# PR Part C

# FFY2017 State Performance Plan / Annual Performance Report

4/16/2019 Page 1 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

#### **Executive Summary:**

Federal Fiscal Year 2017 (FFY 2017) was an extremely unusual year for the Puerto Rico Early Intervention Program. The year started with new financial procedures and clearances implemented by different agencies as a result of the establishment of the federal PROMESA Act, the establishment of a new administration for the commonwealth, and the effect of two major hurricanes (Irma and María) that affected the Island. The impact of the two hurricanes affected the daily routines of everyone in the Island for many months after.

All of those situations had an effect in the EIP, in particular hurricane María, that made landfall in the Island on September 20, 2017 and affected its infrastructure for more than 6 months. One week after the hurricane hit, as soon as the roads were open and secure, EI personnel was assigned to the shelters and communities trying to locate participant families and identifying other families that may need EI services. As soon as a family was contacted, the available service providers continued with their visits and services as established in the IFSPs. As part of the management and response plan of the DoH, program nurses were required to visit regional shelters to serve as contacts between the communities and the agencies, and to coordinate assistance and services. Some of our service coordinators and service providers had substantial loss and decided to move permanently to the Continental US which had an impact in terms of EI services, and this effect is reflected in this APR.

As a result of the hurricane our child count was affected as well; the EIP lost 410 families in FFY 2017, 253 of them moved to continental US between September and December 2017. During the response to the emergency, our regional staff had the opportunity to establish connections with federal employee's deployed for the emergency. Thanks to that collaboration, our regional staff was able to be more effective in service coordination for participant families affected by the hurricane. From OSEP, Kate Moran was deployed to Puerto Rico and facilitated our communication with the FEMA representative for special populations. As a result of the emergency response collaborations, our service coordinators and providers were able to locate families in rural (inaccesible) areas and address their needs.

In terms of personnel development, during FFY 2017 some of our CSPD activities were re-scheduled and we included trainings in resilience as well as in strategies to work with families after a disaster. The activities were provided in the north and west areas of the Island, and were provided in collaboration with the PR UPR-UCEDD. The resilience technical assistance activity served two main purposes: to provide strategies for services coordinators and providers to cope with families in crisis and also to provide a safe space for the staff to talk about their own circumstances, fears, and concerns. After the recovery activities were performed, CSPD activities were provided as planned in the SSIP. A total of 6 trainings were provided to EI personnel, including: family centered practices, coaching, and reflexive supervision, among others. Puerto Rico EIP continue its participation in the Early Childhood Personnel Center of the UCONN and receiving technical assistance for personnel development.

Despite the delicate circumstances for the reported fiscal year, we continue with our improvement efforts. During FY 2017, we had a 100% compliance with indicator 2 (services in natural environments) and indicator 7 (Development of an IFSP within 45 days). In terms of results (indicator 3), we were able to evaluate 90.16% of Part C exits and found that we exceeded the established goals for the three outcomes on both summary statements.

Regarding family outcomes, Puerto Rico is currently using the NCSEAM family survey. Each family that exited Part C and received services for at least 6 months was invited to complete a voluntary non-identifying questionnaire. During FFY 2017 a total of 635 families completed the questionnaire, for a response rate of 20.3%. In terms of results, we found that a 97 percent of the survey participants indicated that the program helped them to know their rights; a 96% expressed that the program helped them to communicate more effectively their children needs; and almost the totality of the survey participants (99.27%) believed that the program helped them to help their children in their development and learning. These figures represent marginal improvement in all three indicators when compared to the previous FFY. It is important to mention that family active participation in all of the early intervention processes is one of the priorities included in the Puerto Rico SSIP. As a result, in the near future the state will be identifying strategies to increase the response rate of the family survey and also will be evaluating if the NCSEAM is the best survey tool to collect information on family participation and satisfaction. We continue with efforts towards strengthening relations with the Puerto Rico PTI Center: Apovo a Padres de Niños con Impedimento (APNI Spanish Acronym). In addition to the collaboration with APNI, the program is making a collaboration agreement with the new HRSA Family to Family Health Information Center project awarded to the University of Puerto Rico Center of Excellence for Developmental Delays (UCEDD). As part of this new collaboration, the program plans to increase the number of parents trained and certified in procedural safeguards and mediation. In addition, through the HRSA project: Puerto Rico partnership to optimize family support for families affected by Zika, the EI program is strengthening its relationship with other agencies and partners that are part of the system.

Transition to preschool continues to be the most challenging area. During FFY 2017, Puerto Rico had comparable results for indicators 8A and 8C in comparison to the results in FFY 2016; with a slippage in indicator 8B. During FFY 2018 we have been implementing some strategies to improve the notification of potentially eligible children to Part B, including monthly projections of transitions to provide enough time for Part B and Part C regional staff to plan ahead to conduct transitions in a seamless way.

In terms of child find activities, the EIP has been doing several activities, specially to increase the proportion of eligible children with developmental delays with IFSP's (before 1 year of age, indicator 5). As part of the activities performed, all regional teams are promoting the EI services in Pediatric facilities, WIC offices, and other agencies sites. The state team also participated in eduational activities developed by the Puerto Rico College of Physicians offered to pediatritians and general practitioners. Formal collaboration agreements were established with the University of Puerto Rico to provide education on child development to pediatry interns and also to be a Page 2 of 32

practicum site for the early intervention academic certification of the UCEDD. Collaboration efforts are made also to update the MOU betwen the Early Head Start / Head Start Programs and the EIP.

Finally, aside from the hurricanes, Puerto Rico has a critical financial crisis and is under the Title II of bankruptcy. This situation has an effect in all the population, especially families with children with disabilities. The EI program will continue providing services for eligible children and their families and OSEP has committed to continue providing direct assistance in the recovery efforts.

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#### **General Supervision System:**

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

The lead agency for Puerto Rico Part C is the Puerto Rico Department of Health (PRDOH). The program is located under the Maternal, Child and Adolescent Division and has seven regional offices island-wide. Regional staff is led by a regional early intervention supervisor who is responsible for the supervision of intake and service coordinators, service providers and other private or community based corporations that are contracted to provide services to eligible children.

During FFY 2017, the Puerto Rico Early Intervention Program made substantial efforts to improve child and family outcomes by strengthening each of the components required under the Part C of IDEA. Part C has a single line of responsibility. The Part C Coordinator, is responsible for overseeing all the program activities, collaborations, and accountability, the Program Evaluator is responsible for monitoring and evaluation activities, the Data Manager that is in charge of collecting and analyzing all the data from regional offices, and a child development consultant to guarantee an appropriate implementation of the procedures and routine based strategies. As part of the accountability process, the Supervision and Monitoring Unit (SMU) performs regular on-site visits to all early intervention regional programs. In those site visits, monitoring activities are carried out, such as record review, and provides guidance to the regional staff based on monitoring results and on the analysis of data submitted by the regional supervisors on an ongoing basis.

Findings of data analysis, site visits and periodic reports are discussed in the supervisors' monthly meetings to timely address noncompliance risks or special situations that may affect child outcomes. Service providers are monitored using OSEP results indicators data, monthly reports, progress notes, and analyzing financial data such as professional services invoices. If a correction action is needed, instructions for correction are provided using official memos. Puerto Rico Early Intervention Program corrects findings of noncompliance within a year of notification, consistent with OSEP memo 09-02.

APR results (report version and a family friendly version) are available for public comment in the Puerto Rico Department of Health website and also are available in the regional offices bulletin boards. The following link provide access to the APR report: <a href="http://www.salud.gov.pr/Dept-de-Salud/Documents/Divisi%C3%B3n%20de%20Madres%20y%20Ni%C3%B1os">http://www.salud.gov.pr/Dept-de-Salud/Documents/Divisi%C3%B3n%20de%20Madres%20y%20Ni%C3%B1os</a> /Public%20Reporting%20FFY%202016%202.pdf

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#### Technical Assistance System:

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

Technical assistance for the program is led by the child development consultant who is a specialist in developmental pediatrics. The consultant works closely with the Supervision and Monitoring Unit and addresses identified issues related with early intervention processes, development of functional outcomes, eligibility determinations and ongoing assessments. Trainings are tailored to regions according to monitoring findings. Tools developed by NCSI, ECTA/DaSy and the ECO Center are used in the TA system, and frequently the UPR/UCEDD/LEND program provides feedback as well. Some of the training topics covered by the TA leader include: child assessment, evaluation, eligibility criteria, child outcomes measurement, and functional outcomes. The consultant has expertise in child development and knowledge of the IDEA, norms, procedures, and regulations, ECTA guidelines and Child Outcomes measurement.

One technical assistance strategy used is to include one DEC recommeded practice in every supervisors monthly meeting and provide time in the agenda to share the practice as suggested by the ECO Center and discuss how those practices are being or could be

4/16/2019 Page 3 of 32

implemented at the regional level.

Periodic conference calls with TA persons of NCSI and other TA centers are schedule to discuss implementation of strategies to improve results and ensure high quality services.

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

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

The child development consultant is the leader in charge of training service providers in the delivery of services in Natural Environments (NE) to improve results for infants and toddlers with disabilities and their families. Trainings are provided on-site in each EI regional Programs. Supervisors meet monthly with the Part C coordinator to discuss providers' performance in NE, appropriate COS ratings, and the proper use of the decision tree to improve outcomes for children and families. The consultant gathers their input and coordinates meetings at the regional offices to provide technical assistance and continuous training to ensure that providers have the skills to effectively provide services that improve results for infants and toddlers with disabilities and their families. As part of the State Systemic Improvement Plan, PR EIP established and has maitained an agreement with the Puerto Rico University of Puerto Rico UCEDD/LEND program to serve as the early intervention system scientific partner. With this collaboration, the system personnel will receive the latest information and in service training in evidence based practices that can be translated in strategies to ensure high quality services for the children and families. Another important activity performed towards the improvement of the CSPD was the continuation with the implementation of a team of early childhood leaders that are receiving intensive technical assistance by the University of Connecticut Early Childhood Personnel Center (ECPC). The group includes representatives of early intervention, Early Childhood, Special Education Program, the governor's Council for Early Childhood, Early Head Start/Head Start, and other partners. The goal of the ECPC leaders group is to improve and implement a standard uniform personnel development system across the different agencies that provide services to this population.

During 2017 and as part of the implementation of the SSIP, El personnel received extensive trainings in Family centered services, Coaching, Reflexive Supervision, Working with families in emergency situations, among other topics.

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**Stakeholder Involvement:** apply this to all Part C results indicators

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

The Puerto Rico State Interagency Coordination Council (SICC) is the group that brings together the main PR EIS stakeholders. During 2016, the SICC worked together in 3 meetings to provide input on issues regarding, personnel development, SSIP, determination results, compliance with IDEA requirements and other collaboration activities. As in the previous year, the January meeting is to analyze and discuss all the information included in the APR to be submitted at February 1<sup>st</sup>. During the following meetings, the SICC continue with its assessment of the system infrastructure to identify possible barriers that can affect the implementation of the identified improvement strategies. The Puerto Rico stakeholder group is composed of representatives of Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children's Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service CBO), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service CBO), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services. During the present funding period, Puerto Rico will be updating SICC representation with the inclusion of representatives of family health information groups and other community based organizations.

As part of their feedback to this year APR, the stakeholders suggest the development of an analysis of the long term educational results of children that received services in the EIP. The state team will be sharing this information with the director of the Institute for Developmental Delays (UPR) to evaluate different options and viability of the suggestion.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
How and where the State reported to the public on the FFY 2016 performance of each EIS Program or Provider 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 2016 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2016 APR in 2018, is available.

Puerto Rico have made its FFY 2016 APR available through public means, including posting on the website of the Puerto Rico Department of Health and distribution through public agencies, including the Puerto Rico Department of Education, Early Head Start/Head Start Programs, Department of the Family, Office of the Ombudsman for Persons with Disabilities, Developmental Disabilities Council, University Center of Excellence in Developmental Disabilities, and the Parents Training Center. Puerto Rico Annual Performance Report will be available in English and a detailed document with the results for Indicators one (1) through eight (8) by Early Intervention Programs (EIP) compared to overall Puerto Rico performance was developed in Spanish and posted on the Department of Health website.

The FFY 2016 APR presentation is available here:

 $\underline{http://www.salud.gov.pr/Dept-de-Salud/Documents/Divisi%C3\%B3n\%20de\%20Madres\%20y\%20Ni\%C3\%B1os/Public%20Reporting\%20FFY\%202016\%202.pdf$ 

Attachments			
File Name	Uploaded By	Uploaded Date	Remove
public reporting ffy 2016.pdf	Ana Marie Ríos López	1/29/2019 1:45 PM	
sicc chair certification.pdf	Abraham Rivera Alvarado, DrPH	1/31/2019 1:18 PM	
public reporting ffy 2016 2.pdf	Ana Marie Ríos López	4/16/2019 2:32 PM	

Actions required in FFY 2016 response

4/16/2019 Page 5 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 1: Timely provision of services

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)

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		80.50%	93.00%	93.70%	96.00%	98.20%	97.10%	97.00%	99.30%	96.69%	99.37%

FFY	2015	2016
Target	100%	100%
Data	99.46%	100%

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#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

#### FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data
198	228	100%	100%	97.81%

#### Reasons for Slippage

Slippage is observed on this indicator for various reasons. In three records reviewed, the service starting date established in the IFSP exceeded the 30-day period that is permitted. In two of them, the start date was day 31 after parent consent, and in another, day 37. No documented reasons were found in the record to justify the date selection, such as the availability of the family to receive the services soon after the IFSP meeting. In another case, the contracted corporation for service provision experienced the resignation of a service provider, which resulted in the delay. The service was provided when a new provider was available to work with the families. In the remaining non-compliance event, the service provider was not aware of the start date established on the IFSP. When the person went to offer the service, on another date and already exceeding the 30-day period, the daycare center where the child used to receive the services, was closed due to a holiday recess. In agreement with the family, the service was provided on day 40.

These events of non-compliance were thoroughly discussed with the regional supervisors so they can implement new practices to avoid future delays in service provision.

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

The Supervision and Monitoring Unit (SMU) considers that a service has been provided in a timely manner if the period from parent consent, at the IFSP meeting, to the day that the service is provided is 30 days or less. During monitoring and data collection activities, randomly selected records are reviewed, and specifically, the IFSP date and the date of service provision in the service provider's progress notes are taken into account. If there is a case where services were provided more than 30 days from the written consent, the evaluator will then look for the reasons of the delay to classify the events of non-compliance in extraordinary family circumstances or of program-related causes.

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

State monitoring

State database

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

The Puerto Rico Part C team selected the records for the evaluation of Indicator 1 according to the date of the IFSP meeting. The inclusion criterion was that the IFSP had to be developed between July 1st, 2017 and June 30th, 2018. All (7) seven El programs in Puerto Rico were included for data collection. The State office does not make a sample to select some local programs for monitoring purposes on this indicator. The SMU used the regional child count report to produce a list of records that fall within the inclusion criterion for the selection of a random sample. A random numbers list is generated based on the sample size calculated using the web-based tool, OpenEpi. Records are then chosen matching the number from the random numbers list. For all regional programs, data were collected through onsite monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors. After the on-site data collection is made, the SMU performs the analysis and, if necessary, calls the regional supervisors for further information and clarifications. Documented exceptional family circumstances that prevented timely provision of services are included in the numerator and denominator for calculating the data.

4/16/2019 Page 6 of 32

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

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

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

In addition of the five events of non-compliance discussed above, the SMU found 6 hurricanes Irma and Maria related cases during monitoring activities. The State office classified the events as hurricane related if the number of days between parent consent and service provision exceeded 30 days because of the extreme weather conditions or its consequences, such as, closed EIP offices, safety concerns regarding houses, highways or streets, lack of electricity, running water or functional communication networks, family displacement, among others. If the main reason for service provision delay was one or more of these, even though other causes were observed, such as illness of a family member or the child, the case was classified as hurricane related. If extraordinary family circumstances were observed before at least one of the hurricanes made landfall in the island, exceeding the 30-day timeline, even though hurricane related causes were also recorded in the file, the case was classified as family circumstances.

228 records of all 7 regional programs were reviewed for this indicator resulting in 30 events of non-compliance; 5 cases of program related causes and 25 of family circumstances, including 6 cases of hurricane related reasons for the delay. These numbers were achieved because during recovery efforts after the hurricanes, the State office emphasized on the importance of supporting families and resuming service provision as soon as conditions allow it, while also supporting EIP service coordinators and service providers.

#### Actions required in FFY 2016 response

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

#### Correction of Findings of Noncompliance Identified in FFY 2016

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

4/16/2019 Page 7 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 2: Services in Natural Environments

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)

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target≥			99.20%	99.30%	99.40%	99.50%	99.50%	99.70%	99.70%	99.81%	99.81%
Data		99.70%	99.70%	99.90%	99.00%	99.80%	99.90%	100%	98.40%	99.81%	99.92%

FFY	2015	2016
Target ≥	99.82%	99.82%
Data	100%	100%

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#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	99.83%	99.83%

Key:

#### Targets: Description of Stakeholder Input

Stakeholders play an important role in the identification of settings that promote child development. In those cases where the child needs to be placed in a more appropriate setting, the agencies that are part of the SICC identify posibilities and those alternatives are provided to the families. During the past FFY, all of EI participants (100%) received services in the NE.

#### **Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,243	
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Total number of infants and toddlers with IFSPs	2,243	

#### FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data
2,243	2,243	100%	99.83%	100%

#### Actions required in FFY 2016 response

none

4/16/2019 Page 8 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 3: Early Childhood Outcomes

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)

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)? No

#### **Historical Data**

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2011	Target≥						54.40%	54.50%	54.50%	42.00%	43.79%	43.80%
AI	2011	Data					54.40%	45.20%	33.30%	39.40%	39.20%	43.79%	65.68%
A2	2011	Target≥						68.30%	68.40%	68.50%	55.00%	56.99%	57.00%
AZ	2011	Data					68.30%	53.50%	43.80%	53.90%	46.50%	56.99%	76.24%
B1	2011	Target≥						47.90%	48.00%	48.70%	36.00%	46.63%	46.64%
В	2011	Data					47.90%	39.00%	43.80%	32.50%	31.30%	46.63%	71.10%
B2	2011	Target≥						33.50%	33.60%	33.70%	22.00%	34.68%	34.69%
D2	2011	Data					33.50%	21.30%	16.60%	18.70%	12.60%	34.68%	52.45%
C1	2011	Target≥						40.20%	40.30%	40.40%	34.00%	38.02%	38.03%
Ci	2011	Data					40.20%	35.90%	32.40%	28.30%	29.00%	38.02%	63.10%
C2	2011	Target≥						50.90%	51.00%	51.10%	45.00%	51.35%	51.36%
62	2011	Data					50.90%	41.30%	41.70%	43.90%	37.70%	51.35%	71.74%

	FFY	2015	2016
A1	Target≥	43.81%	43.82%
Ai	Data	63.83%	67.11%
A2	Target≥	57.01%	57.02%
AZ	Data	82.64%	85.14%
B1	Target≥	46.65%	46.66%
В	Data	73.53%	76.03%
B2	Target≥	34.70%	34.71%
DZ	Data	56.01%	56.04%
C1	Target≥	38.04%	38.05%
CI	Data	61.18%	63.54%
C2	Target≥	51.37%	51.38%
G2	Data	77.94%	80.75%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A1 ≥	43.83%	43.84%
Target A2 ≥	57.03%	57.04%
Target B1 ≥	46.67%	46.68%
Target B2 ≥	34.72%	34.73%
Target C1 ≥	38.06%	38.07%
Target C2 ≥	51.39%	51.40%

Key:

#### Targets: Description of Stakeholder Input

The State office explained to the stakeholders about the COS collection method, reporting and data analysis and they are well informed of the continuous EIP efforts to collect more data that are reliable. These have resulted in an increased percentage of children outcomes data reported from 16% in FFY 2013 to 78% in FFY 2015, and now 90% in FFY 2017, when compared to the number of children exiting the Program in the 618 Data Exiting report.

4/16/2019 Page 9 of 32

#### FFY 2017 SPP/APR Data

Number of infants and toddlers	rith IFSPs assessed	3093.00

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	44	1.42%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	406	13.13%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	116	3.75%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	518	16.75%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2,009	64.95%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
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 (c+d)/(a+b+c+d).	634.00	1084.00	67.11%	43.83%	58.49%
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 (d+e)/(a+b+c+d+e).	2527.00	3093.00	85.14%	57.03%	81.70%

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	41	1.33%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	729	23.57%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	703	22.73%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,352	43.71%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	268	8.66%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
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 (c+d)/(a+b+c+d).	2055.00	2825.00	76.03%	46.67%	72.74%
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 (d+e)/(a+b+c+d+e).	1620.00	3093.00	56.04%	34.72%	52.38%

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	53	1.71%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	531	17.17%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	139	4.49%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	608	19.66%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,762	56.97%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
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 (c+d)/(a+b+c+d).	747.00	1331.00	63.54%	38.06%	56.12%

4/16/2019 Page 10 of 32

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
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 (d+e)/(a+b+c+d+e).	2370.00	3093.00	80.75%	51.39%	76.62%

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

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	3120
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.	716

Please note that this data about the number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program is optional in this FFY16 submission. It will be required in the FFY17 submission.

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes

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

All seven (7) local programs in Puerto Rico gather the data through the Child Outcomes Summary Form (COSF). It is filled out the day the initial elegibility for Part C services is determined, at the annual determinatio(s) and at the time of exit. The data collected are also transferred to an Excel sheet designed by the Supervision and Monitoring Unit (SMU). This sheet is sent monthly to the SMU, in which infants and toddlers that exited the Program the month prior the sheet submission, are included. If needed, local programs may review records and/or ask service providers for more information to ensure the data reported are accurate. The SMU makes sure the data are gathered and contacts the local programs if further clarifications are needed. At the time of analysis, the ECTA Center COS Calculator is used as a guidance for data quality and for correcting data issues that were not assessed during the year. The SMU also consolidates the annual regional information into Puerto Rico's report to use it as the indicator 3 data.

The Puerto Rico EIP calculates the number of children exiting Part C also using the COS Calculator. The 6-month period is measured using the date of initial COSF and the exit date. Since the SMU collected 90% of the COS data, 691 is the number of children who did not receive services for at least 6 months, of those who were reported in COS data.

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

This is the first federal fiscal year that it was required for the States to report on all children exiting Part C. Strategies where implemented to ensure the regional programs were gathering the data to report on this indicator, such as monthly follow up. At the time of the analyses, the SMU matched the number of children exiting Part C as reported in 618 Exiting Data report to the number of children with COS data reported by the regional programs. If data were missing or data quality issues arose, further clarifications and more data was requested to the regional program. In instances were the service provider was no longer part of the EIP, the family moved out of the jurisdiction, or exited Part C because of several unsuccessful attempts of contact, the regional nurse was in charge of collecting the data when possible, filling out the Excel form and the regional supervisor to submit it.

In spite of the efforts, the events of the hurricanes made an enormous impact on the monthly pace that regional supervisors were reporting to the SMU. After normal work schedules resumed, supervisors began reporting regularly to the State office, but the delay in service provision and data collection due to the exit of families, service providers and coordinators out of the island to the US mainland, made it difficult to collect the data for all the children that exited Part C in the fiscal year. Some of the strategies used by the State office to collect the data and ensure the accuracy of the reports were shared with the supervisors for them to them with their team, in efforts of improving this percentage.

Actions	required	in	FFV	2016	response

4/16/2019 Page 11 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 4: Family Involvement

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)

#### **Historical Data**

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
	0000	Target≥					85.90%	86.90%	87.90%	88.00%	90.10%	90.46%	90.47%
A	2006	Data			60.00%	87.00%	97.70%	94.00%	96.00%	95.60%	92.92%	90.46%	96.23%
В		Target≥					83.20%	84.20%	85.20%	85.30%	91.10%	89.06%	89.07%
В	2006	Data			57.00%	86.00%	96.20%	93.40%	95.00%	95.00%	92.41%	89.06%	96.23%
		Target≥					89.20%	90.20%	91.20%	91.30%	93.20%	94.39%	94.40%
	2006	Data			79.00%	91.00%	98.90%	95.80%	97.00%	98.00%	95.95%	94.39%	98.12%

		FFY	2015	2016
	Α	Target≥	90.48%	90.49%
	^	Data	96.96%	96.37%
	В	Target≥	89.08%	89.09%
	ь	Data	96.59%	96.12%
ſ	С	Target≥	94.41%	94.42%
L		Data	98.42%	98.00%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A ≥	90.50%	94.51%
Target B ≥	89.10%	89.11%
Target C ≥	94.43%	94.44%

Key:

#### Targets: Description of Stakeholder Input

Previous comments of the stakeholders included the revision of the family survey, the identification of the best times for the survey distribution and a selection criteria for the families to be surveyed.

The EI program team decided to make the survey when the child exit the program in order to collect information of families whose children met their goals or make the transition to Part B. This procedure will allow the program to obtain information of a more diverse group of families.

The suggestion of the SICC members to establish a participation selection criteria was accepted and currently the survey is distributed to every family that have at least 6 months of participation in the program.

#### FFY 2017 SPP/APR Data

Number of families to whom surveys were distributed	635
Number of respondent families participating in Part C 100%	635
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	613
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	635

4/16/2019 Page 12 of 32

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	609
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	635
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	628
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	635

	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	96.37%	90.50%	96.54%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	96.12%	89.10%	95.91%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	98.00%	94.43%	98.90%

Was sampling used? No

Was a collection tool used? Yes Is it a new or revised collection tool? No

The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.

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

Using a 22 item scale of NCSEAM Survey this State has collected the data through face-to-face interviews or through a self-administered questionnaire for families who opted to complete the survey anonymously.

Every family with a child receiving Part C services for at least six (6) months at the time of exit had the opportunity to partake in the survey. The family survey response group represents the population of children that were active in the Early Intervention Program (EIP) from July 1, 2017 to June 30, 2018 in every local program, by age group, eligibility criteria, and by geographic location. Surveys were returned from 7 EIPs throughout Puerto Rico. In total, 635 surveys were returned.

Puerto Rico has selected to apply the standards recommended by NCSEAM as a way of obtaining the percent to be reported for Indicators 4a, 4b, and 4c. To establish a recommended standard, NCSEAM convened a group of nationally representative stakeholders, including parents of children with disabilities, state directors of special education, state early intervention coordinators, district and program personnel, advocates, attorneys, and community representatives. Participants were invited to examine a set of items from the IFS, laid out in their calibration order. The items towards the bottom of the scale, having lower calibrations, are items that families tend to agree with most.

The items towards the top of the scale, having higher calibrations, are items that families tend to agree with least. Because of the robust structure of the scale, a respondent who agrees with a given statement will have a very high likelihood of agreeing, or agreeing even more strongly, with all the items below it on the scale.

Actions	required	in	<b>FFY</b>	2016	response

none

4/16/2019 Page 13 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			0.60%	0.70%	0.50%	0.55%	0.60%	0.61%	0.62%	0.48%	0.49%
Data		0.56%	0.61%	0.63%	0.55%	0.57%	0.59%	0.52%	0.40%	0.49%	0.45%

FFY	2015	2016
Target ≥	0.51%	0.53%
Data	0.66%	0.44%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018	
Target ≥	0.55%	0.57%	

Key:

#### Targets: Description of Stakeholder Input

The PR SICC has an active role in the dissemination of the availability of early intervention services. During the FFY 2015, the SICC collaborated with the EIP in the implementation of Law #200 of 2014. This law requires the PR Department of Health to promote EI services in hospitals, clinics, and service providers' offices. A strategic plan was developed for the implementation of the Law and the EI program has an action plan to disseminate information among health care facilities y service agencies. Each one of the EI regions developed specific dissemination plans using new promotional materials (brochures and posters with child developmental milestones). PR SICC suggested the use of the CDC's **Learn the signs, act early** materials to disseminate information regarding child development as a strategy for early identification by collaborating partners in order to obtain timely referrals.

#### **Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers birth to 1 with IFSPs	106	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 1	null	27,379

#### **Explanation of Alternate Data**

The number of infants and toddlers birth to 1 corresponds to the US Census data population estimates for Puerto Rico for 2017.

#### FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
106	27,379	0.44%	0.55%	0.39%

#### Compare your results to the national data

The National data for FFY 2016 is 1.24%, whereas Puerto Rico's for FFY 2017 is 0.39%. This positions the jurisdiction significantly below national average and below the target established for this indicator.

Several Child Find activities were carried out prior this fiscal year with the objective of meeting this target, such as disseminating EIP information in community settings, for example, hospitals, medical offices and child care centers. Back-to-back hurricanes Irma and Maria increased the rate of emigration that was already affecting the island given its fiscal situation, impacting the number of children served. This percentage is calculated taking into account the number of infants and toddlers birth to 1 with active IFSP's in December 1, 2017, which was still emergency period and many families exited the island to US mainland.

4/16/2019 Page 14 of 32

none	

4/16/2019 Page 15 of 32

### FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 6: Child Find (Birth to Three)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			2.05%	2.10%	2.15%	2.20%	2.25%	2.26%	2.35%	3.08%	3.09%
Data		2.56%	2.85%	3.25%	3.43%	3.61%	3.86%	3.78%	2.98%	3.09%	3.29%

FFY	2015	2016		
Target ≥	3.10%	3.11%		
Data	3.18%	3.08%		

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Up

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	3.12%	3.13%

Key:

#### Targets: Description of Stakeholder Input

The PR SICC has an active role in the dissemination of the availability of early intervention services. During the last FY, the SICC collaborated with the EIP in the implementation of Law #200 of 2014. This law requires the PR Department of Health to promote EI services in hospitals, clinics, and service providers' offices. A strategic plan (see attachment) was developed for the implementation of the Law and the EI program has an action plan to disseminate information among health care facilities y service agencies. Each one of the EI regions developed specific dissemination plans using new promotional materials (brochures and posters with child developmental milestones). PR SICC suggested the use of the CDC's **Learn the signs, act early** materials to disseminate information regarding child development as a strategy for early identification by collaborating partners in order to obtain timely referrals.

#### **Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers birth to 3 with IFSPs	2,243	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 3	null	84752

#### **Explanation of Alternate Data**

The number of infants and toddlers birth to 3 corresponds to the US Census data population estimates for Puerto Rico for 2017.

#### FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
2,243	84,752	3.08%	3.12%	2.65%

#### Reasons for Slippage

FFY 2016 data for Puerto Rico birth to three population was 3.08 and FFY 2017 is 2.65%. Prior to FFY 2017, PR was on track of meeting its target for this indicator with new Child Find activities, despite the fiscal situation of the island. Last fiscal year, although the jurisdiction was affected by lower live birth rates and emmigration, the percent of infants and toddlers birth to three was above national data. But back-to-back hurricanes Irma and Maria made landfall in September 2017, causing the exit of many families out of PR to US mainland in a short period. The lack of electricity, running water, medical services, and in more severe cases, enough food for a day or safe houses, contributed on families seeking help out of the island. This percentage is calculated from the number of children with an active IFSP on December 1st, 2017, when PR was still in emergency status. 253 children exited Part C because their family moved out of PR only between September and December 2017. This number does not take into account children that exited because of withdrawal by parents or because of repeated unsuccessful

4/16/2019 Page 16 of 32

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) attemps of contact that may be related to the emergency, which is a total of 334. The total of families who moved out of PR in FFY 2016 is 163, while for FFY 2017 the total is 412, a difference of 249.	
Compare your results to the national data	

The National data for FFY 2016 is 3.12%, whereas Puerto Rico's for FFY 2017 is 2.65%, which is lower than last year and positions the jurisdiction also lower than the national average.

As part of the Child Find activities, regional supervisors have the ongoing duty of disseminating EIP information in community settings such as hospitals, medical offices or child care centers. The regional programs report back to the State office the strategies being implemented and any difficulties encountered, in monthly meetings, so new improved strategies can be adopted. New posters and brochures were shared with the personnel so these activities can be implemented.

Actions required in FFY 2016 response	
none	

4/16/2019 Page 17 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 7: 45-day timeline

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)

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		86.80%	97.40%	98.40%	93.40%	100%	100%	100%	89.30%	97.35%	99.37%

FFY	2015	2016
Target	100%	100%
Data	98.73%	100%

I/a. n	Gray - Data Prior to Baseline	Valley Deceline
rvey.	Gray - Data Frior to baseline	Tellow - Daselli le

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
rget	100%	100%

#### FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data
126	135	100%	100%	100%

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.

9

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

State monitoring

State database

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

The Puerto Rico Part C team selected the records for the evaluation of Indicator 7 according to the date when the referral was received. The inclusion criterion was that the referral had to be received between July 1st, 2017 and June 30th, 2018. All (7) seven El programs in Puerto Rico were included for data collection. Each one of the regional supervisors was required to submit a list of records for the selection of a random sample. A random numbers list is generated based on a sample size calculated using a web tool, OpenEpi. Records are then chosen matching the number from the random numbers list to the record from the records list. For the past two (2) years, the Monitoring and Supervision Unit staff made an effort to increase the sample of charts to be monitored, to ensure an appropriate implementation of procedures and also, an appropriate correction of non-compliance issues. For all regional programs, data were collected through on-site monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors. After the on-site data collection is made, the SMU performs the analysis and, if necessary, calls the regional supervisors for further information and clarifications. Documented exceptional family circumstances that prevented a timely provision of services are included in the numerator and denominator for calculating the data.

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

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

Provide additional information about this indicator (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) exceeded 45 days because of the extreme weather conditions or its consequences, such as, closed EIP offices, safety concerns regarding houses, highways or streets, lack of electricity, running water or functional communication networks, family displacement among others. If the main reason for the delay was one or more of these, even though other causes were observed, such as illness of a family member or the child, the case was classified as hurricane related. If extraordinary family circumstances were observed before at least one of the hurricanes made landfall, even though hurricane related causes were also recorded in the file, the case was classified as family circumstances.

134 records of all 7 regional programs were reviewed for this indicator resulting in 9 events of non-compliance; all because of family circumstances, including 6 cases of solely hurricane related reasons for the delay. These numbers were achieved because during recovery efforts after the hurricanes, the State office emphasized on the importance of supporting families and resuming service provision as soon as conditions allow it, while also supporting EIP service coordinators and service providers

#### Actions required in FFY 2016 response

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

#### Correction of Findings of Noncompliance Identified in FFY 2016

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

4/16/2019 Page 19 of 32

#### FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8A: Early Childhood Transition

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
- 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)

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		96.10%	91.60%	100%	93.20%	98.60%	100%	100%	100%	97.53%	93.09%

FFY	2015	2016	
Target	100%	100%	
Data	93.97%	96.03%	

Key: Gray – Data Prior to Baseline Yellow – Baseline

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

#### FFY 2017 SPP/APR Data

#### **Explanation of Alternate Data**

122 is the number of toddlers with disabilities exiting Part C that were determined to be potentially eligible for Part B services that belong to the sample for the monitoring activities of this indicator. Puerto Rico does not use a database for this indicator, rather the SMU calculates a sample size. The performance on this indicator is calculated based on that sample

Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday.



No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
112	122	96.03%	100%	95.90%

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.	5
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What is the source of the data provided for this indicator?

State monitoring

C State database

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

Puerto Rico Part C team selected the records for the evaluation of Indicator 8A according to the date transition steps were given to the families that is recorded in the EI Data System. The inclusion criterion was toddlers whose third birthday was between September 29st, 2017 and September 28th, 2018 and for whom transition steps were required to be given to the families at least 90 days prior the child's third birthday. The records selected were due to have the transition steps between July 1st, 2017 and June 30th, 2018. All (7) seven El programs in Puerto Rico were included for data collection. The SMU used the regional child counts to produce a list of records that fall within the inclusion criterion for the selection of a random sample. A random numbers list is generated based on a sample size calculated using a web-based tool, OpenEpi. Records are then chosen matching the number from the random numbers list to the record from the records list. For all regional programs, data were collected through on-site monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors. After the on-site data collection is made, the SMU performs the analysis and, if necessary, calls the regional supervisors for further information and clarifications. Documented exceptional family circumstances that prevented timely transitions steps and transition conference are included in the numerator and denominator for calculating the data

4/16/2019 Page 20 of 32

#### Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

#### Correction of Findings of Noncompliance Identified in FFY 2016

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

#### FFY 2016 Findings of Noncompliance Verified as Corrected

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

Every year, soon after Puerto Rico receives its determination letter, regional determination letters are developed in order to inform the regional programs of the events of non-compliance found in monitoring activities. Supervisors have the duty of implementing strategies to avoid delays in the development of an IFSP with transitions steps. The SMU requests that a Corrective Action Plan is developed and that these strategies are included, detailing the events of non-compliance, what is expected of the regional program regarding the regulatory requirements, the resources, and the timeline to completion. These events are also discussed in the monthly meeting with the supervisors and other direct technical assistance.

Updated data were obtained through the review of new records by convinience-sampling in subsequent on-site monitoring activities, on only those regional programs that had events of non-compliance, to ensure that they are correctly implementing the regulatory requirements. This review reflected no findings.

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

The SMU verified through record review that all 5 events of non-compliance were corrected within one year. All children had an IFSP with transition steps, although with less than 90 days prior their birthday.

4/16/2019 Page 21 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8B: Early Childhood Transition

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)

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		91.40%	99.00%	100%	100%	100%	98.40%	100%	100%	87.65%	90.32%

FFY	2015	2016		
Target	100%	100%		
Data	98.28%	93.50%		

Key: Gray – Data Prior to Baseline Yellow – Baseline

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

#### FFY 2017 SPP/APR Data

#### **Explanation of Alternate Data**

122 is the number of toddlers with disabilities exiting Part C that were determined to be potentially eligible for Part B services and belong to the sample for the monitoring activities of this indicator. Puerto Rico does not use a database for this indicator, rather the SMU calculates a sample size. The performance on this indicator is calculated based on that sample.

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



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 2016 Data	FFY 2017 Target	FFY 2017 Data
104	122	93.50%	100%	85.25%

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.

#### Reasons for Slippage

Some regional programs failed to notify SEA/LEA at least 90 days prior the child's birthday of his/her potential eligibility for Part B services. Every month, the regional supervisors send a list with the information of the children that are potentially eligible for Part B services, for whom a transition meeting was conducted and the IFSP with transition steps was developed. These lists are originally developed by the children's service coordinators and shared with the Data Entry Personnel/Regional Supervisor so that it is further sent to the SMU. Only children that meet this criteria and that the EIP obtained parental consent for sharing their personal information, are included in the list. The SMU sends the list to the Part B Data Manager and the SEA/LEA can contact the families.

After the monitoring activities, the SMU verifies that every children of the sample are included in these lists. If a child is not included in any month or is included later in another month, it is considered a non-compliance event. The main reason for slippage is that service coordinators did not notify the Data Entry Personnel/Regional Supervisor of some children potentially eligible for Part C services, they were not included in the regional's list and the SMU did not notify SEA/LEA. The SMU found 13 non-compliance events distributed in 6 regional programs. The past fiscal year, the SMU found only 5 non-compliance events of this type distributed in 2 regional programs, which has resulted in slippage for this indicator in fiscal year 2017.

4/16/2019 Page 22 of 32

Describe the method used to collect these data

Puerto Rico Part C team selected the records for the evaluation of Indicator 8B according to the date notification to SEA/LEA recorded in the EI Data System and charts. The inclusion criterion was toddlers whose third birthday was between September 29st, 2017 and September 28th, 2018 and for whom notification to the SEA/LEA was due at least 90 days prior the child's third birthday. The notification for the records selected was due between July 1st, 2017 and June 30th, 2018. All (7) seven EI programs in Puerto Rico were included for data collection. The SMU used the regional child counts to produce a list of records that fall within the inclusion criteria for the selection of a random sample. A random numbers list is generated based on a sample size calculated using a web tool, OpenEpi. Records are then chosen matching the number from the random numbers list to the record from the records list. For all regional programs, data were collected through on-site monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors. After the on-site data collection is made, the SMU performs the analysis and, if necessary, calls the regional supervisors for further information and clarifications.

Do you have a written opt-out policy? Yes

Is the policy on file with the Department? Yes

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

State monitoring

State database

Describe the method used to select EIS programs for monitoring.

All seven (7) regional EI programs were included in the onsite monitoring activities and data collection. Puerto Rico Part C does not make a sample to select some local programs for monitoring purposes on this indicator.

#### Actions required in FFY 2016 response

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings" of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

#### Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	8	0	0

#### FFY 2016 Findings of Noncompliance Verified as Corrected

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

Every year, soon after Puerto Rico receives its determination letter, regional determination letters are developed in order to inform the regional programs of the events of non-compliance found in monitoring activities. Supervisors have the duty of implementing strategies to avoid delays in the notification/referral for those children potentially eligible for Part B services. The SMU requests that a Corrective Action Plan is developed and that these strategies are included, detailing the events of non-compliance, what is expected of the regional program regarding the regulatory requirements, the resources, and the timeline to completion. These events are also discussed in the monthly meeting with the supervisors and other direct technical assistance.

Updated data were obtained through the review of new records by convenience-sampling in subsequent State office monitoring activities, on only those regional programs that had events of non-compliance, to ensure that they are correctly implementing the regulatory requirements. This review reflected no findings.

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

The SMU verified through the review of the monthly report that is sent to the Part B Manager, that all 8 events of non-compliance were corrected within one year. The notification/referral to Part B services was made for 5 of the 8 children in the non-compliance events, although with less than 90 days prior their birthday. In the remaining 3 cases, the children exited Part C on their third birthday, and are no longer part of the jurisdiction

4/16/2019 Page 23 of 32

#### FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8C: Early Childhood Transition

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)

#### **Historical Data**

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		64.20%	88.00%	99.60%	97.50%	100%	100%	100%	100%	97.53%	93.09%

FFY	2015	2016		
Target	100%	100%		
Data	93.97%	96.03%		

Key: Gray – Data Prior to Baseline Yellow – Baseline

#### FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

#### FFY 2017 SPP/APR Data

#### **Explanation of Alternate Data**

122 is the number of toddlers with disabilities exiting Part C that were determined to be potentially eligible for Part B services and that corresponds to the sample for the monitoring activities of this indicator. Puerto Rico does not use a database for this indicator, rather the SMU calculates a sample size. The performance on this indicator is calculated based on that sample.

Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services

Yes

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least 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 2016 Data	FFY 2017 Target	FFY 2017 Data
112	122	96.03%	100%	95.90%

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 at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.	5

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

State monitoring

State database

Puerto Rico Part C team selected the records for the evaluation of Indicator 8C according to the transition conference's date that is recorded in the EI Data System. The inclusion criterion was toddlers whose third birthday was between September 29st, 2017 and September 28th, 2018 and for whom transition steps were required to be given to the families at least 90 days prior the child's third birthday. The records selected were due to have the transition conference between July 1st, 2017 and June 30th, 2018. All (7) seven EI programs in Puerto Rico were included for data collection. The SMU used the regional child counts to produce a list of records that fall within the inclusion criterion for the selection of a random sample. A random numbers list is generated based on a sample size calculated using a web tool, OpenEpi. Records are then chosen matching the number from the random numbers list to the record from the records list. For all regional programs, data were collected through on-site monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors. After the on-site data collection is made, the SMU performs the analysis and, if necessary, calls the regional supervisors for further information and clarifications. Documented exceptional family circumstances that prevented timely transition conference are included in the numerator and denominator for calculating the data.

#### Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

#### Correction of Findings of Noncompliance Identified in FFY 2016

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

#### FFY 2016 Findings of Noncompliance Verified as Corrected

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

Every year, soon after Puerto Rico receives its determination letter, regional determination letters are developed in order to inform the regional programs of the events of non-compliance found in monitoring activities. Supervisors have the duty of implementing strategies to avoid delays when conducting the transition conference. The SMU requests that a Corrective Action Plan is developed and that these strategies are included, detailing the events of non-compliance, what is expected of the regional program regarding the regulatory requirements, the resources and the timeline to completion. These events are also discussed in the monthly meeting with the supervisors and other direct technical assistance.

Updated data were obtained through the review of new records by convenience-sampling in subsequent on-site monitoring activities, on only those regional programs that had events of non-compliance, to ensure that they are correctly implementing the regulatory requirements. This review reflected no findings.

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

The SMU verified through record review that all 5 events of non-compliance were corrected within one year. For all children a transition conference was conducted, although with less than 90 days prior their birthday.

4/16/2019 Page 25 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 9: Resolution Sessions

Explanation of why this indicator is not applicable

Puerto Rico does not have Part B due process procedures adopted.

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)

This indicator is not applicable, as described above.

This indicator is not applicable, as described on the Historical Data Page.

This indicator is not applicable, as described on the Historical Data Page.

4/16/2019 Page 26 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 10: Mediation

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)

# 

#### **Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.a.i Mediations agreements related to due process complaints	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.b.i Mediations agreements not related to due process complaints	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1 Mediations held	n	null

#### FFY 2017 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
0	0	0			

Actions required in FFY 2016 response	
none	

4/16/2019 Page 27 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 11: State Systemic Improvement Plan

Monitorina Priority: General Supervision

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

#### Reported Data

Baseline Data: 2013

FFY	2013	2014	2015	2016	2017
Target		46.64%	46.65%	74.00%	74.50%
Data	46.63%	71.10%	73.53%	76.03%	
Kova	Crov Dot	o Drior to Boo	olino	Vollous Boos	alia a

Key: Gray – Data Prior to Baseline Yellow – Baseline

Blue – Data Update

#### FFY 2018 Target

FFY	2018
Target	75.00%

Key:

#### **Description of Measure**

Our initial selected measure was: "Increase the percentage of infants and toddlers who exit at age expectations in the acquisition and use of knowledge and skills, including early language/communication" (Outcome B, Summary Statement 2). It is important to notice that after submission of the SSIP phase 1, a change was proposed to the SIMR: keeping outcome B as our focus of improvement but using summary statement 1 as our measure of improvement. This measure was considered more significant to our efforts in improving outcome B. While SS1 includes all toddlers that show improvement in outcome B.

#### Targets: Description of Stakeholder Input

The State explained to stakeholders about data analysis based on past year's results and they are concious of the EIP efforts to improve in the analysis and revision of COS data. Improvement in child and family outcomes is a goal of the SSIP and the stakeholders are partners with EIP staff in the identification and implementation of strategies that will help the program to improve results. One of the stakeholder comments when the initial targets were submitted was to analyze progress in the SiMR for at least two years to try to identify patterns before making any changes; after two years of fine tunning the result data gathering and analysis, PR is confident enough to change the targets and continue developing other strategies to improve the measure.

#### Overview

#### **Data Analysis**

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., EIS program and/or EIS provider, geographic region, race/ethnicity, socioeconomic status, gender, etc.) As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

The broad improvement activity selected was to develop a statewide structure that supports the implementation of a standardized, quality, sustainable professional development system for providers. As stated in the TOA, if the state improves its CSPD, services providers will have the required knowledge, skills and competencies to effectively promote adequate child development. In terms of professional development, as of March 2017, the PR EIP performed 3 face to face meeting with regional leaders to provide technical assistance y a diversity of topics (eligibility determination, routine based interventions, functional results development), 21 activities in the modality of conference calls with regional programs. In addition, an improvement activity on reflexive supervision was provided for all service coordinators and EI supervisors; the activity was sponsored by the PR-UCEDD and its collaboration with the Indiana University LEND Program. The educational activity reached 80 service coordinators and 7 EI program supervisors.

#### Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

Meetings with service providers, service coordinators, regional supervisors allow the state team to identify gaps in professional preparation of EI providers. The state team recognized the need to develop an action plan to improve abilities and competence of EI providers. To accomplish this goal, Puerto Rico chose to establish collaboration with the University Center of Excellence in Developmental Disabilities (PR UCEDD) to develop and 4/16/2019

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) implement baseline training for providers and that activity will serve as the basics for our CSPD strengthening strategy. In this strand, we included two main activities:
1) The development of Comprehensive System of Personnel Development Plan, and
2) The evaluation of available screening and assessment tools to identify children with developmental delays.
State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and Their Families  A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional stills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and leam)).
Statement
Outcome B Summary Statement #1.
Description
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.
Selection of Coherent Improvement Strategies  An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with
Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action  A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action  A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action  A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Submitted Theory of Action: No Theory of Action Submitted
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action  A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action  A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Submitted Theory of Action: No Theory of Action Submitted
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action  A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Submitted Theory of Action: No Theory of Action Submitted  Provide a description of the provided graphic illustration (optional)
program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Theory of Action  A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.  Submitted Theory of Action: No Theory of Action Submitted

- (d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

#### Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
  (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices
- once they have been implemented with fidelity.

Page 29 of 32 4/16/2019

#### Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

#### Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

#### Phase III submissions should include:

- Data-based justifications for any changes in implementation activities.
- Data to support that the State is on the right path, if no adjustments are being proposed.
- Descriptions of how stakeholders have been involved, including in decision-making.

#### A. Summary of Phase 3

- 1. Theory of action or logic model for the SSIP, including the SiMR.
- 2. The coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies.
- 3. The specific evidence-based practices that have been implemented to date.
- 4. Brief overview of the year's evaluation activities, measures, and outcomes.
- 5. Highlights of changes to implementation and improvement strategies

Please see pdf document included for details.

#### B. Progress in Implementing the SSIP

- 1. Description of the State's SSIP implementation progress: (a) Description of extent to which the State has carried out its planned activities with fidelity—what has been accomplished, what milestones have been met, and whether the intended timeline has been followed and (b) Intended outputs that have been accomplished as a result of the implementation activities.
- 2. Stakeholder involvement in SSIP implementation: (a) How stakeholders have been informed of the ongoing implementation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP.

Please see pdf document included for details.

#### C. Data on Implementation and Outcomes

- 1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan: (a) How evaluation measures align with the theory of action, (b) Data sources for each key measure, (c) Description of baseline data for key measures, (d) Data collection procedures and associated timelines, (e) [If applicable] Sampling procedures, (f) [If appropriate] Planned data comparisons, and (g) How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements
- 2. How the State has demonstrated progress and made modifications to the SSIP as necessary: (a) How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR, (b) Evidence of change to baseline data for key measures, (c) How data support changes that have been made to implementation and improvement strategies, (d) How data are informing next steps in the SSIP in

Please see pdf document included for details.

#### D. Data Quality Issues: Data limitations that affected reports of progress in implementing the SSIP and achieving the SIMR

- 1. Concern or limitations related to the quality or quantity of the data used to report progress or results
- 2. Implications for assessing progress or results
- 3. Plans for improving data quality

Please see pdf document included for details.

#### E. Progress Toward Achieving Intended Improvements

- 1. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up
- 2. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects
- 3. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SIMR
- 4. Measurable improvements in the SIMR in relation to targets

Please see pdf document included for details.

#### F. Plans for Next Year

- 1. Additional activities to be implemented next year, with timeline
- 2. Planned evaluation activities including data collection, measures, and expected outcomes

4/16/2019 Page 30 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) 3. Anticipated barriers and steps to address those barriers 4. The State describes any needs for additional support and/or technical assistance

Please see pdf document included for details.

4/16/2019 Page 31 of 32

# FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Certify and Submit your SPP/APR

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.

Selected: Designated by the Lead Agency Director to certify

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

Name: Manuel I. Vargas Bernal, MD, MPH

Title: MCAH Division Director
Email: mivargas@salud.pr.gov

Phone: 787-765-2929

4/16/2019 Page 32 of 32