFY 2023-2024, all FL-EPIC workshops were facilitated independently by Lead Implementation Coaches and Provider Coaches (n=24) or co-facilitated with the IHE Team (n=4). As described previously, on average, IHE- and coach-reported fidelity for workshops, monthly Provider Learning Community meetings, and practice-based coaching remain above 80%. The IHE Team provided individualized technical assistance through written feedback and virtual meetings for Lead Implementation Coaches and Provider Coaches whose implementation fidelity was < 80% to enhance their implementation of practice-based coaching. In addition, the IHE Team provided professional development during monthly coach calls to support coaches' self-monitoring of their implementation of practice-based coaching.

Provider implementation of SOOPR caregiver coaching practices was measured pre-and post-coaching through observations of home visit videos conducted by Lead Implementation Coaches and Provider Coaches. Practice change was evaluated by examining the percentage of six essential

SOOPR practices in their first and last home visit video. SOOPR practice implementation was examined for 139 out of 175 providers (79%) providers who completed their initial 6 - 9 months of FL-EPIC ESPD in FFY 2023-2024 and who received at least three practice-based coaching sessions. Results showed 6% to 36% increases in the percentage of providers who implemented each of the six essential caregiver coaching practices. In addition, data were only analyzed for home visits with families whose agreement to participate in FL-EPIC ESPD was documented in the FL-EPIC ESPD enrollment log maintained by the local program site.

Caregivers' use of embedded instruction and Pyramid Model practices was evaluated by the IHE Team review of 5Q Family Visual Models and a caregiver-reported embedded intervention self-efficacy scale. On average, the 5Q Family Visual Models showed a 6% increase (range = 3% - 8%) for six of the seven categories of Pyramid Model practices implemented by caregivers during embedded intervention. The percentage of caregivers who agreed with five embedded intervention self-efficacy statements was 6% to 12% higher after their providers participated in FL-EPIC ESPD.

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

As a part of the next steps of FL-EPIC ESPD, in FFY 2023, the ESSO and IHE Team collaborated to develop a plan for adapting FL-EPIC for use in early care and education settings. The initial plan for the expansion of FL-EPIC ESPD to early care and education settings was developed in September 2023 and the initial exploration activities are in progress. The anticipated outcome from this expansion is to allow more providers to participate in the FL-EPIC programs and engage in partnerships with the early care and education sites to increase access for children to receive early intervention with FL-EPIC practices so that early intervention is embedded in their daily school routines as well as home routines.

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

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

For the FL-EPIC ESPD internal evaluation, data about children's progress were collected at two points: when providers attended the FL-EPIC Workshops and when they completed approximately six months of FL-EPIC ESPD activities, which included practice-based coaching. The data reported are for 95 children whose providers completed FL-EPIC ESPD in FFY 2023-2024 and for which there is a pre- and a post- FL-EPIC Child Outcome Summary (COS). Of these children, 63% substantially increased their rate of growth with respect to Outcome1 (positive social interactions and well-being skills), and 38% were within age expectations at the end of the provider's participation in FL-EPIC ESPD. For Outcome 2 (acquisition and use of knowledge and skills) 64% of children substantially increased their rate of growth and 23% were within age expectations at the end of their provider's participation in FL-EPIC ESPD. For Outcome 3 (use of appropriate behaviors to meet needs), 57% of children substantially increased their rate of growth and 29% were within age expectations at the end of their provider's participation in FL-EPIC ESPD. These data show the progress children made in each outcome area after they and their caregivers received approximately six months of FL-EPIC caregiver coaching support by providers to embed intervention on priority social interactions and well-being and other child outcome-related skills. Data from SSIP internal evaluation activities will continue to be examined to ensure progress toward improving children's outcomes, including their social interactions and well-being outcomes.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Interagency Coordinating Council:

The Early Steps Program maintains a statewide advisory council, the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities. FICCIT is comprised of governor appointed members who are representative of the state's population. Membership includes participation from several state agencies, such as Early Head Start, the Agency for Health Care Administration, Department of Children and Families, Department of Education, as well as universities, providers of early intervention, and parents of infants and toddlers with disabilities.

Stakeholder Workgroups:

In accordance with Section 391.308(2)(c), Florida Statutes, the Early Steps Program is required to annually :

Develop a State Plan through an inclusive process that involves families, local programs, health care providers, and other stakeholders.

The Early Steps Program established five workgroups to assist with Early Steps Program strategic planning for program priorities. Representatives included members of FICCIT, local programs, parents, and other state agencies and programs that serve young children and their families. The stakeholder groups provide opportunity for input in the preparation of the Early Steps State Plan. Input is gathered through face-to-face meetings, webinars, and video/conference calls.

The stakeholder workgroups have also completed the Early Childhood Technical Assistance (ECTA) System Framework or the Center for IDEA Early Childhood Data Systems (DaSy) Data System Framework Self-Assessments as tools to record the status of the state system and set priorities for improvement in each of the areas addressed by the workgroup. The results of these self-assessments have been used to develop action and sub-action steps for planning and implementation. The groups meet throughout the year to monitor progress towards implementation of action steps, review data to determine progress, and provide additional information on achievements or challenges.

The stakeholder workgroups met and reviewed historical data and targets on September 29, October 4, 8, 11, 19, and December 2, 2021, to provide input and recommendations for setting new targets for FFY 2020-2025. When reviewing information, the workgroups focused on the data collection tools, data quality, and trends in performance. Analysis for meeting or not meeting previous targets was discussed. Continued impact of the public health emergency and weather emergencies were also considered. The results of stakeholder input target setting were shared with the FICCIT, prior to the submission of the targets.

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

The experiences of stakeholders were used to shape the implementation and evaluation of the evidence-based practices, including the revision of mandatory trainings for all Early Steps personnel, the statewide sustainability and scale-up of FL-EPIC ESPD, and the expansion of FL-EPIC ESPD to early care and education settings. Local program administrators, Lead Implementation Coaches, Provider Coaches, Family Resource Specialists, and Professional Development Credentialing Coordinators were involved in developing and revising professional development materials, refining coaching tools, developing and refining tools and implementation supports for sustainability and scale-up, and enhancing other State Systemic Improvement Plan

activities. Feedback was collected during breakout discussions at monthly coach calls and quarterly cross-site meetings. In addition to these activities, a workgroup was formed of state office representatives, Lead Implementation Coaches, Provider Coaches, and local program administrators to make recommendations for revisions or enhancements to the FL-EPIC ESPD Coaching Manual, Individual Coaching Session Fidelity Checklist, and supplemental resources for Lead Implementation Coaches and Provider Coaches. Providers were surveyed to evaluate FL-EPIC Workshops, monthly Provider Learning Communities, and practice-based coaching. Parent/caregiver stakeholders were surveyed to evaluate providers' caregiver coaching practices and rate their self-efficacy in embedded intervention to support their child's development and learning. Administrators, coaches, and PDCCs participated in a focus group discussion during the Quarter 4 cross site meeting to identify priorities and make recommendations for expanding FL-EPIC to early care and education settings. Stakeholder feedback from these activities will be used to inform implementation activities for the exploration and initial installation of FL-EPIC in early care and education settings in 2024-2025 and 2025-2026.

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

NO

Additional Implementation Activities

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

N/A

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

N/A

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

N/A

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

None

11 - OSEP Response

The State did not describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program policies, procedures, and/or practices.

The State did not describe the next steps for each of the infrastructure improvement strategies identified by the State, and the anticipated outcomes to be attained during the next fiscal year.

11 - Required Actions

Indicator 12: General Supervision

Instructions and Measurement

Monitoring Priority: General Supervision

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

Data Source

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

Measurement

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

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

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

12 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	93.10%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

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

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
11	0	10	0	1

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

There were no additional findings reported related to other IDEA requirements.

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

The Early Steps State Office conducted a second round of reviews of child records for each of the eleven local programs with findings of noncompliance. The Early Steps State Office reviewed updated data through a subsequent sample of 205 records for the eleven programs. This was done by reviewing the record for each child's IFSP documents and case notes with service start date information. Ten of the eleven local programs achieved 100% compliance in this review. Another review of subsequent data was completed for the eleventh program with a sample of 15 records. This was done by reviewing the IFSP documents service start date forms provided by the local program. The program achieved 100% compliance in the subsequent review.

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

Thirty-five children in the eleven local programs did not receive early intervention services in a timely manner. For each individual case of noncompliance, the Early Steps State Office verified that the responsible program did initiate services for each of the thirty-five children, although late. Verification was completed by requiring the local programs to provide follow up documentation that confirms services were initiated

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

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
4	0	3	0	1

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

There were no additional findings reported related to other IDEA requirements.

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a subsequent review of child records for each of the four local programs with a finding of noncompliance for this indicator. The Early Steps State Office reviewed updated data through a subsequent sample of 94 records for the four programs. This was done by reviewing the referral and IFSP dates in the data system and verifying the information with the referral form and IFSP documents provided by the local programs. Three of the four programs achieved 100% compliance in the subsequent review within one year. Another review of subsequent data was completed for the fourth program with a sample of 15 records. This was done by reviewing the referral and IFSP dates in the data system and verifying the information with the referral form and IFSP documents provided by the local program. The program achieved 100% compliance in the subsequent review.

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

Thirty-six children did not receive an initial evaluation and assessment and an initial IFSP meeting conducted within Part C's 45-day timeline. For each individual case of noncompliance, the Early Steps State Office verified that the local programs conducted the evaluation and assessment and Individualized Family Support Plan (IFSP) meeting for each child, although late. The verification was based on follow up reporting and reviews by the local program with documentation of individual children whose evaluation and assessment and initial IFSP meeting had not been completed within the original 45 days.

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

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

Findings of Noncompliance Identified in FFY 2022

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

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

There were no additional findings reported related to other IDEA requirements.

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a second review of child records for each of the six local programs with findings of noncompliance. The Early Steps State Office reviewed updated data through a subsequent sample of 83 records for the six local programs. This was conducted by reviewing a subsequent sample of IFSP records to ensure steps and services were provided within at least 90 days and not more than nine months prior to the toddler's third birthday. The six local programs achieved 100% compliance in the subsequent review of the sample of records.

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

Twenty-three children did not receive an IFSP with transition steps and services within at least 90 days and at the discretion of all parties, not more than nine months prior to the toddler's third birthday. The Early Steps State Office verified that the local programs developed an IFSP with transition steps and services, although late, for the twenty-three children. This verification was based on follow up reporting and review of documentation provided by the local programs.

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

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

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
2	0	2	0	0

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

There were no additional findings reported related to other IDEA requirements.

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a subsequent review of child records for each of the two local programs with findings of noncompliance. The Early Steps State Office reviewed a subsequent sample of thirty records for the two local programs with findings. The two local programs achieved 100% compliance on the subsequent reviews. This was completed by reviewing a subsequent sample of notification lists sent to the Local Education Agency and State Education Agency and verifying the information was sent in a timely manner at least 90 days prior to the toddler's third birthday.

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

Notification to the State Education Agency (SEA) and the Local Education Agency (LEA) where the toddler resides was late for four children. The Early Steps State Office verified that the local program provided notification to the State Education Agency (SEA) and the Local Education Agency (LEA) where the toddler resides. Although notification was sent outside of the 90-day notification period requirement, it did occur prior to each toddler's third birthday for the four toddlers. This verification was based on follow up reporting and review of documentation provided by the local program.

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

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

Findings of Noncompliance Identified in FFY 2022

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

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

There were no additional findings reported related to other IDEA requirements.

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

To ensure noncompliant practices have been revised and the local programs are correctly implementing the regulatory requirements, the Early Steps State Office conducted a second review of child records for each of the six local programs with findings of noncompliance. The Early Steps State Office reviewed updated data through a subsequent sample of 83 records for the six local programs. This was completed by reviewing a subsequent sample of IFSP records to ensure the transition conference was conducted within at least 90 days and not more than nine months prior to the toddler's third birthday. The six local programs achieved 100% compliance in the subsequent review of the sample of records.

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

Twenty-two children did not receive a transition conference within at least 90 days and at the discretion of all parties, not more than nine months prior to the toddler's third birthday. The Early Steps State Office verified that the local program did conduct a transition conference. Although late, the transition conference was held before the toddler's third birthday for all twenty-two children. This verification was based on follow up reporting and review of documentation provided by the local program.

Optional for FFY 2023, 2024, and 2025:

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

Column B: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Column B for which correction was not completed or timely corrected
0	0	0

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

There were no additional findings reported as a result of the fiscal monitoring of system of payment and payor of last resort.

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

There were no additional findings or noncompliance identified as a result of the fiscal monitoring of system of payment and payor of last resort.

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

There were no additional findings or noncompliance identified as a result of the fiscal monitoring of system of payment and payor of last resort.

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

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
29	0	27	0	2

FFY 2023 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified in FFY 2022	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
27	29		100%	93.10%	N/A	N/A

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	6.90%
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Provide additional information about this indicator (optional)

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

1. Number of findings of noncompliance the State identified during FFY 2022 (the period from July 1, 2022 through June 30, 2023).	29
2. Number of findings the State verified as timely corrected (corrected within one year from the date of written notification to the EIS program/provider of the finding)	27
3. Number of findings <u>not</u> verified as corrected within one year	2

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

4. Number of findings of noncompliance not timely corrected	2
5. Number of written findings of noncompliance (Col. A) the State has verified as corrected beyond the one-year timeline ("subsequent correction") - as reported in Indicator 1, 7, 8A, 8B, 8C	2
6a. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 1	0
6b. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 7	0
6c. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 8A	0
6d. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 8B	0
6e. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 8C	0
6f. (optional) Number of written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Other Areas - <u>All other findings</u>	0
7. Number of findings <u>not</u> yet verified as corrected	0

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

The two local programs with subsequent correction were required to complete root cause analysis and performance improvement plans to correct the noncompliance. Increased technical assistance and monthly data reviews were completed. Reviews with subsequent data were completed by reviewing the referral and IFSP dates in the data system and verifying the information with the referral form and IFSP documents and service start date forms provided by the local program. The two programs achieved 100% compliance in the subsequent review of the sample of records.

12 - OSEP Response

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

12 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

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:

Jessica Meyer

Title:

Florida IDEA Part C Coordinator

Email:

Jessica.Meyer@flhealth.gov

Phone:

8508418647

Submitted on:

04/22/25 1:41:19 PM

Determination Enclosures

Data Rubric

Florida

FFY 2023 APR (1)

Part C Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8A	1	1
8B	0	0
8C	1	1
9	1	1
10	1	1
11	1	1
12	1	1

APR Score Calculation

Subtotal	13
Timely Submission Points - If the FFY 2023 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	18

(1) In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/Settings Due Date: 7/31/24	1	1	1	3
Exiting Due Date: 2/19/25	1	1	1	3
Dispute Resolution Due Date: 11/13/24	1	1	0	2

618 Score Calculation

Subtotal	8
Grand Total (Subtotal X 2.11111111) =	16.89

Indicator Calculation

A. APR Grand Total	18
B. 618 Grand Total	16.89
C. APR Grand Total (A) + 618 Grand Total (B) =	34.89
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	38.00
D. Subtotal (C divided by Denominator) (3) =	0.9181
E. Indicator Score (Subtotal D x 100) =	91.81

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 2.11111111 points are subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.11111111.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2025 Submission

SPP/APR Data

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

Part C 618 Data

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

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part C Child Count and Setting	Part C Child Count and Settings in EMAPS	7/31/2024
Part C Exiting	FS901	2/19/2025
Part C Dispute Resolution	Part C Dispute Resolution Survey in EMAPS	11/13/2024

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

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection.

Dispute Resolution

IDEA Part C

Florida

Year 2023-24

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

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	0
(1.1) Complaints with reports issued.	0
(1.1) (a) Reports with findings of noncompliance.	0
(1.1) (b) Reports within timelines.	0
(1.1) (c) Reports within extended timelines.	Not Valid and Reliable
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	0

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	0
(2.1) Mediations held.	0
(2.1) (a) Mediations held related to due process complaints.	0
(2.1) (a) (i) Mediation agreements related to due process complaints.	0
(2.1) (b) Mediations held not related to due process complaints.	0
(2.1) (b) (i) Mediation agreements not related to due process complaints.	0
(2.2) Mediations pending.	0
(2.3) Mediations not held.	0

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	0
Has your state adopted Part C due process hearing procedures under 34 CFR 303.430(d)(1) or Part B due process hearing procedures under 34 CFR 303.430(d)(2)?	PARTB
(3.1) Resolution meetings (applicable ONLY for states using Part B due process hearing procedures).	0
(3.1) (a) Written settlement agreements reached through resolution meetings.	0
(3.2) Hearings fully adjudicated.	0
(3.2) (a) Decisions within timeline.	0
(3.2) (b) Decisions within extended timeline.	0
(3.3) Hearings pending.	0
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	0

State Comments:

An official complaint was received 3/23/23 and due to reporting timeframes for Dispute Resolution 2022-2023, the complaint is marked as pending. However, due to an extended timeline, the final report was issued on 10/12/23 and the results will be specified for Florida's Dispute Resolution Report, 2023-2024. Florida will be adopting Part C due process hearing procedures for the next reporting cycle.

Errors:

Please note that the data entered result in the following relationships which violate edit checks:

PartC-DR-002: $(1.1.b + 1.1.c) > 1.1$

State error comments:

An official complaint was received 3/23/23 and due to reporting timeframes for Dispute Resolution 2022-2023, the complaint is marked as pending. However, due to an extended timeline, the final report was issued on 10/12/23 and the results will be specified for Florida's Dispute Resolution Report, 2023-2024.

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

These data were extracted on the close date:
11/13/2024