

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2022

Oklahoma



PART C DUE
February 1, 2024

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

IDEA Part C requires the SoonerStart Program to report eleven state accountability indicators found in the State Performance Plan (SPP) to the Office of Special Education Programming (OSEP) annually. In FFY 2020 SoonerStart reviewed its SPP as required every six years by IDEA, Part C (Sections 616(b)(1) and 642) and updated the plan with stakeholder input. For the FFY 2022 SPP/APR submission, stakeholders representing the Interagency Coordinating Council (ICC), Oklahoma Parent Center staff, parents of children currently or previously served in Part C services, early intervention staff, and other community, early childhood and disability advocates from childcare and head start programs and state agencies reviewed the aggregated SoonerStart data compared to the previously established targets for each of the eleven SPP performance indicators. SoonerStart solicited stakeholder feedback and suggestions for improvement prior to reporting to OSEP in the FFY 2022 Annual Performance Report (APR).

Oklahoma formerly had 27 local SoonerStart sites but in 2022 the local sites were consolidated into districts to align with our partner agency's health department districts. For the FFY 2022 Part C SPP/APR, program data were collected, analyzed and reported from local districts. Each of the twelve local districts are responsible to OSDE (lead agency) for meeting the target for each indicator, just as the State is responsible to OSEP. State data are disaggregated by district to issue determinations. SoonerStart uses a Data Profile tool and a Determination scoring rubric to share results with each district annually. For FFY 2022, all twelve SoonerStart districts were determined to meet the requirements of IDEA Part C.

In 2023, SoonerStart scaled up implementation of Oklahoma's State Systemic Improvement Plan (SSIP) focusing on improving developmental outcomes for infants and toddlers. Service providers in three districts (District 3, District 9 and District 12) received intensive training on implementation of the Pyramid Model framework. Practitioner coaches were selected and trained to provide support to staff throughout the implementation process.

Overview

- In FFY 2022, the percentage of children receiving early intervention services in natural environments remained static at 94% and did not meet the program's target of 96%. SoonerStart determined that in districts experiencing high vacancy rates, providers frequently met families in local health departments (service provider locations). This location was chosen in order to reduce travel time in an effort to increase providers' capacity to serve more children (Indicator 2).
- The percentage of children who exhibited improved growth in social/emotional skills, skills and knowledge, and appropriate behaviors from program entry to exit remained the same from the previous year and all three child outcomes met the FFY 2022 target of 85%. The percentage of children who exited SoonerStart with peer-level child outcomes increased slightly and two outcomes met the current year's targets (Indicators 3A, 3B and 3C).
- Parent approval ratings in two of three family outcome statements increased slightly from last year and met the FFY 2022 targets. One family outcome statement did not meet the target. There were 400 more family survey responses for FFY 2022 than in the previous year. (Indicators 4A, 4B, and 4C).
- The percentage of children served by SoonerStart ages birth to one, and the percentage of all children served (ages birth to three) compared to Oklahoma's birth to three population increased slightly and met the state's established target for FFY 2022 (Indicators 5 and 6).
- Oklahoma continues to work well with families, as evidenced by the zero counts of complaints (measured through the counts of resolution and mediation sessions in Indicators 9 and 10).
- Oklahoma did not meet the federally required target of 100% on any of the five compliance indicators. However, it increased or maintained its rates for timely initiation of early intervention services (1); timely development of an IFSP (7); timely transmittal of notification to the LEA (8B) and timely transition planning conference (8C). (Indicators 1, 7, 8A, 8B and 8C).
- SoonerStart utilizes the ASQ:SE-2 questionnaire as the measurement for the state-identified measurable result (SIMR) reported for the State Systemic Improvement Plan (SSIP) in Indicator 11. This assessment of social emotional development is completed for children enrolled at the three Pyramid Model implementation districts who have received six months or more of early intervention services. In Year 3, SoonerStart is reporting only ASQ:SE-2 data from the two original implementation districts as outlined in the SSIP Evaluation Plan. These results indicated that 53.59% of children in District 3 (Stillwater) and District 12 (Oklahoma County) displayed no social emotional concerns which indicated slippage from the previous year. SoonerStart did not meet the FFY 2022 target of 59% for Indicator 11.

Additional information related to data collection and reporting

Oklahoma's data collection period for the FFY 2022 APR occurred between July 1, 2022 and June 30, 2023. The state collects and maintains all Part C data in a statewide database. The child's official educational record is housed in a real-time, web-based data system called EdPlan. The electronic record contains demographic information; evaluation/eligibility information; the IFSP, including the transition plan; contact logs; service logs for delivered services; and an accounts payable section for reimbursement of delivered services. All data related to the child and his or her early intervention services are entered directly into the electronic record by SoonerStart staff at each local district. The Part C Data Manager creates data reports in EdPlan that pull child information as well as services and timeline data directly from the electronic record for all children in the SoonerStart program. Staff are required to enter the date of all early intervention timeline activities in the child's electronic EdPlan record. If an activity did not meet the compliance timeline (First Intervention Service Visit, IFSP completion, Transition Steps and Services, Notification to the LEA, and Transition Planning Conference), the reason for the delay in meeting the timeline is required to be entered into the child's record and subsequently displays on the specialized data reports. Child level data specific to each Part C compliance and performance indicator are aggregated and reported in the annual APR.

EdPlan is also the source of data utilized for reporting the annual Exiting Report in November of each year and reporting the annual Child Count on December 1st of each year. Dispute Resolution data are maintained separately with the Executive Director of SoonerStart. SoonerStart has not reported any Dispute Resolution sessions in over 10 years.

The EdPlan database is maintained by a private vendor. Systems are in place through a contractual agreement for periodic upgrades and revisions to data collection functionality and content.

General Supervision System

The systems that are in place to ensure that the IDEA Part C requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions).

The Oklahoma Early Intervention Act designated the Oklahoma State Department of Education (OSDE) as the lead agency and the Oklahoma State Department of Health (OSDH) as the primary partner agency for administering the SoonerStart Early Intervention Program. OSDE is responsible for

monitoring progress and providing oversight for early intervention services for infants and toddlers and their families to ensure statewide implementation of the Individuals with Disabilities Education Act (IDEA). In previous years, OSDE maintained 27 sites. In July of 2022, the local sites were consolidated into districts to align with our partner agency's health department districts. This move increased the local team's capacity and diversity.

Oklahoma's general supervision system is reliant on data collection and reporting. SoonerStart compiles, analyzes, and monitors all data submitted by the SoonerStart districts. Part C personnel in Oklahoma are state employees, and SoonerStart implements procedures to promote consistency in data entry and utilization of the EdPlan data system. The system is effective in collecting and sorting data for reporting purposes. SoonerStart administrators work closely with the database vendor to implement continuous improvements that greatly enhance the State's ability to report all compliance data and support evidence-based practices accurately. EdPlan's main-menu page hosts user instructions, with real-time assistance available during the workday through the online message board.

Oversight by the OSDE includes the use of various accountability processes. The OSDE collects both compliance and performance data for monitoring and the Annual Performance Report through the EdPlan database. Oklahoma's General Supervision activities include on-site program improvement visits with each district and monitoring for compliance with IDEA Part C regulations. On-site visits occur on a three-year cycle (four district visits per year). SoonerStart administrators and program managers from both OSDE and OSDH meet with district early intervention staff to learn about local challenges and successes. Staff receive updates on state and federal Part C procedures or changes and are encouraged to share ideas for program improvement with SoonerStart administrators. The four districts visited during March, April and May of 2023 were District 1, District 2, District 5, and District 12. The FFY 2022 onsite monitoring visits reviewed records and services for children who reside in 29 of Oklahoma's 77 counties.

Oklahoma's compliance monitoring process verifies that each local SoonerStart Early Intervention district with non-compliance is correctly implementing the specific regulatory requirements and has corrected any untimely individual records. All twelve SoonerStart local districts are monitored annually for each APR indicator. The electronic record reflects the date that early intervention activities occur and, if not timely, requires staff to enter the reason for missing the timeline. However, potential non-compliance identification may also come through parent surveys, informal complaints, local/peer feedback, and other periodic reports submitted to the State. The monitoring plan includes an annual review of child and local program level compliance data. Following a data review each year, SoonerStart issues a written finding of non-compliance to the local district for any non-compliance identified. The State's APR reports all non-compliance, even if the non-compliance is corrected before the finding is issued. Steps to implement corrective action plans and action plan tracking and monitoring are defined. Security processes for electronic documents concerning findings of non-compliance are well established. Oklahoma has selected the 4th quarter of the fiscal year (April, May, and June) as the APR reporting period for compliance indicators. The Part C Data Manager examines data reported for this period and compares them to data for the full year (FFY 2022). This process ensures the results are representative of a full year of the State's data because it includes all areas of the state, all provider types, and all categories of eligible children.

The data review for this reporting period occurs in the first two weeks of September for the prior fiscal year. Using EdPlan database reports, the State developed standardized statewide data reports containing all relevant records from all local districts. SoonerStart has procedures to review data, identify non-compliance, issue findings, and implement correction of non-compliance at both the child and local district program level.

Oklahoma requires verification of child-specific correction of non-compliance and long-term compliance with the regulatory requirements (based on a review of subsequent data reflecting 100% compliance). Verification of correction of non-compliance happens thorough review of the child's electronic record, and subsequent data reports to ensure that the prescribed corrective action is occurring and is effective. Local district level supervisors ensure that correction of non-compliance occurs timely with follow-up verification by the Part C Data Manager quarterly from the finding's issuance until 100% compliance is achieved. The State assures correction of all instances of non-compliance within one year of identification at both the child level and local district level.

For Part C, Oklahoma has adopted the Part B due process hearing procedures under 34 CFR 303.430(d)(2), administered through the OSDE Special Education Services.

In FFY 2022, SoonerStart worked with its database vendor to develop a general supervision tool called "Playbook". Playbook is a reflective supervision online tool that allows SoonerStart supervisors to assign a 'play' to a SoonerStart provider or Resource Coordinator highlighting one of the key components of IDEA Part C and/or Early Intervention Key Principles. Playbook offers a deeper and more meaningful opportunity to assess the learner's understanding of the assigned topic. The supervisor has access to the learner's actions within the system, which leads to discussion and corrections of fidelity drift. SoonerStart is currently in early implementation of this tool. Supervisors meet regularly with the Playbook design team to provide feedback on Playbook content and ease of use as implementation continues. SoonerStart expects Playbook to be fully functional and utilized by late Spring of 2024.

Technical Assistance System:

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

The SoonerStart State Leadership Team is responsible for ensuring the timely delivery of high quality, evidence-based technical assistance and support to SoonerStart staff at the twelve districts across the State. The State Leadership Team is comprised of the SoonerStart Program Director and Assistant Program Director with the Oklahoma State Department of Education (lead agency), the Allied Health Director and Early Intervention Manager with the Oklahoma State Department of Health (partner agency), and four project managers with varied areas of expertise related to supporting early intervention services in Oklahoma. The Leadership Team provides technical assistance to each district through the monitoring process and scheduled program improvement visits.

Technical assistance includes:

- Support for identifying underlying causes of low performance and non-compliance;
- Developing appropriate strategies for improvement;
- Troubleshooting issues with the SoonerStart EdPlan database; and
- Providing explanation and clarification of SoonerStart operational procedures and IDEA, Part C regulations.

The State Leadership Team provides technical assistance to identify underlying causes of low performance and non-compliance and help local teams develop appropriate strategies for improvement. Additional resources from the Early Childhood Technical Assistance Center (ECTA Center) and National Center for Systemic Improvement (NCSI) are utilized as needed by the Leadership Team.

At the local district level, the Program Manager and Health Department Lead Clinician work together to implement policies, procedures, and regulations per IDEA, Part C, and the lead agency. They assure correction of all non-compliance and that implement procedures in place to address child level and systemic non-compliance. The district Program Manager and Lead Clinician have the responsibility of providing technical assistance to local district staff during team staffing and other opportunities as needed. Topics are specific to the needs of the district team or individual SoonerStart staff based on district leadership's regular monitoring activities.

SoonerStart uses both web-based training and local supervisors to provide the initial training and ongoing support for the EdPlan database, which contains the electronic record for children enrolled in the Part C program. An outside vendor maintains the SoonerStart EdPlan database, but all EI staff have access to the Message Board to request information or assistance with features of the system. Detailed database "Tip Sheets" to improve data entry and data report access procedures are on the database's Main Menu page. The SoonerStart Assistant Program Director works with the outside vendor to improve EdPlan and regularly provides staff with updates on new processes and procedures.

The SoonerStart Operations Manual is available to all early intervention staff and is accessible on the SoonerStart Personnel Development and Resource page in Microsoft Teams. This document is used to support the program's policies and procedures by operationalizing each step of the SoonerStart process. A standing, multi-agency task group reviews the Operations Manual regularly to ensure that all guidelines reflect current state and federal regulations/policies as well as current OSDE and OSDH agency practices. Where applicable, operational guidelines link to the new SoonerStart EdPlan database procedures. The State Leadership Team announces updates to the Operations Manual in program-wide emails. The SoonerStart Assistant Program Director has the primary responsibility to respond to staff's questions across the State and provide guidance and written feedback to local SoonerStart districts regarding IDEA, Part C regulations.

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.

Oklahoma provides professional development (PD) to all SoonerStart staff to comply with the IDEA Part C. SoonerStart PD activities seek to ensure accountability and promote the use of recommended evidence-based practices. The goal of SoonerStart's ongoing PD is to provide EI professionals (service coordinators, service providers, and EI program administration) with the tools, confidence, & competence to equip them to support families. PD is crucial in helping SoonerStart staff promote evidence-based practices that assist families in helping their child develop and learn.

SoonerStart employs a dedicated Professional Development Project Manager to ensure that staff are trained to provide quality services to families of eligible infants and toddlers in an individualized, culturally sensitive and ethical manner. In FFY 2022, SoonerStart added the following part-time positions: Allied Health Technical Manager; a Behavior Health Training Consultant; a Professional Credentialing Consultant and a Regional Technical Consultant to develop discipline specific activities to support providers in meeting program requirements. The PD Project Manager ensures that staff are trained to provide quality services to families of eligible infants and toddlers in an individualized, culturally sensitive, and ethical manner. The SoonerStart PD system is supported and advised by stakeholders serving on the personnel development subcommittee of the ICC and operates in tandem with the TA system. As a component of Oklahoma's Part C general supervision system, the PD system is designed to:

- Be responsive to identified agency/provider/family needs
- Inform the system when new procedures & policies are required
- Address practice change to improve child and family outcomes, and
- Implement evidence-based practices.

SoonerStart's PD system includes:

- Entry-level online training modules
- Information sharing & resource sharing
- Professional development activities provided by early intervention content experts

The PD manager identifies professional development needs through a variety of methods, including reviews of local program and statewide data, compliance monitoring and quality assurance reviews; new research and current evidence-based practices and initiatives in early intervention; input from local district supervisors; results from training surveys; an online Training Request form, and national and state-level policy changes. Oklahoma continues to utilize its online learning platform, called "Pepper" to provide online learning, interactive communities, and a tracking system. Pepper was designed by the same vendor that supports the SoonerStart EdPlan database. The "SoonerStart New Employee Orientation" training series, developed in FFY 2019, is used to offer blended learning modules. Online training modules are also available for EdPlan database navigation which covers staff competency requirements for applicable data entry of all SoonerStart children from program entry to exit.

SoonerStart has an online professional development clearinghouse built in Microsoft Teams. The program uses this online system to maintain a master calendar of training opportunities, whether in-house or provided by outside organizations and community partners. Collaboration with agency partners such as the Oklahoma Assistive Technology Center and the Oklahoma Health Care Authority offers regular opportunities for staff training. Staff mentoring and peer-to-peer collaborations provide informal training at the local district level across the State.

Peer-to-peer training on a variety of early intervention topics has been provided by SoonerStart staff. Trainings are recorded and available to all new and existing staff members on a permanent basis. Many recorded trainings are also being converted to courses in the on-line learning management system to allow more peer interaction and tracking of knowledge acquisition that are not available in a recorded Microsoft Teams format.

SoonerStart is now using members of the Pyramid Model (PM) State Leadership Team (SLT) to train staff at new PM implementation districts. Utilizing in-state personnel in lieu of contracting with a third-party vendor provides sustainability. This allows for a more tailored training to SoonerStart's EI program while retaining all the evidence-based practices embedded within the original training. Three Program Managers from local districts became certified as Ages and Stages Questionnaire (ASQ) trainers and will train new SoonerStart staff on the assessment tool starting in February of 2024.

SoonerStart's PD Project Manager uses state and local resources as well as other leadership personnel to develop a wide array of professional development activities that promote:

- Statewide coordination of training activities related to infants and toddlers and their families;
- Greater access to learning opportunities for families and service providers;
- A balanced and coordinated schedule of training activities in terms of topics, locations, and dates throughout the State available year-round;
- On-line and face-to-face training; and
- Specialized training opportunities bringing together families and professionals from different fields, including early education and childcare service providers.

Some of the professional development activities completed in FFY 2022 include:

- Working with the EdPlan database vendor to create tools to track, measure and report on usage of the courses within the online learning management system;
- Providing a demonstration training and parent/family interaction lab in partnership with AbleTech to assist providers and families in choosing and utilizing assistive technology
- Providing in person and recorded Part C and LEA transition training in six different locations with SoonerStart staff and LEA representatives;
- Providing a 2-day statewide conference for SoonerStart service providers and resource coordinators in November of 2022. Twelve experts in the field of early intervention provided breakout sessions as well as two keynote sessions on Family Coaching and Primary Service Provision;

- Creating a sustainable ECO/COS training for all staff within the online learning management system;
 - Certifying two additional staff members as trainers for the ASQ 3 and ASQ SE2 screening tools. Following the initial series of trainings for all SoonerStart staff, quarterly trainings are scheduled as a component of onboarding for new staff;
 - Creating Communities of Practice (CoP) for PM practitioner coaches and behavior specialists to facilitate discussion and learn new skills in a less formal setting. CoPs foster peer support and encouragement while informing the PD Project Manager and SSIP Project Manager on future training needs.
- Adding an online COS-ECO module to our online learning management system. All providers completed in FFY 2022, and all new providers will complete during new employee pre-service.

SoonerStart remains committed to ensuring service providers are equipped to effectively provide services that continually improve the outcomes of infants and toddlers with disabilities and their families.

Stakeholder Engagement:

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

The Oklahoma Interagency Coordinating Council (ICC) serves as the primary stakeholder group providing ongoing guidance and input into the SPP/APR and SSIP. Information and updates are provided regularly at each quarterly ICC meeting regarding progress towards the achievement of targets, the child outcome data process, selection of targets, training initiatives, and public reporting of program status. SoonerStart provides the ICC sub-committees and special task groups ongoing opportunities for input throughout the year. Each sub-committee follows specific by-laws for the membership that reflect the State's diversity, with sub-committees including Personnel Development, Public Awareness, Program Planning and Evaluation, and Financial Planning.

The SoonerStart lead agency identifies broad-based stakeholders (per §303.601) and provides the information about prospective members to the Oklahoma Governor's office for approval and appointment to the council. Members represent service providers, families of children with disabilities under the age of 12, child development instructors, and representatives from state agencies providing services to families of infants and toddlers with disabilities. In December 2022, the Governor appointed fourteen members to the ICC. All appointees except two were new members and included six parents of children under age 12. The new members were provided with an ICC orientation to inform them about ICC structure, history and current issues/activities so that they would be well informed when discussions occur. Members are provided multiple opportunities to share their input throughout the year. Lead Agency personnel provide programmatic updates regularly via email and at each ICC meeting. SoonerStart submits the APR for review and approval to the ICC in its December meeting each year. The ICC Chair certification provided with the APR submission confirms that the ICC has reviewed Oklahoma's Part C FFY 2022 SPP/APR for accuracy and completeness.

SoonerStart's newly placed ICC members have strengthened the membership by adding a contract provider to represent contracted service providers. The new parent members have created a Parent Committee which has tasked itself with identifying ways to improve services and supports for SoonerStart parents. One of the parents has been named Chair of the ICC committee. SoonerStart continues to provide the Chair support and guidance in that role.

Other SoonerStart stakeholders—some of whom have been engaged with strategic planning and program improvement for many years—continue to be included in discussions regarding the program's performance compared to the newly developed targets in Oklahoma's FFY 2020 – FFY 2025 State Performance Plan (SPP), including the new SSIP. In addition to Governor-appointed ICC members, SoonerStart engages early intervention staff, parents of children enrolled or formerly enrolled in SoonerStart, and community early childhood advocates (Head Start, Child Care, Preschool) in program improvement discussions. Many of these participants also serve on the APR/SSIP Stakeholder Advisory Committee. Other stakeholders include representatives from the Oklahoma Parent Center; the Oklahoma Family Network and other disability advocates; state agencies including Oklahoma Department of Mental Health Services; Oklahoma Department of Health, and the Oklahoma Regents for Higher Education.

APR/SSIP Stakeholder Advisory Committee meetings were held on the following dates:

- August 15, 2022
- November 7, 2022
- February 17, 2023
- May 5, 2023

ICC meetings were held on the following dates:

- June 7, 2023
- September 7, 2022
- December 7, 2022
- February 8, 2023

SoonerStart holds all parent and community stakeholder meetings via Microsoft Teams. ICC meetings are held in-person with a virtual participation option. Stakeholders represent all geographic areas of the state so virtual meetings allow participation without the burden and expense of travel to a central location. To increase participation, SoonerStart sends a reminder to registered participants one week before the scheduled meeting.

SoonerStart continues to use the "Quick Reference Guide: Working with Stakeholders to Identify Potential Improvement Strategies for Program Improvement (Including the SSIP)" as a resource for stakeholder engagement. This quick reference guide developed by the Early Childhood Technical Assistance Center (ECTA), The Center for IDEA Early Childhood Data Systems (DaSy) and the Regional Resource Center Program (RRCP) is designed to assist states in understanding what information needs to be available for stakeholders to assist in selecting potential improvement strategies that will help programs improve results for infants, toddlers and their families with disabilities.

SoonerStart surveyed stakeholders in December 2022 for input on how meetings could be improved and to get feedback on their experience serving as program stakeholders. Ninety percent of the stakeholders expressed satisfaction with holding quarterly meetings and the opportunities to ask questions and share ideas with SoonerStart program staff. The program will continue to seek opportunities to solicit new parent stakeholders as well as stakeholders from community advocacy organizations and early childhood programs for their valuable support, insight, and resources.

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

NO

Number of Parent Members:

31

Parent Members Engagement:

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

SoonerStart increased efforts to engage parents of children with disabilities to fully participate in the stakeholder process last year and retained 31 parent stakeholders in FFY 2022. Along with the new parent members of the ICC (6), SoonerStart solicited additional parents (6) with the help of the Oklahoma Family Network (statewide advocacy organization for families of children with health care needs or disabilities) and the Oklahoma Parent Center.

Parent stakeholders along with stakeholders from community organizations, state agencies and early childhood programs switched to a quarterly meeting based on their feedback. The SoonerStart website was updated to include a dedicated page outlining the work completed by stakeholders in FFY 2022. It provides various resource links to specifically help new parent stakeholders gain a better understanding of the SoonerStart and OSEP processes.

Stakeholder meetings are offered via Microsoft TEAMS to enable families from across the state to participate in providing input and evaluating progress toward improvement strategies. As indicated previously, virtual meetings significantly reduces the cost of transportation and the travel time to and from a meeting destination. All stakeholders report that virtual meetings offer more flexibility for them to participate from any location using their mobile devices. Additionally, parents with small children at home or who do not have transportation to attend an in-person meeting are not excluded from participating.

Throughout the stakeholder engagement process, SoonerStart seeks to create an open environment for parents to share their thoughts on program improvement with each other and program administration. An agenda for each meeting is shared in advance via an email invitation along with the presentation from the previous stakeholder meeting. This attachment is helpful for stakeholders who were unable to attend the prior meeting or as a reminder of the information shared for stakeholders who were present. At each meeting, data are presented with visual demonstrations using charts and graphs. Stakeholder input is collected through a virtual chat feature or via a website tool which provides a virtual "sticky note" when parents want to share their thoughts, ideas and questions anonymously.

Activities to Improve Outcomes for Children with Disabilities:

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

SoonerStart continues to conduct activities to increase the ability of parents to participate in the development of implementation activities. SoonerStart utilizes information from The Center for IDEA Early Childhood Data Systems Stakeholder Knowledge Toolkit to help stakeholders meaningfully participate in discussions of SPP/APR indicators and review program performance data. Information on the purpose and process for developing the SPP/APR and SSIP is available on the SoonerStart website for everyone to review. SoonerStart worked with the Oklahoma Parent Center to increase outreach to parents, as well as through the Oklahoma Family Network. The program utilizes the demographic information collected for Part C enrollment to identify under-represented and minority parents to encourage their participation in stakeholder discussions.

SoonerStart surveyed stakeholders in December 2022 for feedback on their satisfaction with the stakeholder process. With a response rate of 33%, stakeholders responding indicated the following:

I am satisfied with the quality of communication I receive – 88.4%

Information is presented in a way that is easy to understand – 84.6%

SoonerStart makes me feel that my participation in stakeholder meetings is important – 84.6%

I am given enough opportunity to ask questions and share my ideas during stakeholder meetings – 88.4%

In the upcoming year, SoonerStart will work to improve parent participants' satisfaction for all four of these statements. The program intends to be more intentional in ensuring participants have opportunities to ask questions and share their ideas and that the information presented is understandable. SoonerStart will explore feedback processes that can inform change in a timelier manner.

Soliciting Public Input:

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

The primary method used to solicit additional public input for developing improvement strategies and evaluating progress is through stakeholder meetings.

SoonerStart presented stakeholders updated program results at stakeholder meetings in FFY 2022 and requested feedback on improvement strategies. Feedback is solicited in a variety of ways including, but not limited to surveys, feedback loops, IDEAZ boards, ongoing discussions and Q and A. Meeting agendas which are publicly posted in advance of the ICC meeting inviting persons interested to attend.

Making Results Available to the Public:

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

The results of the target setting, data analysis, development of the improvement strategies, and evaluation completed in FFY 2020 continue to be posted on the SoonerStart website. <https://sde.ok.gov/soonerstart-apr-stakeholder-engagement>

Stakeholder presentations for FFY 2022 containing information regarding any new improvement strategies as well as evaluating progress by comparing program data to targets in the APR are also posted and available to the public on this website. The same information is included as a regular discussion item on official ICC agendas and reviewed at quarterly ICC meetings. ICC meetings are open to the public and agendas are posted in advance per state open meeting regulations. The results were also emailed to stakeholders who participated in any of the discussions throughout the year.

Reporting to the Public:

How and where the State reported to the public on the FFY 2021 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2021 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, is available.

SoonerStart has made its FFY 2021 SPP/APR and its Part C Annual Determination Letter for FFY 2021 available to the public on the OSDE website:

<http://ok.gov/sde/datareporting-part-c/>

SoonerStart Site Data Profiles for FFY 2021 and FFY 2022 of each program in the state are posted on the OSDE website:

<http://ok.gov/sde/datareporting-part-c/>

For FFY 2021, Data Profiles and Determinations were provided to the local districts on December 1, 2022 and for FFY 2022, Data Profiles and Determinations were provided to the local districts on December 1, 2023. Data Profiles are posted on the OSDE website before the February 1st SPP/APR submission each year.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	96.74%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	97.88%	98.62%	99.07%	98.97%	99.03%

Targets

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

FFY 2022 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
881	1,080	99.03%	100%	98.06%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

178

Provide reasons for delay, if applicable.

SoonerStart reported that 178 children did not receive timely first intervention visits due to exceptional family circumstances. These exceptional family circumstances included when the child was unavailable to complete the first intervention visit because the parent cancelled or did not show for the appointment. SoonerStart also documented an exceptional family circumstance for delay when repeated attempts to contact the family to schedule the first intervention visit in a timely manner were unsuccessful.

Twenty-one children did not receive timely first intervention visits due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling conflict.

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).

Oklahoma defines "timely" receipt of early intervention services as 15 working days from the date of parent consent on the IFSP to the date of the first intervention service provided to the family.

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

State database

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

Data were collected during the time period between April 1, 2023 and June 30, 2023 (4th quarter of FFY 2022)

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

Program data for this indicator are collected from Oklahoma's Part C program's online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff create an electronic record in EdPlan for each infant and toddler that enters the program with a referral. For children who are evaluated and determined eligible for an IFSP, the date of the first intervention service following parental consent on the IFSP is entered by the service provider in the record. The dates of the first intervention service for all initial and subsequent IFSPs completed during the time period reported are reviewed by SoonerStart supervisors at each local district program.

Oklahoma has chosen to utilize the first intervention service data associated with IFSPs completed in the fourth quarter (April 1, 2023 to June 30, 2023) to report in the FFY 2022 APR, as it has done the past six years. The SoonerStart Part C Data Manager examined data that were reported for this time period and compared them to data for the full year (FFY 2022). Based on the number and percentages of completed IFSPs for the entire year, Oklahoma determined that the 4th quarter data are representative of the 1st and 3rd quarters for FFY 2022 but not the 2nd quarter due to a decreased number of IFSPs completed in the 2nd quarter. However, the data are valid and reliable. The 4th quarter results accurately reflect data for the full reporting period because all areas of the state, all provider types and all categories of eligible children are included.

1st Quarter -----1006 IFSPs ----- 25.34%
 2nd Quarter -----834 IFSPs -----21.00%
 3rd Quarter -----1050 IFSPs ----- 26.44%
 4th Quarter -----1080 IFSPs ----- 27.20%

Provide additional information about this indicator (optional)

SoonerStart consolidated local sites into districts in 2022 and data is reported at the district level in the FFY 2022 APR. The number of findings for noncompliance issued in FFY 2022 will be reported at the local district level in the FFY 2023 APR.

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

Oklahoma considered a variety of factors to determine whether the local SoonerStart program had corrected identified noncompliance. These considerations included investigating the extent and root cause of the identified noncompliance, in addition to ensuring child-specific and systemic correction.

On December 1, 2022, SoonerStart issued a finding for noncompliance for timeliness of first intervention service visits to four local programs for noncompliance identified in September 2022. Data analysis indicated that three of the four programs exhibited one or two child-specific instances of non-compliance and the remaining program(serving 33% of the children enrolled statewide) exhibited less than five instances of non-compliance in FFY 2021. In all four local programs, the identified noncompliance in each child's record was determined to be an isolated incident and documented as occurring due to an illness experienced by the assigned service provider which delayed the first visit. The Part C Data Manager required that a Correction Assurance Statement be submitted by each of the four local programs following their receipt of a finding letter due to demonstrating less than

100% compliance for first intervention visits. The Part C Data Manager also verified that the noncompliance identified did not result in a denial of a basic right under the IDEA (e.g., a long delay in an initial evaluation beyond applicable timelines with a corresponding delay in the child's receipt of early intervention services, or a failure to provide services in accordance with the IFSP).

Following the issuance of findings, a subsequent data set was monitored quarterly to ensure that each local program was correctly implementing the regulatory requirements for timely services. The Part C Data Manager monitored compliance and verified correction of noncompliance by utilizing the First Intervention Service Visit Report created from the data recorded in individual child records in the SoonerStart EdPlan database. This report pulled the first visit date from the child's electronic record for all children enrolled in each local program during the previous three months and indicated the number of working days between the IFSP consent date and the first intervention visit. If more than 15 working days, the report also included the reason for delay that was documented in the child's record. Records with delays attributed to exceptional family circumstances were considered to be in compliance. All local programs demonstrated 100% compliance.

Verification of correction of both child and local program-level noncompliance findings is completed according to OSEP Memorandum 09-02 as well as procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, and Enforcement OSEP QA 23-01.

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

SoonerStart utilized the EdPlan electronic database to identify individual cases of noncompliance for timely services reported in FFY 2021. Individual child records were determined in noncompliance using the First Intervention Service Report that displayed the number of days between parental consent on the IFSP and the completed first service visit. Following the identification of noncompliance, the Part C Data Manager reviewed the child's electronic record in the EdPlan database to determine if the first intervention service visit had been completed, although late, and ensure that staff had documented the reason for missing the timeline in the child's record. Through this process, the Part C Data Manager verified correction of each individual case of previous noncompliance unless the child was no longer enrolled in the SoonerStart program, and no outstanding corrective action existed under a state complaint or due process hearing decision for the child.

Every individual record that resulted in four local program findings of non-compliance for timely first intervention visits issued in FFY 2021 were verified as corrected within 12 months of identification. Oklahoma utilized established program procedures to ensure the consistent and timely correction of all identified noncompliance, as required by 34 C.F.R. §§ 300.600(e) and 303.700(e) and required by OSEP Memorandum 09-02. In verification of correction, SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

1 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

In the FFY 2022 SPP/APR, Oklahoma verified that each local program with noncompliance identified in FFY 2021 for Indicator 1 is correctly implementing the specific regulatory requirements and achieved 100% compliance based on a review of updated data collected in the EdPlan database. The state also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program or no outstanding corrective action existed under a state complaint or due process hearing decision for the child. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02. SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

1 - OSEP Response

1 - Required Actions

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

Instructions

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	95.52%

FFY	2017	2018	2019	2020	2021
Target >=	95.50%	96.00%	96.00%	96.00%	96.00%
Data	96.53%	95.06%	96.30%	98.33%	94.14%

Targets

FFY	2022	2023	2024	2025
Target >=	96.00%	96.00%	96.00%	96.00%

Targets: Description of Stakeholder Input

In FFY 2022, SoonerStart shared detailed explanatory and contextual information with stakeholders in the discussion of each APR indicator. In reviewing the data for FFY 2022 with SoonerStart stakeholders, it was discussed that IFSP services in the natural environment continued to not meet target although no slippage occurred from the previous year. Discussions with stakeholders included potential reasons for services in non-natural environment. Reasons stated included:

- Parent preference
- Safety concerns for home visitors
- Military base logistics

Despite SoonerStart not meeting the FFY 2022 target, stakeholders agreed that 96% in an appropriate target for services in the natural environment that still allows for service locations to be individualized to the family's needs and circumstances. The target for Indicator 2 was not changed.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,428
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Total number of infants and toddlers with IFSPs	2,565

FFY 2022 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2,428	2,565	94.14%	96.00%	94.66%	Did not meet target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

In FFY 2022, SoonerStart shared detailed explanatory and contextual information with stakeholders in the discussion of each APR indicator. With Early Childhood Outcomes, stakeholders were informed about the different sections of Indicator 3. Stakeholders were informed all providers in FFY 2022, had completed DaSy's ECO-COS online module during the past year to help ensure accurate scoring. SoonerStart shared Indicator 3 results from neighboring states and discussed how Oklahoma compares to them. Targets for Indicator 3 were not changed.

Historical Data

Outcome	Baseline	FFY	2017	2018	2019	2020	2021
A1	2020	Target>=	78.50%	79.00%	79.00%	79.00%	84.00%
A1	84.38%	Data	83.35%	84.69%	84.96%	84.38%	85.86%
A2	2020	Target>=	52.50%	53.00%	53.00%	48.50%	48.50%
A2	48.58%	Data	54.01%	52.09%	50.20%	48.58%	47.81%
B1	2020	Target>=	83.50%	84.00%	84.00%	84.00%	85.00%
B1	85.10%	Data	86.10%	88.26%	86.09%	85.10%	87.19%
B2	2020	Target>=	46.50%	47.00%	47.00%	39.50%	40.00%
B2	39.83%	Data	45.55%	44.30%	41.19%	39.83%	38.47%
C1	2020	Target>=	84.50%	85.00%	85.00%	85.00%	85.00%
C1	85.82%	Data	86.81%	86.90%	87.68%	85.82%	86.41%
C2	2020	Target>=	47.50%	48.00%	48.00%	43.50%	43.50%
C2	43.56%	Data	49.78%	48.37%	47.23%	43.56%	43.38%

Targets

FFY	2022	2023	2024	2025
Target A1>=	84.50%	84.50%	84.50%	85.00%
Target A2>=	49.00%	49.00%	49.50%	49.50%
Target B1>=	85.50%	85.50%	85.50%	86.00%
Target B2>=	40.00%	40.50%	40.50%	41.00%
Target C1>=	85.50%	85.50%	85.50%	86.00%
Target C2>=	44.00%	44.00%	44.50%	44.50%

Number of infants and toddlers with IFSPs assessed

1,654

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	8	0.48%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	205	12.39%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	656	39.66%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	653	39.48%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	132	7.98%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,309	1,522	85.86%	84.50%	86.01%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	785	1,654	47.81%	49.00%	47.46%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	6	0.36%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	202	12.21%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	783	47.34%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	621	37.55%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	42	2.54%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,404	1,612	87.19%	85.50%	87.10%	Met target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	663	1,654	38.47%	40.00%	40.08%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	11	0.67%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	198	11.97%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	699	42.26%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	689	41.66%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	57	3.45%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program	1,388	1,597	86.41%	85.50%	86.91%	Met target	No Slippage

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
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							
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	746	1,654	43.38%	44.00%	45.10%	Met target	No Slippage

FFY 2022 SPP/APR Data

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	2,640
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.	772
Number of infants and toddlers with IFSPs assessed	1,654

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

Program data for this indicator comes from Oklahoma's Early Intervention online database, EdPlan. SoonerStart maintains an electronic record for each infant and toddler in the program, including an electronic version of the Child Outcome Summary Form. Service provider staff are responsible for inputting entry ratings in the electronic COS form within 30 days following the initial IFSP's development. Exit ratings and progress statements are entered for each child exiting SoonerStart if he or she received services for at least a 180-day period from the date of the IFSP to the date of the child's exit from the program. Staff enter the COS ratings and progress information within 30 days of the child's third birthday or 30 days following the child's exit from the program if the child leaves the program before age 3. Quarterly, the Part C Data Manager generates an Early Childhood Outcome report from the EdPlan database to review data completeness. After data are validated for completeness annually in September, Oklahoma uses the Early Childhood Technical Assistance Center (ECTA) COS Calculator to convert the raw data into federal reporting categories included in the Annual Performance Report and disaggregated for local district program profiles.

Provide additional information about this indicator (optional).

3 - Prior FFY Required Actions

None

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Data Source

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

Measurement

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

Beginning with the FFY 2022 SPP/APR, due February 1, 2024, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race/ethnicity in its analysis. In addition, the State's analysis must also include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another demographic category approved through the stakeholder input process.

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2020	Target>=	95.00%	96.00%	96.00%	85.25%	86.00%
A	85.75 %	Data	97.59%	99.31%	98.33%	85.75%	91.83%
B	2020	Target>=	95.00%	96.00%	96.00%	87.50%	88.00%
B	87.96 %	Data	99.12%	99.31%	99.76%	87.96%	92.44%
C	2020	Target>=	95.00%	96.00%	96.00%	97.00%	97.00%
C	97.54 %	Data	99.67%	97.58%	99.52%	97.54%	95.01%

Targets

FFY	2022	2023	2024	2025
Target A>=	87.00%	88.00%	89.00%	90.00%
Target B>=	88.50%	89.00%	89.50%	90.00%
Target C>=	97.50%	97.50%	97.50%	98.00%

Targets: Description of Stakeholder Input

In response to the directive from OSEP to report on additional demographics for FFY 2022, SoonerStart turned to its stakeholders to present options and solicit input. Feedback was obtained through emails, surveys, in-person and virtual meetings. Many stakeholders were familiar with the family survey from their experience as a parent, service provider or Resource Coordinator. Stakeholders were presented with the guidance given from OSEP that each state must include race/ethnicity in its analysis of survey data as well as another demographic category approved through the stakeholder input process. SoonerStart has included race/ethnicity, gender and child age data in reporting on family outcomes for over ten years. Stakeholders ruled out adding another category to the survey to collect additional information and recommended that gender be designated as the second demographic data point. Targets for Indicator 4 were not changed.

FFY 2022 SPP/APR Data

The number of families to whom surveys were distributed	2,565
Number of respondent families participating in Part C	1,538
Survey Response Rate	59.96%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,447
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,538
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	1,459
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,538
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,456
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,538

Measure	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	91.83%	87.00%	94.08%	Met target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	92.44%	88.50%	94.86%	Met target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	95.01%	97.50%	94.67%	Did not meet target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

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

Response Rate

FFY	2021	2022
Survey Response Rate	50.29%	59.96%

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

The State uses a statistical test (Z-test for two population proportions) to determine if two proportions (i.e., % of surveys received versus % of families in the target population) are likely to be statistically different. A p-value less than 0.05 indicates that the difference between the two proportions is not likely due to chance.

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

Oklahoma has historically reported demographic data on race/ethnicity, gender, and age on infants and toddlers for who families responded to the family outcome survey. No new demographics were analyzed for FFY 2022. Survey data were compared to the December 1, 2022 Child Count in analyzing representativeness.

RACE/ETHNICITY

As required in the FFY 2022 APR, SoonerStart analyzed survey responses by race/ethnicity and determined that the response pool varies from the service population in multiple categories.

SURVEY RESPONSES: (1538)	2022 CHILD COUNT: (2565)	DIFFERENCE	P-VALUE
American Indian----- 11.83%	-----8.03%	-----0.038	-----0.00001 (significantly different)
Asian----- 1.43%	-----2.26%	-----0.0083	-----0.06288 (not significantly different)
Black----- 8.52%	-----7.60%	-----0.0092	-----0.29375 (not significantly different)
Hispanic----- 8.65%	-----17.39%	-----0.0874	-----0.00001 (significantly different)
Pacific Islander----- 0.78%	-----0.35%	-----0.0043	-----0.06148 (not significantly different)
Two or More Races --21.78%	-----10.21%	-----0.116	-----0.00001 (significantly different)
White -----43.43%	-----54.15%	-----0.1072	-----0.00001 (significantly different)
Prefer not to answer- 3.58%			

SoonerStart determined that its survey response pool does not match the child count demographics by racial identification for four categories.

Respondents identifying their children as "Two or More Races" are significantly over-represented compared to the service population. SoonerStart does not have an explanation for this disparity except to hypothesize that when enrolling, families are less likely to indicate that their child identifies with multiple races compared to when responding to an anonymous survey. Oklahoma has seen this phenomenon on past surveys. SoonerStart hypothesizes that the anonymity of the survey presents respondents an opportunity to mark racial identity differently than at enrollment in the program. For example, if a child lives with two parents - one who identifies as American Indian and one who identifies as White - the race selected at enrollment may be marked as White, or American Indian or Two or More Races depending on which caregiver completes it. This may be entirely different than the race reported on the survey, especially if the other parent completes it. The program has not tested nor verified this conjecture, however. Respondents identifying their children as "American Indian" were over-represented but not as substantially as Two or More Races.

Respondent families identifying their children as "White" were under-represented. SoonerStart proposes the same hypothesis that families may select White, Black or another race category upon enrollment but select a different category on an anonymous survey. The other category of respondent families under-represented was Hispanic. Last year, ongoing efforts to increase Hispanic family responses resulted in the percentage of responses from families identifying as Hispanic as representative of the Hispanic service population. However, in FFY 2022, the number of children identified as Hispanic in the FFY 2022 child count increased over 40% but the percentage of responses from families identifying their children as Hispanic did not reflect the same increase. SoonerStart will continue to prioritize efforts to increase Hispanic family responses.

GENDER

SoonerStart analyzed survey response data by child gender as the second required category approved through the stakeholder input process. In the comparisons below, survey responses align very closely with the overall child count demographics for gender. A small portion, 2.34%, preferred not to report their child’s gender at the time of response.

Gender	Survey Responses (1538)	2022 Child Count (2565)	Difference	P-value
Female	-----39.34%	-----39.26%	-----0.008	-----0.96012 (not significantly different)
Male	-----58.32%	-----60.74%	-----0.0242	-----0.12602 (not significantly different)
Prefer not to answer	----2.34%			

CHILD AGE GROUP

SoonerStart also analyzed survey response data by child age group. Age group variation also exists, with two age groups showing significant differences between the rates among respondents and those in the service population (child count). Because of efforts to increase response rates among families of very young children in past years due to low representativeness, the rate of responses has increased to reflect a higher percentage of this group compared to the SoonerStart service population. Although the difference is significant in the Birth to 1 group, it is not large. The difference is only 2.32%. The program believes that the best way to re-balance the response pool is to increase the response rate and encourage all families to respond, especially those with older children. A small portion, 1.7%, preferred not to report their child’s age at the time of response.

Age Group	Survey Responses (1538)	2022 Child Count (2565)	Difference	P-value
Birth to 1	-----16.71%	-----14.39%	-----0.0232	-----0.0455 (significantly different)
1 to 2	-----32.18%	-----31.70%	-----0.0048	-----0.74896 (not significantly different)
2 to 3	-----49.41%	-----53.92%	-----0.0451	-----0.00001 (significantly different)

More than 3 -----38 added to above for %
Prefer Not to answer ----1.70%

Note: a positive difference indicates over-representation in the survey response pool; a negative difference indicates under-representation.

The demographics of the parents responding are representative of the demographics of children receiving special education services. (yes/no)

NO

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

N/A

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

The response rate increased more than 20 percent in FFY 2022, compared to last year, as the SoonerStart state office continued to provide local districts monthly updates on the number of survey responses received to date. With this information, local teams were more focused on encouraging families to complete surveys, especially if the number of responses were low for the month. This approach was added to a multitude of other strategies currently implemented by SoonerStart to increase family survey response rates, including:

1. Ensuring all families receive information on accessing the survey within three months following the initial IFSP meeting, at the Annual IFSP meeting and when exiting SoonerStart
2. Partnering with the Oklahoma Parents Center to disseminate Family Surveys
3. Providing a detailed brochure explaining the Family Survey to each family at the initial IFSP meeting
4. Requiring Resource Coordinators to record on the IFSP document that they provided survey information to the family at the IFSP meeting
5. Providing multiple options for completing the survey which includes online, by telephone or mailing in a paper copy
6. Assisting families in completing surveys online by providing access to a laptop or smartphone for the parent to use while SoonerStart staff are in the home.
7. Emailing families upon exiting the program to ask them to respond to the family survey (an active hyperlink is included in the email).
8. The family survey response rate is included as a measurement for the local district's annual determination. The metric awards points based on the number of family survey responses as a percentage of the local district's one-day child count.

SoonerStart provides all families access to the survey on multiple occasions and does not target families for responses based on a demographic category (child race/ethnicity, gender or age). SoonerStart cannot guarantee that the response pool will ever be perfectly representative (as it could be if responses were solicited using a weighted sample) because completing the survey is totally voluntary. Nevertheless, SoonerStart will continue to explore new strategies to increase the survey response rate of all families at all local district programs, without demographic preference or bias.

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

SoonerStart compared the data of our one-day child-count to the demographics of the completed family surveys. Based on FFY 2022 data analysis, under-represented groups were those identifying as Hispanic/Latino and White. Overrepresented groups included the American Indian/Alaskan Native and the Two or More Races categories.

In addition to the strategies outlined above to increase overall survey response rates, SoonerStart implemented strategies specifically to increase the responses from Hispanic and Latino families.

- The Family Survey was made available in Spanish both written and verbally.
- SoonerStart employs several interpreters and providers who are fluent in Spanish. The interpreters and providers made themselves available to assist the family during survey presentation and completion, respecting the privacy of the family as they completed it.
- SoonerStart offered Spanish speaking families a phone number to complete the survey in their native language.
- SoonerStart staff were provided training on Family Coaching to address any bias in how they are interacting with culturally diverse families.

Non-response bias may occur when a sub-section of families are unwilling or unable to respond to a survey. The error comes from the absence of participants and not from collecting erroneous data. Therefore, the State has determined that the evaluation of the non-response bias is not feasible. The actual value of "parents who received the survey and declined to participate" is still unknown. Furthermore, even if all families received a copy of the survey, but then declined to participate, we would not be able to determine which families chose not to participate because the survey is completely anonymous, and therefore cannot assess whether bias exists.

Although the State cannot determine a specific non-response bias nor its cause, the State plans to decrease any potential future non-response as follows:

- Generally, continue to work to increase the response rate. By increasing the response rate, any potential bias among non-respondents will be lower.
- Send reminders to families who have been asked to complete the survey: Sending reminder emails throughout the data collection period has been shown to effectively increase the response rate. The State will look into sending reminder emails soon after a family has been given the first opportunity to respond.
- Ensure confidentiality: SoonerStart staff will assure families that all information will be kept confidential. In addition, staff will inform families who will view the survey results and how their data is utilized.
- Express commitment: SoonerStart families should feel that the survey is valuable and that their responses are valued. If families feel the survey is important, they may feel more committed to completing and returning the survey. SoonerStart staff will reassure the family that their response is vital to the program's success.

Provide additional information about this indicator (optional).

SoonerStart also compared the respondent's gender, age, and race with the same demographic categories for Oklahoma's population. The population estimates were retrieved from the Annie E. Casey Foundation. As a general observation, the demographic characteristics of children whose families completed a survey do not appear to be representative of all Oklahoma children with the same demographic characteristics with the exception of the race category, Black. SoonerStart has no expectation or intention of achieving representativeness in the comparison of survey respondents' gender, age, and race with the same categories of the state's general population.

RACE-----	SURVEY RESPONSES -----	2022 CHILD COUNT -----	OKLAHOMA POPULATION
American Indian -----	11.83%	8.03%	8.53%
Asian -----	1.43%	2.26%	2.33%
Black -----	8.52%	7.60%	8.56%
Hispanic -----	8.65%	17.39%	20.17%
Pacific Islander -----	0.78%	0.35%	0.38%

Two or more races -----	21.78%	-----	10.21%	-----	12.02%
White -----	43.43%	-----	54.15%	-----	47.45%
Prefer not to answer -----	3.58%				

GENDER -----	SURVEY RESPONSES -----	2022 CHILD COUNT -----	OKLAHOMA POPULATION	
Female -----	39.34%	-----	39.26% -----	48.80%
Male -----	58.32%	-----	60.74% -----	51.20%
Prefer not to answer -----	2.34%			

AGE -----	SURVEY RESPONSES -----	2022 CHILD COUNT -----	OKLAHOMA POPULATION	
Birth to 1 -----	16.71%	-----	14.39% -----	33.22%
1 to 2 -----	32.18%	-----	31.70% -----	33.06%
2 to 3 -----	49.41%	-----	53.92% -----	33.72%
Prefer Not to answer -----	1.70%			

4 - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

In response to OSEP's required actions stated in the FFY 2021 SPP/APR, SoonerStart has indicated in several sections above whether its FFY 2022 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and the actions the program is taking to address this issue. SoonerStart has also included the extent to which the demographics of the families responding are representative of the population in the section labeled "Provide Additional Information About this Indicator."

4 - OSEP Response

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2013	0.81%

FFY	2017	2018	2019	2020	2021
Target >=	0.88%	0.90%	0.90%	0.63%	0.65%
Data	0.80%	0.83%	0.77%	0.63%	0.74%

Targets

FFY	2022	2023	2024	2025
Target >=	0.70%	0.75%	0.80%	0.85%

Targets: Description of Stakeholder Input

In FFY 2022, SoonerStart shared detailed explanatory and contextual information with stakeholders in the discussion of each APR indicator. In reviewing FFY 2022 data for Indicator 5 with stakeholders, SoonerStart shared that the percentage of children ages 0-1 had a slight increase from the previous year and met the required target. SoonerStart has an increase in Child Count overall. Targets were not changed for Indicator 5.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 1 with IFSPs	369
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 1	47,793

FFY 2022 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
369	47,793	0.74%	0.70%	0.77%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

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

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2013	1.66%

FFY	2017	2018	2019	2020	2021
Target >=	1.68%	1.70%	1.70%	1.50%	1.55%
Data	1.67%	1.73%	1.75%	1.53%	1.58%

Targets

FFY	2022	2023	2024	2025
Target >=	1.60%	1.65%	1.70%	1.75%

Targets: Description of Stakeholder Input

In FFY 2022, SoonerStart shared detailed explanatory and contextual information with stakeholders in the discussion of each APR indicator. In reviewing FFY 2022 data for Indicator 6 with stakeholders, SoonerStart shared that the percentage of children ages 0-3 had a slight increase from the previous year and met the required target. SoonerStart has an increase in Child Count overall. Targets were not changed for Indicator 6.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 3 with IFSPs	2,565
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 3	143,858

FFY 2022 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2,565	143,858	1.58%	1.60%	1.78%	Met target	No Slippage

Provide additional information about this indicator (optional).

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	96.75%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	95.56%	95.40%	99.84%	99.28%	93.04%

Targets

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

FFY 2022 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
454	740	93.04%	100%	93.92%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

241

Provide reasons for delay, if applicable.

SoonerStart reported that 241 children did not receive timely initial IFSPs due to exceptional family circumstances. These exceptional family circumstances included when the child was unavailable to complete an initial evaluation, assessment or IFSP meeting because the parent cancelled or did not show for the appointment. SoonerStart also documented exceptional family circumstances when repeated attempts to contact the family to obtain consent for an evaluation or assessment were unsuccessful in a timely manner.\

Forty-five children did not receive a timely initial IFSP due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling.

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

State database

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

Data were collected during the time period between April 1, 2023 and June 30, 2023 (4th quarter of FFY 2022).

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

Program data for this indicator are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff use the system to create an electronic record for each infant and toddler that enters the program with a referral. For children who are evaluated and determined eligible for an IFSP, the date of the Initial IFSP is entered by the service coordinator in the electronic record. The dates of Initial IFSPs completed during the time period reported are reviewed by SoonerStart supervisors at each local district. .

Oklahoma has chosen to utilize the Initial IFSP data from the fourth quarter (April 1, 2023 to June 30, 2023) to report in the FFY 2022 APR, as it has previously done the past six years. The SoonerStart Part C Data Manager examined data that were reported for this time period and compared them to data for the full year (FFY 2022). Counts of completed IFSPs varied each quarter in FFY 2022, with the highest number in the 1st and 4th quarter. We are not able to explain the variation across quarters during the year. We have determined the data are valid and reliable. The 4th quarter results accurately reflect data for the full reporting period because all areas of the state, all provider types and all categories of eligible children are included.

Initial IFSP # Initial IFSP %
 1st Quarter:-----759-----90.91%
 2nd Quarter:-----659-----92.41%
 3rd Quarter:-----598-----90.30%
 4th Quarter:-----740-----93.92%

Provide additional information about this indicator (optional).

SoonerStart consolidated local sites into districts in 2022 and data is reported at the district level in the FFY 2022 APR. The number of findings for noncompliance issued in FFY 2022 will be reported at the local district level in the FFY 2023 APR.

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

Oklahoma considered a variety of factors to determine whether the local SoonerStart program had corrected identified noncompliance. These considerations included investigating the extent and root cause of the identified noncompliance, in addition to ensuring child-specific and systemic correction.

On December 1, 2022, SoonerStart issued a finding for noncompliance for timely IFSPs to eleven local programs for noncompliance identified in September 2022. Data analysis indicated that four of the eleven local programs exhibited more than five child-specific instances of noncompliance and the remaining local programs exhibited only one or two instances of noncompliance. In the four local programs with multiple instances of delay in completing the IFSP, it was determined to be due to provider vacancies. This issue was corrected within two months with the hiring and training of new service providers to build the capacity of the local program to meet IFSP timelines. At the remaining seven local programs, the identified noncompliance in each child's record was determined to be an isolated incident and documented as occurring due to an illness experienced by a member of the IFSP team which postponed the IFSP meeting. The Part C Data Manager required that a Correction Assurance Statement be submitted by all eleven local programs following their receipt of a finding letter due to demonstrating less than 100% compliance for timely initial IFSPs. The Part C Data Manager also verified that the noncompliance identified did not result in a denial of a basic right under the IDEA (e.g., a long delay in an initial evaluation beyond applicable timelines with a corresponding delay in the child's receipt of early intervention services, or a failure to provide services in accordance with the IFSP).

Following the issuance of findings, a subsequent data set was monitored quarterly to ensure that each local program was correctly implementing the regulatory requirements for timely development of initial IFSPs. The Part C Data Manager monitored compliance and verified correction of noncompliance by reviewing the IFSP Timeline Report created from the data recorded in individual child records in the SoonerStart EdPlan database. This report pulled the referral date from the child's electronic record for all children enrolled in each program during the previous three months and indicated the number of calendar days between the referral date and the initial IFSP date. If more than 45 calendar days, the report also included the reason for delay that was documented in the child's record. Records with delays attributed to exceptional family circumstances were considered to be in compliance. All local programs demonstrated 100% compliance less than one year from issuance of the finding letter.

Verification of correction of both child and site-level noncompliance findings is completed according to OSEP Memorandum 09-02 as well as procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, and Enforcement OSEP QA 23-01.

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

SoonerStart utilized the EdPlan electronic database to identify individual cases of noncompliance for timely initial IFSPs reported in FFY 2021. Individual child records were determined in noncompliance using the IFSP Timeline Report that displayed the number of days between the child's referral to SoonerStart and the completion of the initial IFSP. Following the identification of noncompliance, the Part C Data Manager reviewed the child's electronic record in the EdPlan database to determine if the initial IFSP had been completed, although late, and ensure that staff had documented the

reason for missing the timeline in the child's record. Through this process, the Part C Data Manager verified correction of each individual case of previous noncompliance unless the child was no longer enrolled in the SoonerStart program and no outstanding corrective action existed under a State complaint or due process hearing decision for the child.

Every individual record that resulted in eleven local program findings of non-compliance for timely initial IFSPs issued in FFY 2021 were verified as corrected within 12 months of identification. Oklahoma utilized established program procedures to ensure the consistent and timely correction of all identified noncompliance, as required by 34 C.F.R. §§ 300.600(e) and 303.700(e) and required by OSEP Memorandum 09-02. In verification of correction, SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

7 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

In the FFY 2022 SPP/APR, Oklahoma verified that each local program site with noncompliance identified in FFY 2021 for Indicator 7 is correctly implementing the specific regulatory requirements and achieved 100% compliance based on a review of updated data collected in the EdPlan database. The state also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program or no outstanding corrective action existed under a State complaint or due process hearing decision for the child. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02. SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

7 - OSEP Response

7 - Required Actions

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	97.82%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.51%	96.83%	99.52%	97.39%	99.71%

Targets

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

FFY 2022 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
358	399	99.71%	100%	98.75%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

36

Provide reasons for delay, if applicable.

SoonerStart reported that 36 children did not receive timely transition steps and services on their IFSP due to exceptional family circumstances. These exceptional family circumstances included when the parent was unable to initiate transition services on the IFSP because the parent cancelled or no showed the IFSP meeting. Five children did not receive timely transition steps and services on their IFSP due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling.

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

State database

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

Data were collected during the time period between April 1, 2023, and June 30, 2023 (4th quarter of FFY 2022).

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

Program data for this indicator are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff use the system to create an electronic record for each infant and toddler that enters the program with a referral. The dates of critical transition events are recorded permanently in the electronic record. These dates include the date of the IFSP with transition steps and services initiated, the date of LEA notification, and the date of the TPC with the LEA for children potentially eligible for Part B services. The dates of the IFSP with timely transition steps and services completed during the time period reported are entered in the EdPlan records and reviewed by SoonerStart supervisors at each local district. .

Oklahoma has chosen to utilize transition initiation data from the fourth quarter (April 1, 2023, to June 30, 2023) to report in the FFY 2022 APR, as it has previously done the past six years. Early Intervention records for toddlers with third birthdays between April 1, 2023, and June 30, 2023, were reviewed for timely transition initiation utilizing the EdPlan database. After review by local supervisors, the SoonerStart Part C Data Manager examined data reported for this time period and compared them to data for the full year (FFY 2022). Based on the number and percentages of children exiting Part C at age 3 for the entire year, Oklahoma determined that the 4th quarter data are representative of FFY 2022. Additionally, the 4th quarter results are representative of a full year of the state's data because all areas of the state, all provider types, and all categories of eligible children are included.

----- # of Children aged out -----% of Children aged out	
-----at 3 years of age -----at 3 years of age	
1st Quarter -----436 -----26.19%	
2nd Quarter -----430 -----25.83%	
3rd Quarter -----400 -----24.02%	
4th Quarter -----399 -----23.96%	

Provide additional information about this indicator (optional)

SoonerStart consolidated local sites into districts in 2022 and data is reported at the district level in the FFY 2022 APR. The number of findings for noncompliance issued in FFY 2022 will be reported at the local district level in the FFY 2023 APR.

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

Oklahoma considered a variety of factors to determine whether the local SoonerStart program had corrected identified noncompliance. These considerations included investigating the extent and root cause of the identified noncompliance, in addition to ensuring child-specific and systemic correction.

On December 1, 2022, SoonerStart issued a finding for noncompliance for timely transition initiation on the IFSP to one local program for noncompliance identified in September 2022. Data analysis indicated that the instance of delay in timely transition initiation on the IFSP was determined to be an isolated incident and documented as occurring due to an illness experienced by a member of the IFSP team which postponed the IFSP meeting. The

Part C Data Manager required that a Correction Assurance Statement be submitted by the local program following their receipt of a finding letter due to demonstrating less than 100% compliance for timely transition initiation. The Part C Data Manager also verified that the noncompliance identified did not result in a denial of a basic right under the IDEA (e.g., a long delay in an initial evaluation beyond applicable timelines with a corresponding delay in the child's receipt of early intervention services, or a failure to provide services in accordance with the IFSP).

Following the issuance of the finding, a subsequent data set was monitored quarterly to ensure that the local program was correctly implementing the regulatory requirements for timely transition initiation on the IFSP. The Part C Data Manager monitored compliance and verified correction of noncompliance by reviewing the Transition Timeline Monitoring Report created from the data recorded in individual child records in the SoonerStart EdPlan database. This report pulled the transition initiation date from the Transition Page in the IFSP from the child's electronic record for all children enrolled at the local program for comparison with the Transition Target date (calculated as 90 days prior to the child's third birthday) that was also displayed in the report. If the transition initiation date in the child's record occurred before the child was 27 months of age, or was greater than the Transition Target Date, the report included the reason for delay that was documented in the child's record. Records with delays attributed to exceptional family circumstances were considered to be in compliance. The local program demonstrated 100% compliance less than one year from issuance of the finding letter.

Verification of correction of both child and site-level noncompliance findings is completed according to OSEP Memorandum 09-02 as well as procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, and Enforcement OSEP QA 23-01.

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

SoonerStart utilized the EdPlan electronic database to identify individual cases of noncompliance for timely transition initiation reported in FFY 2021. Individual child records were determined in noncompliance using the Transition Timeline Monitoring Report that pulled the transition initiation date from the Transition Page in the IFSP from the child's electronic record for comparison with the Transition Target date (calculated as 90 days prior to the child's third birthday) that was also displayed in the report. For identified noncompliance, the Part C Data Manager reviewed the child's electronic record in the EdPlan database to determine if transition had been initiated on the IFSP, although late, and ensure that staff had documented the reason for missing the timeline in the child's record. Through this process, the Part C Data Manager verified correction of each individual case of previous noncompliance unless the child was no longer enrolled in the SoonerStart program, and no outstanding corrective action existed under a state complaint or due process hearing decision for the child.

The record which resulted in one finding of non-compliance for timely transition initiation issued in FFY 2021 was verified as corrected within 12 months of identification. Oklahoma utilized established program procedures to ensure the consistent and timely correction of all identified noncompliance, as required by 34 C.F.R. §§ 300.600(e) and 303.700(e) and required by OSEP Memorandum 09-02. In verification of correction, SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8A - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

In the FFY 2022 SPP/APR, Oklahoma verified that each local program with noncompliance identified in FFY 2021 for Indicator 8A is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02. SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

8A - OSEP Response

8A - Required Actions

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

- Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- Notified (consistent with any opt-out policy adopted by the State) the 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)

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	98.54%	96.15%	96.14%	95.75%	96.77%

Targets

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

FFY 2022 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
389	399	96.77%	100%	97.49%	Did not meet target	No Slippage

Number of parents who opted out

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

0

Provide reasons for delay, if applicable.

SoonerStart does not have an opt-out policy, so no delays affected the timely Notification to the LEA due to exceptional family circumstances. Ten children did not have a timely Notification to the LEA due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling.

Describe the method used to collect these data.

Program data for this Indicator 8B are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff use the system to create an electronic record for each infant and toddler that enters the program with a referral. The dates of critical transition events are recorded permanently on the Transition Page of the IFSP in the electronic record. These dates include the date of the IFSP with transition steps and services initiated, the date of LEA notification, and the date of the TPC with the LEA for children potentially eligible for Part B services.

Early Intervention staff are required to input the date that written notification is sent to the LEA. Using the Transition Timeline Monitoring report created in the EdPlan database, the Part C Data Manager verifies that the Notification to the LEA occurred and, if past the target date requirement, determines whether the toddler was considered a late referral (referred less than 90 days before the child's third birthday). If the date of the Notification to the LEA is missing from the Transition Timeline Monitoring report, the local program supervisor must verify that a copy of a timely LEA notification is on file and enter the date in the child's electronic record. The Oklahoma SEA is notified of toddlers potentially eligible for Part B services through SoonerStart EdPlan, under the SoonerStart MOU with the Oklahoma State Department of Education 619 program. EdPlan allows for a direct flow of information from each local SoonerStart program to OSDE as the lead agency, enabling centralized monitoring and oversight and statewide child find.

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

NO

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

State database

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

Data were collected during the time period between April 1, 2023, and June 30, 2023 (4th quarter of FFY 2022).

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

Program data for this indicator are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff use the system to create an electronic record for each infant and toddler that enters the program with a referral. The dates of critical transition events are recorded permanently in the electronic record. These dates include the date of the IFSP with transition steps and services initiated, the date of LEA notification, and the date of the TPC with the LEA for children potentially eligible for Part B services. The dates of the Notification to the LEA completed during the time period reported are entered in the EdPlan records and reviewed by SoonerStart supervisors at each local district.

Oklahoma has chosen to utilize Notification to the LEA data from the fourth quarter (April 1, 2023, to June 30, 2023) to report in the FFY 2022 APR, as it has previously done the past six years. Early Intervention records for toddlers with third birthdays between April 1, 2023, and June 30, 2023, were reviewed for timely Notification to the LEA utilizing the EdPlan database. After review by local supervisors, the SoonerStart Part C Data Manager examined data reported for this time period and compared them to data for the full year (FFY 2022). Based on the number and percentages of children exiting Part C at age 3 for the entire year, Oklahoma determined that the 4th quarter data are representative of FFY 2022. Additionally, the 4th quarter results are representative of a full year of the state's data because all areas of the state, all provider types, and all categories of eligible children are included.

----- # of Children aged out -----	-----% of Children aged out -----
-----at 3 years of age -----	-----at 3 years of age -----
1st Quarter -----436 -----	-----26.19% -----
2nd Quarter -----430 -----	-----25.83% -----
3rd Quarter -----400 -----	-----24.02% -----
4th Quarter -----399 -----	-----23.96% -----

Provide additional information about this indicator (optional).

SoonerStart consolidated local sites into districts in 2022 and data is reported at the district level in the FFY 2022 APR. The number of findings for noncompliance issued in FFY 2022 will be reported at the local district level in the FFY 2023 APR.

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

Oklahoma considered a variety of factors to determine whether the local SoonerStart program had corrected identified noncompliance. These considerations included investigating the extent and root cause of the identified noncompliance, in addition to ensuring child-specific and systemic correction.

On December 1, 2022, SoonerStart issued a finding for noncompliance for timely notification to the LEA to four local programs for noncompliance identified in September 2022. Data analysis indicated that all delays in timely notification to the LEA were determined to be isolated incidents at each of the four local programs and documented as occurring due to staff inadvertently missing the transition timeline. In all cases, the notification to the LEA was subsequently provided to the LEA in an adequate timeframe to facilitate the transition process. The Part C Data Manager required that a Correction Assurance Statement be submitted by the local program following their receipt of a finding letter due to demonstrating less than 100% compliance for timely notification to the LEA. The Part C Data Manager also verified that the noncompliance identified did not result in a denial of a basic right under the IDEA (e.g., a long delay in an initial evaluation beyond applicable timelines with a corresponding delay in the child’s receipt of early intervention services, or a failure to provide services in accordance with the IFSP).

Following the issuance of the finding, a subsequent data set was monitored quarterly to ensure that the local program was correctly implementing the regulatory requirements for timely notification to the LEA. The Part C Data Manager monitored compliance and verified correction of noncompliance by reviewing the Transition Timeline Monitoring Report created from the data recorded in individual child records in the SoonerStart EdPlan database. This report was used to verify that the Notification to the LEA date documented on the Transition Page in the IFSP occurred prior to the Transition Target date (calculated as 90 days prior to the child’s third birthday). The local programs demonstrated 100% compliance less than one year from issuance of the finding letter.

Verification of correction of both child and site-level noncompliance findings is completed according to OSEP Memorandum 09-02 as well as procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, and Enforcement OSEP QA 23-01.

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

SoonerStart utilized the EdPlan electronic database to identify individual cases of noncompliance for timely notification to the LEA reported in FFY 2021. Individual child records were determined in noncompliance using the Transition Timeline Monitoring Report that pulled the Notification to the LEA date from the Transition Page in the IFSP from the child’s electronic record for comparison with the Transition Target date (calculated as 90 days prior to the child’s third birthday). For identified noncompliance, the Part C Data Manager reviewed the child’s electronic record in the EdPlan database to determine if the Notification to the LEA, although late, had been transmitted to the LEA. Through this process, the Part C Data Manager verified correction of each individual case of previous noncompliance unless the child was no longer enrolled in the SoonerStart program, and no outstanding corrective action existed under a state complaint or due process hearing decision for the child.

The records which resulted in four local programs findings of non-compliance for timely Notification to the LEA issued in FFY 2021 were verified as corrected within 12 months of identification. Oklahoma utilized established program procedures to ensure the consistent and timely correction of all identified noncompliance, as required by 34 C.F.R. §§ 300.600(e) and 303.700(e) and required by OSEP Memorandum 09-02. In verification of correction, SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8B - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

In the FFY 2021 SPP/APR, Oklahoma verified that each local program with noncompliance identified in FFY 2020 for Indicator 8B is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02. SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

8B - OSEP Response**8B - Required Actions**

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	99.42%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	95.61%	96.03%	95.69%	97.39%	96.96%

Targets

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

FFY 2022 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
224	399	96.96%	100%	97.48%	Did not meet target	No Slippage

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

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

81

Number of documented delays attributable to exceptional family circumstances

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

86

Provide reasons for delay, if applicable.

SoonerStart reported that 86 children did not receive a timely TPC with the LEA due to exceptional family circumstances. These exceptional family circumstances included when the parent was unable to complete a timely TPC with the LEA because the parent cancelled or no showed the TPC meeting. The majority of untimely TPCs with the LEA were due to parents initially declining to give approval to convene the TPC and then changing their minds and providing consent after the 90-day timeline. These occurrences were documented as exceptional family circumstances. Eight children did not receive timely TPCs due to staff reasons. Staff reasons include unavailability due to vacation, illness, or scheduling conflict.

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

State database

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

Data were collected during the time period between April 1, 2023 and June 30, 2023 (4th quarter of FFY 2021).

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

Program data for this indicator are collected from Oklahoma's Early Intervention online database called EdPlan. EdPlan captures and displays the status and content of the infant or toddler's record at any given period of time. Staff use the system to create an electronic record for each infant and toddler that enters the program with a referral. The dates of critical transition events are recorded permanently in the electronic record. These dates include the date of the IFSP with transition steps and services initiated, the date of LEA notification, and the date of the TPC with the LEA for children potentially eligible for Part B services. The dates of the Transition Planning Conferences completed during the time period reported are entered in the EdPlan records and reviewed by SoonerStart supervisors at each local district.

Oklahoma has chosen to utilize TPC timeline data from the fourth quarter (April 1, 2023, to June 30, 2023) to report in the FFY 2022 APR, as it has previously done the past six years. Early Intervention records for toddlers with third birthdays between April 1, 2023, and June 30, 2023, were reviewed for timely TPCs utilizing the EdPlan database. After review by local supervisors, the SoonerStart Part C Data Manager examined data reported for this time period and compared them to data for the full year (FFY 2022). Based on the number and percentages of children exiting Part C at age 3 for the entire year, Oklahoma determined that the 4th quarter data are representative of FFY 2022. Additionally, the 4th quarter results are representative of a full year of the state's data because all areas of the state, all provider types, and all categories of eligible children are included.

----- # of Children aged out -----	-----% of Children aged out
-----at 3 years of age -----	-----at 3 years of age
1st Quarter -----436 -----	-----26.19%
2nd Quarter -----430 -----	-----25.83%
3rd Quarter -----400 -----	-----24.02%
4th Quarter -----399 -----	-----23.96%

Provide additional information about this indicator (optional).

SoonerStart consolidated local sites into districts in 2022 and data is reported at the district level in the FFY 2022 APR. The number of findings for noncompliance issued in FFY 2022 will be reported at the local district level in the FFY 2023 APR.

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

Oklahoma considered a variety of factors to determine whether the local SoonerStart program had corrected identified noncompliance. These considerations included investigating the extent and root cause of the identified noncompliance, in addition to ensuring child-specific and systemic correction.

On December 1, 2022, SoonerStart issued a finding for noncompliance for timely transition planning conferences (TPCs) to six local programs for noncompliance identified in September 2022. Data analysis indicated that the instances of delay in timely TPCs were determined to be due to the child being determined as potentially eligible for Part B services on or only a few days before the 90-day transition target date. The timeframe of this determination did not allow sufficient time before the timeline to schedule the TPC with the LEA. The Part C Data Manager required that a Correction Assurance Statement be submitted by the local programs following their receipt of a finding letter due to demonstrating less than 100% compliance for timely TPCs. The Part C Data Manager also verified that the noncompliance identified did not result in a denial of a basic right under the IDEA (e.g., a long delay in an initial evaluation beyond applicable timelines with a corresponding delay in the child's receipt of early intervention services, or a failure to provide services in accordance with the IFSP).

Following the issuance of the finding, a subsequent data set was monitored quarterly to ensure that the local programs were correctly implementing the regulatory requirements for timely TPCs. The Part C Data Manager monitored compliance and verified correction of noncompliance by reviewing the Transition Timeline Monitoring Report created from the data recorded in individual child records in the SoonerStart EdPlan database. This report pulled the TPC date from the Transition Page in the IFSP from the child's electronic record for comparison with the Transition Target date (calculated as 90 days prior to the child's third birthday) that was also displayed in the report. If the TPC date in the child's record occurred before the child was 27 months of age, or was greater than the Transition Target Date, the report included the reason for delay that was documented in the child's record. Records with delays attributed to exceptional family circumstances were considered to be in compliance. The local programs demonstrated 100% compliance less than one year from issuance of the finding letter.

Verification of correction of both child and site-level noncompliance findings is completed according to OSEP Memorandum 09-02 as well as procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, and Enforcement OSEP QA 23-01.

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

SoonerStart utilized the EdPlan electronic database to identify individual cases of noncompliance for timely TPCs reported in FFY 2021. Individual child records were determined in noncompliance using the Transition Timeline Monitoring Report that pulled the TPC date from the Transition Page in the IFSP from the child's electronic record for comparison with the Transition Target date (calculated as 90 days prior to the child's third birthday) that was also displayed in the report. For identified noncompliance, the Part C Data Manager reviewed the child's electronic record in the EdPlan database to determine if the TPC, although late, had occurred as soon as possible and ensured that staff had documented the reason for missing the timeline in the child's record. Through this process, the Part C Data Manager verified correction of each individual case of previous noncompliance unless the child was no longer enrolled in the SoonerStart program and no outstanding corrective action existed under a state complaint or due process hearing decision for the child.

The records which resulted in six local program findings of non-compliance for timely TPCs issued in FFY 2021 were verified as corrected within 12 months of identification. Oklahoma utilized established program procedures to ensure the consistent and timely correction of all identified noncompliance, as required by 34 C.F.R. §§ 300.600(e) and 303.700(e) and required by OSEP Memorandum 09-02. In verification of correction, SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8C - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

In the FFY 2021 SPP/APR, Oklahoma verified that each local program with noncompliance identified in FFY 2020 for Indicator 8C is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected in the EdPlan database. SoonerStart has also verified correction of each individual case of noncompliance, unless the child was no longer enrolled in the program. Specific actions taken to verify the correction of non-compliance are outlined in the previous sections above. Verification of all noncompliance is consistent with OSEP Memo 09-02. SoonerStart also adhered to procedures outlined in STATE GENERAL SUPERVISION RESPONSIBILITIES UNDER PARTS B AND C OF THE IDEA Monitoring, Technical Assistance, And Enforcement OSEP QA 23-01.

8C - OSEP Response**8C - Required Actions**

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Select yes to use target ranges.

Target Range not used

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

NO

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

N/A

Historical Data

Baseline Year	Baseline Data

FFY	2017	2018	2019	2020	2021
Target>=					
Data					

Targets

FFY	2022	2023	2024	2025
Target>=				

FFY 2022 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

The State reported fewer than ten resolution sessions held in FFY 2022. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

N/A

Historical Data

Baseline Year	Baseline Data

FFY	2017	2018	2019	2020	2021
Target>=					
Data					

Targets

FFY	2022	2023	2024	2025
Target>=				

FFY 2022 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

The State reported fewer than ten mediations held in FFY 2022. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2023). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

11 - Indicator Data

Section A: Data Analysis

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

Oklahoma SoonerStart will increase the percentage of infants and toddlers who demonstrate positive social emotional skills.

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

NO

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

YES

Provide a description of the subset of the population from the indicator.

The data collected and reported for the SiMR each year will represent only children served at the implementation districts. For the first three years (through FFY 2022), only data from the original implementation districts are being reported for the SiMR. Once additional districts begin implementation, their child data will be included in SiMR results. Over time, the SiMR will reflect all children statewide once implementation is fully scaled-up.

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

NO

Please provide a link to the current theory of action.

<https://sde.ok.gov/sites/default/files/Theory-of-Change-Part-C-2022.pdf>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2020	58.06%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	59.00%	61.00%	63.00%	65.00%

FFY 2022 SPP/APR Data

Number of children scoring below cut-off (showing no S-E concerns)	Number of children assessed using ASQ:SE-2	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
97	181	58.10%	59.00%	53.59%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

SoonerStart has explored possible reasons for slippage and has asked local implementation districts to provide information that could explain the slippage indicated in 2023. The program determined the slippage could be attributed to a variety of factors. One possible factor is the type of developmental delays or disabilities experienced by the children that were referred to the program, with new children having more severe delays than children in the past. SoonerStart does not collect diagnostic data on referrals, but one implementation site provided anecdotal information that an increased number of children referred were exhibiting extreme challenging behaviors.

Also, while parents and caregivers may have become more confident and competent due to the early intervention support, the child may have made minimum gains due to their diagnosis and/or disability. In some circumstances, parents did not choose an outcome that addressed their child's challenging behavior (minimizing the ability of the intervention to improve concerning behaviors).

Another possible factor is lower than expected data quality. Specifically, we know that the 6-month or 12-month ASQ-SE-2 was not completed for a significant number of children in a timely manner at the implementation sites. Due to these known delays, no data were collected before these children exited the program, and therefore data are not available to be reported. SoonerStart will continue to explore possible reasons and remedies with local districts.

Provide the data source for the FFY 2022 data.

Ages and Stages Questionnaire – Social Emotional – 2 (ASQ: SE-2)

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

FFY 2022 DATA: Oklahoma is implementing the Pyramid Model (PM) framework to address the State-identified Measurable Result (SiMR). The PM is a multi-tiered service delivery framework that contains a foundation and three increasing levels of support to address challenging behaviors. SoonerStart staff used the PM framework to support families and children in reaching their developmental milestones. In Year Three, the SiMR was measured by assessing all children at the SSIP implementation districts who received at least six months of IFSP services following the implementation of improvement strategies and evidence-based practices. These results were obtained using the appropriate age-range ASQ:SE-2 questionnaire completed at the child's six-month Periodic IFSP Review and the Annual IFSP Review. The answers to the questions on the ASQ:SE-2 were entered into the ASQ Online system and the EdPlan database for each child assessed. The results of the most recent questionnaire administered for each child were used for the SiMR measurement. The percentage of children scoring below the cut-off, indicating no social emotional concerns, were compared to the annual SSIP target.

181 children were administered the ASQ:SE-2 with 97 children scoring below the cut-off, (indicating no concerns in their social emotional development). Data for the FFY 2022 SiMR were collected from District 12 (Oklahoma County) and District 3 (Stillwater) implementation local districts only.

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

NO

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

YES

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

In reviewing SiMR data (ASQ-SE-2 assessments) in Year 3 to determine the impact of early exiting, SoonerStart discovered a data quality issue that impacted the SiMR results. The 6-month or 12-month ASQ-SE-2 was not completed for over 80 children in a timely manner at one of the implementation districts. Therefore, assessment data related to the SiMR could not be collected for these children. The Pyramid Model State Leadership Team (PM SLT) addressed this issue with the implementation district Local Leadership Team (LLT). The ASQ-SE2 data report, accessible in the EdPlan database, was subsequently created as a tool for local supervisors to utilize in monitoring completion of the ASQ-SE-2 assessment in a timely manner. These missing assessments were considered as one possible reason for the slippage in SiMR data for the FFY 2022 reporting year.

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

NO

Section B: Implementation, Analysis and Evaluation

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

<https://sde.ok.gov/sites/default/files/Oklahoma%20FFY%202020%20-%20FFY%202025%20Part%20C%20SSIP%20Evaluation%20Plan%20v.2.1%201.30.23.pdf>

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

NO

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

Below is a summary of activities implemented during Year 3 to support SSIP implementation, described in alignment with each ToC outcome.

ToC Component One:

Outcome 1.1 The SSIP SLT met monthly to develop and review policies and practices to support local PM implementation districts. The SSIP Project Manager facilitated each meeting and provided updates on local challenges. The state PM data coordinator provided data reports to monitor process and practice fidelity, and progress toward the SiMR. The SLT used the PM state leadership BoQ to assess structural sustainability every six months.

Outcome 1.2

EI Providers completed the ASQ:SE-2 for enrolled children as an ongoing assessment every 6 months to inform the IFSP team of new or continued SE concerns. These results assisted the IFSP team in developing family-chosen outcomes and in determining the PM level of support most appropriate for continued services. SoonerStart also developed processes and procedures to support the implementation of the PM framework.

A) The PM local districts used the PM Supports Algorithm as a resource to identify tiered level of support (universal, targeted, or intensive) that is needed to address a child's developmental needs.

B) SoonerStart continued to use the Early Intervention Implementation Checklist (EIIC). The EIIC is a self-evaluation tool used to record EBP usage. EI providers access the EIIC on any electronic device. The checklist is required one time per week following an EI visit. The Early Interventionist Pyramid Practices Fidelity Instrument (EIPPF) will be used by Practitioner coaches to record the use of EBPs observed during coaching sessions.

C) Program coaches are trained PM experts supporting LLTs to implement best practices. The Program coaches assist the LLT to complete the PM BoQ, action planning and goal setting, and provide general guidance. The Program coaches also provide LLT training to onboarding local districts. Practitioner coaches use practice-based coaching (PBC) to guide EI providers to implement PM practices with fidelity. PBC is an evidence-based approach for coaching that is cyclical and involves collaborative partnership; shared goals and action planning; focused observation; reflection and feedback. Practitioner coaches participate in a monthly Community of Practice (CoP) to support their coaching work.

D) The Pyramid Model Consortium (PMC) serves as consultants to support the SLT, Program coaches, and Practitioner coaches. All new EI staff must attend the first training scheduled following their employment. SoonerStart condensed the original 12-hour training to a one-day training (8-hours) offered every six months. On-going trainings are provided by the SoonerStart SSIP/PM Project Manager and Program coaches with technical assistance and support from the PMC. Additional training for Part C Practices was added using online ePyramid modules from PMC. This gives implementation districts two options for initial Part C Practices. In 2023, Family coaching training was provided to all SoonerStart staff.

Outcome 1.3

In Year 3, the SLT renewed the contract with PMC for technical assistance and consultation. To build capacity for practice-based coaching, SoonerStart partnered with the State Personnel Development Grant (SPDG) to fund a full-time position for a Practitioner Coach. This position was hired in 2023 and supports implementation districts with PBC. SoonerStart partnered with SPDG to provide a contract with TORSH to support the coaching process. TORSH developed a program that specifically meets the unique needs associated with EI EBPs PM framework.

Outcome 1.4

SoonerStart used implementation science to support onboarding of new districts. The first stage is exploration. In July of 2022, District 9 began exploring the possibility of becoming an implementation district. The first exploration meeting was held with the leadership team. The meeting gave the team the opportunity to understand expectations, discuss Pyramid Model goals, and ask questions. The second exploration meeting was held for the whole team with the same structure. This meeting supported staff buy-in and understanding. District 9 became a PM implementation district in January 2023. The second stage, installation, began the first month of onboarding and continued as staff were trained in EBPs, data, leadership, and coaching. Initial implementation began shortly after the first EBP training. In December 2023, four more districts signed on for Pyramid Model implementation.

Outcome 1.5

SoonerStart used several data systems to collect, monitor and report implementation data. The ASQ:SE-2 assessment results were recorded and stored in the ASQ online system. Fidelity data were collected and monitored through the EIIC, as self-reported by providers. This data were collected using Microsoft Forms (MS) which also generated reports to monitor data monthly. The EIIC data were utilized by the SLT to support professional development, newsletter topics, and local implementation. LLTs used the EIIC data to monitor EBP usage by staff. The final data system is SoonerStart's online child record system, EdPlan, where the level of support (tier) the child is receiving is reported. A caregiver survey is being developed to collect data associated with caregiver perspective concerning the PM framework. This survey is undergoing stakeholder approval.

Outcome 1.6

The PM EI BoQ outlines the quality indicators of the critical elements associated with implementation program wide. Beginning in Year 3, LLTs met monthly to work toward their action plan goals. To support staff buy-in, EI providers were offered opportunities to participate in decision-making and problem-solving. The PM newsletter built staff capacity by focusing on the use of one EBP each month.

ToC Component Two:

Outcome 2.1

SoonerStart used the PM Supports Algorithm to identify the level of support needed to address the child's social and emotional needs and/or the family's concerns. Districts practiced identifying tiers during staff meetings using different IFSP scenarios.

Outcome 2.2

In 2023, new SoonerStart staff were offered in-person Part C Practices training in January and July. The ePyramid online modules were introduced to provide Part C Practices training as an option for new staff who could not attend the in-person training. District 9 was the newest implementation district and their staff received the in-person training as a team building experience. Practice-based coaching training has been developed into a Community of Practice (CoP) training.

Outcome 2.3

To overcome challenges in 2022, SoonerStart collaborated with SPDG to hire a full-time Practitioner Coach in November 2023. The Practitioner Coach worked with TORSH to develop specific features to meet the needs of Practice-Based Coaching (PBC). A potential local practitioner coach has been identified in District 3.

Outcome 2.4

SoonerStart continues to require EI staff at the PM implementation districts to complete the EIIC one time per week following an early intervention visit with a family to ensure EBP fidelity. The SLT analyzes EIIC data to determine which practices need more support. Support is provided through professional development and newsletter highlights. LLTs review the EIIC data to ensure that all staff are completing one weekly.

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

The first two components of the SSIP ToC are infrastructure improvement strategies. The evaluation plan incorporated short, medium and long-term measures of each major outcome to enable the evaluation team to monitor outcome achievement at several levels over time.

As the implementation of these strategies continued, SoonerStart moved closer to or achieved some mid-term measurements. See the posted evaluation plan for a description of all measures of outcome achievement. Note that the evaluation reporting period is the full prior calendar year.

Outcome 1.1 Establish sustainable high quality SSIP state leadership team (Governance)

The SLT incorporated stakeholder input into all decision-making regarding policies and procedures, funding, and allocation of employee resources for the implementation of the SSIP. The SLT also served as the PM Leadership Team (PMLT). In order to maintain a sustainable, high-quality state leadership team, SoonerStart's SLT utilized the PM SLT BoQ to guide statewide implementation of the PM framework. The BoQ assesses progress and guides future planning so that PM practices are available for providers and families statewide. The Year 2 BoQ completed by the SLT revealed that 82% of the indicators were "emerging" or "in place" (40/49 indicators). The third year SLT BoQ indicated that 85% of the indicators were "emerging" or "in place" (42/49 indicators). This result indicated that the mid-term measurement (55% "in place" or "emerging") was met and exceeded in Year 3.

Outcome 1.2 Revise processes and procedures to align with SSIP infrastructure changes and support PM implementation (governance and quality standards)

In Year 3, SoonerStart expanded on the completion of the short-term measure of aligning assessment procedures with the program's needs by adding a training requirement for service providers (to administer the assessment at each six-month IFSP review and subsequent data entry in the ASQ online system). These procedures are applicable to all EI providers statewide. Operational procedures requiring EI providers to complete the EIIC at the conclusion of one EI family visit per week to self-monitor their implementation of EBPs continued in 2023. The written procedures, including instructions for data collection, have been distributed to PM EI providers. The mid-term measure for this outcome is partially achieved.

Outcome 1.3 Allocate resources to the long-term implementation of the SSIP (finances)

In 2023, SoonerStart allocated funding to support the program as described in the previous section.

Outcome 1.4 Establish procedures to launch and maintain implementation sites (governance)

In year 3, SoonerStart developed procedures using implementation science to onboard new PM districts. The process consisted of a 6-month exploration period. During exploration, leadership and staff from districts were provided a presentation that described goals, expectations and timelines. After exploration, districts had the opportunity to sign on to be an implementation district. During the next stage, installation, districts were provided Part C practices training and the LLT began leadership training. Initial implementation began after training concluded. Full implementation is not achieved until all parts of the PM framework are in place. This takes approximately 3–5 years.

Outcome 1.5 Create or select data collection and storage tools and systems (data and accountability/monitoring)

Last year, SoonerStart changed the practice fidelity monitoring tool from the EIPFFI to the EIIC and built an electronic version using Qualtrics online software. In Year 3, SoonerStart continued to utilize the EIIC to monitor the use of EBPs, however, the program discontinued using Qualtrics and now utilizes MS Forms. The data are stored in MS Forms to allow for ease of access and analysis for reporting data on personnel accountability and family usage. A caregiver data collection tool was developed and is awaiting stakeholder feedback.

Outcome 1.6 Implement all components of the PM Framework in SoonerStart (governance)

In FFY 2023, the LLTs each completed the BoQs two times, six months apart. District 3 BoQ indicated that 97% of indicators were either "partially in place" or "in place". This is an increase from 83% in 2022. District 12's 2023 BoQ indicates that 86% of indicators were either "partially in place" or "in place". This is an increase from 70% in 2022. Both districts have met the mid-term measurement and are making gains towards the long-term measurement.

ToC Component two:

Outcome 2.1 Pyramid Model levels of supports are clearly defined and implemented (governance)

The PM Supports Algorithm is utilized to support staff in identifying PM tiers. In 2023, feedback was provided by staff that clarification was needed to understand how to identify tiers. In-person training was provided at district staff meetings on identifying PM tiers on the IFSP. One strategy used to support identification of tiers was discussing example scenarios.

Outcome 2.2 Train staff in PM practices (professional development)

In Year 3, all necessary PM trainings were completed as described in the previous section. SoonerStart achieved the mid short-term measurement for this outcome.

Outcome 2.3: Adopt PBC to support practitioners' use of PM practices (quality standards, professional development)

In 2023, SoonerStart collaborated with the SPDG to establish the PM framework online coaching platform (TORSH) and to hire a full time Practitioner Coach (hired in the fall of 2023). He will lead the implementation of PBC) in the current and onboarding districts. District 3 has identified a candidate to become its district's practitioner coach. Guidelines and written procedures are being developed to define PBC implementation at the local level.

Outcome 2.4: Implement a system to monitor that evidence-based practices are implemented with fidelity (accountability/monitoring)

This outcome has been achieved. SoonerStart selected the EIIC to record the implementation of EBPs. See the prior description of adopted procedures to systematically monitor fidelity.

Summary: Adoption of the PM framework is a fundamental change to the operations of SoonerStart. It is systems-level change to the program's approach to identifying and addressing SE delays among the children it serves. The infrastructure improvements described in previous sections are essential for the achievement of the SIMR. If the PM framework is not implemented with fidelity and fully integrated into the structure, processes, and procedures of SoonerStart, children's SE development will not improve. Nor will it improve if all personnel are not trained with integrity to the model so that EBPs can be used with fidelity.

Similarly, both are essential for the sustainability of system improvement efforts and scale-up, although the program will not realize these goals for several years. To make those happen, foundational work in leadership development, program change, resource allocation and professional development must begin. More details about the accomplishments of this past year in respect to the stated objectives can be found in prior sections.

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

NO

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

All activities are described from the perspective of the SSIP ToC and its various components that must be accomplished to realize SIMR improvement. ToC Component One

In year 4, SoonerStart will expand implementation of the PM framework. Improvement activities will continue at the initial implementation districts and begin at the new implementation locations.

Outcomes 1.1, 1.3, 1.5, 1.6 The SLT will continue to meet monthly to oversee the SSIP, guide changes to processes and procedures according to the action plan created from the BoQ, devise PM professional development, and support the local implementation districts. The SLT will continue to ensure

funding and resources are allocated for personnel and technical supports to maintain and expand SSIP activities at local SoonerStart districts. Data collection tools have been selected and the SLT will monitor the collection, storage and reporting processes and procedures.

To help sustain and grow the implementation of the PM framework, SoonerStart has trained all staff in Rush/Shelden Family Coaching. All supervisory staff will be trained in the coaching fidelity tool offered through Family Infant Preschool Program. At completion of this course, supervisors will move to CoPs led by Dr. Shelden. Acting as a bridge between PM leadership and field staff, Shelden will offer feedback and guidance on full implementation. By building the capacity of our supervisory staff, they will be competent in training any new providers or contractors moving forward. SoonerStart anticipates achieving most of the mid-term measures and begin making gains on long-term measures in 2024.

Outcome 1.2 The SLT will ensure that operational procedures are written to dictate how to support the SiMR data collection and project implementation. Specific updates include:

- A) SoonerStart will use data to identify districts that need targeted support on how to utilize the algorithm and identify PM Tiers.
- B) SoonerStart EI Providers will continue documenting the child's level of service in the child's electronic record when the completed IFSP data is entered. The level of service may change as a result of subsequent IFSP reviews based on the service delivery decisions of the IFSP team.
- C) Additional procedures may be developed and written to support data collection and project implementation. The operational procedures will be reviewed annually to reflect any needed changes. SoonerStart plans to achieve the long-term measures in 2024.

Outcome 1.4 As SoonerStart begins the scale-up of SSIP activities in 2024, the program will use implementation science to identify and address barriers related to adding new implementation districts. SoonerStart Districts 2, 5, 6, and 8 have agreed to explore being new implementation districts in Year 4. During exploration, districts will have the opportunity to understand the requirements, ask questions, build buy-in and receive feedback from their teams. After the team agrees to be an implementation district, training installation will begin. LLTs are designed in accordance with the PM Early Intervention (Part C) Benchmarks of Quality. Each district is assigned a Program coach by the SLT to support implementation. To maintain implementation districts in the short-term, the process will move between exploration, installation, initial implementation until reaching full implementation. Full implementation with minimal support will be the long-term goal. SoonerStart expects to achieve the mid-term measure in 2024 with the launch of four additional implementation districts.

ToC Component two

Outcome 2.1 In 2024, SoonerStart implementation districts will continue to use the PM Supports Algorithm to identify the level of support needed to address the child's social and emotional needs and/or the family's concerns. Following the development of the IFSP with the child's family, the EI members of the IFSP team determine if the services to be provided reflect universal, targeted or intensive level of support based on the Algorithm. SoonerStart will work toward the mid-term measurement to develop a process to monitor progress of children whose identified needs do not align with the services provided via the IFSP.

Outcome 2.2 In year 4, the SSIP Project Manager and the Practitioner Coach will provide PM Part C Practices training, with technical support from PMC, twice each year for new employees and onboarding districts. By using local staff as trainers for PM practices instead of contracting with the PMC, SoonerStart will advance toward long term sustainability of PM implementation statewide. The ePyramid Modules for Part C Practices will be used to onboard new employees who are unable to attend the in-person training. After completing each module, the participants attend a professional learning community to discuss what they have learned with the SSIP Project Manager and Practitioner Coach. SoonerStart plans to achieve of all mid-term measures by the end of 2024.

Outcome 2.3 In Year 4, the SSIP Project Manager and Practitioner Coach will recruit and train new volunteer practitioner coaches at the current and new implementation districts. Training will be provided within a designated Practitioner Coach CoP. The purpose is to build coaches' capacity and confidence without rushing implementation. One district has volunteered to focus on Practitioner Based Coaching (PBC) to get implementation started. In 2024, District 3 participants in PBC will provide feedback that will support the establishment of local guidelines and written procedures. SoonerStart is working towards meeting the mid-term goals.

Outcome 2.4 In Year 4, EI providers will continue to use the EIIC as a self-assessment to monitor the implementation of EBPs with fidelity. Guidelines for completion requirements as well as data collection were developed and included in written procedures. This data is valuable to the SLT when discussing funding and allocation of resources for scale-up. In 2024, practitioner coaches will begin to consistently use the EIPPF to measure the fidelity of implementation of PM practices by EI providers during family coaching sessions. The purpose of the EIPPF is to identify coaching goals, provide feedback, and show growth in practice implementation. Mid-term measures are partially met, and work will continue to complete achievement of all mid-term measures by the end of 2024.

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

Pyramid Model evidence-based practices were fully implemented in 2023. The PM EBPs are outlined in the Early Interventionist Pyramid Practices Fidelity Instrument (EIPPF) and the Early Intervention Implementation Checklist (EIIC). The PM EBPs are:

- Responsive Relationships
- Building Partnerships with Families
- Supportive Conversations
- Dyadic Relationships Family Coaching
- Family-centered Coaching Teaching Social Emotional Skills
- Social Emotional Development
- Social Emotional Assessment
- Children with Challenging Behaviors

In 2023, SoonerStart engaged in several activities to implement and support the use of EBPs in the program. These are described here as related to the ToC Component 3 and the associated outcomes.

ToC Component three: EI providers develop and utilize their acquired knowledge and skills in providing services to families

Outcome 3.1 EI providers demonstrate knowledge gains in PM EBPs. EI Providers at the PM implementation districts received 8 hours of training on PM practices in 2023. The pre-and post- training surveys asked EI providers the five primary principles for using the Pyramid Model EBPs in Part C. The pre-training survey results were 87.6% and the post-training survey results were 94.9%. These results indicate a slight knowledge gain, however the prior knowledge of EBPs is evident in the high pre-training survey results. SoonerStart met the short-term and mid-term measure for this outcome in Year 3. In 2024, a survey will be created and provided to stakeholders for feedback to be used to meet the long-term measure.

Outcome 3.2 EI providers demonstrate fidelity to implementation of PM EBPs

EI providers at the PM implementation districts continue to use the EIIC self-assessment tool to monitor fidelity to the implementation of PM EBPs. Data

indicate that EI providers have self-reported using EBPs in all eight PM categories. Recognizing that not all EBPs in the checklist are applicable for every family or every visit, SoonerStart continues to review the EBPs that should be universally demonstrated and monitored for fidelity. In year 3, the implementation districts worked to establish routines that support the staff in completion of the EIIC. Both districts 3 and 12 allowed for EIIC completion at the beginning of staffing, increasing the completion rate for the EIIC. The EIIC data is reviewed monthly and used to inform the SLT and to guide topics in the PM newsletter. SoonerStart has partially completed the mid-term measure.

Outcome 3.3 Practitioner coaches demonstrate ability to support and monitor EI providers

Due to challenges associated with identifying practitioner coaches, SoonerStart has partially achieved the short-term measure. More work is needed to identify appropriate practitioner coaches. In 2023, a plan for practitioner coach training was established. A full-time practitioner coach was hired at the state level through partial funding made available through SPDG. This practitioner coach manages coaching cycles and provides training to new coaches. The practitioner coach will work to identify new coaches to onboard in current and new implementation districts. PBC cycles will start in spring 2024 in district 3. A survey will be created and presented to the stakeholders for feedback in 2024. This will help to meet mid-term measurements.

ToC Component four:-- Families' knowledge about SE development will increase to support their child's SE growth

Outcome 4.1 Caregivers demonstrate knowledge of SE development shared through program implementation of PM EBPs and other activities.

In year 3, SoonerStart utilized the parent portal feature of a child's electronic early intervention record to share social and emotional developmental resources from ASQ:SE-2 with families. This information was provided to all families enrolled in Oklahoma's Part C program and was not limited to the PM implementation sites. SoonerStart, with stakeholder input, decided to postpone planning for a virtual training for families related to SE development. Plans are ongoing to partner with the Oklahoma Parent Center to disseminate SE developmental information in Year 4.

ToC Component five: Families will recognize their child's SE strengths and manage challenging behavior successfully.

Outcome 5.1 Caregivers report successful management of children's challenging behavior and identification of strengths.

In Year 3, SoonerStart worked with stakeholders to develop a survey for caregivers of children receiving EI services at the PM implementation districts for their feedback on the efficacy of the PM evidence-based practices provided to their family. The survey received final approval in December 2023 to be disseminated to families in Year 4.

Provide a summary of each evidence-based practice.

Responsive Relationships

Building Partnerships with Families focuses on supporting the family and their unique needs. The EI practitioner schedules visits during convenient and purposeful times that support the family's goals. The caregiver is provided with community resources based on the caregiver's priorities and needs. The EI provider considers the caregiver and child's preferred name. This preferred name is used during greetings and throughout the visit. Materials from the natural environment are used to support interventions. Family characteristics like beliefs, family activities and routines are considered in development of IFSP outcomes. Caregivers are invited to share their thoughts, ideas, perspectives, and preferences on priorities for each visit. EI providers explain EI services and what a visit would look like.

Supportive Conversations incorporates how to support better understanding between the EI provider and caregiver. The first practice is to use a calm, positive, and supportive voice. Limit jargon to provide clarity for the caregiver. Checking for understanding can help to identify any areas that the caregiver might not understand. When families are multilingual, use key words in their language, use translators if needed, and use a variety of strategies to communicate. Ask caregivers how they like to communicate such as text, email, or phone. Use active listening skills to encourage communication.

Dyadic Relationships primary focus is to support caregiver and caregiver's interactions with their child using a strength's-based approach. This is achieved by providing supportive feedback to the caregiver about caregiver-child interactions by focusing the caregiver on the child's initiations, responses, cues, and expressions. Support in this area can be done through collaboration with the caregiver to identify predictable routines and how the EI provider can help with routines. The EI provider can provide opportunities for the caregiver to practice new skills such as communication attempts, predictable routines, and social emotional development. A variety of strategies can be used to support dyadic relationship. These include modeling, specific feedback, and commenting. Caregivers should have choices of strategies to use to support children. Ask caregiver open-ended questions about child's emotional responses, communication attempts, behaviors, and/or cues. EI provider offers information about ignoring or redirection when responding to challenging behaviors.

Family Coaching

Family-centered Coaching is a strength's-based approach that supports caregivers in reaching their child's IFSP outcomes. Caregiver strengths are frequently identified and used as a starting point for development. Information is provided in caregiver's preferred language. The caregivers preferred learning style is considered during EI visits. EI providers use active listening to understand caregiver's ideas. Open-ended questions are used to respond to caregiver comments, questions, or concerns. Opportunities for caregiver to practice are created throughout the visit. Reflective and/or guiding questions are used to help caregivers make connections. Performance-based feedback is used after observing caregiver-child interactions to support growth. EI provider asks permission before using modeling as a strategy. EI providers assist caregivers in identifying opportunities to practice new skills throughout the day during routines and activities that occur between visits.

Teaching Social Emotional Skills

Social Emotional Development encompasses how caregivers can support their child's development of social emotional skills. EI provider observes and asks caregiver questions to identify their child's social and emotional abilities. The caregiver's knowledge and perspectives around social emotional development are considered. When caregivers choose to address social and emotional development, EI providers collaborate with the caregiver to write specific, measurable outcomes using family-friendly language. When strategies are used to address social and emotional development, EI providers observe and ask about caregiver's confidence and competence in implementing the strategies. Specific feedback is used to support positive caregiver behaviors that support positive social and emotional outcomes for their child. EI providers support caregivers in scaffolding or expanding on their child's expressions, interactions, play, communication, and autonomy. Social and emotional assessments are shared with caregivers.

Social Emotional Assessment are used to identify areas of need. The EI provider can describe the purpose of the screening tools. The caregiver has the opportunity to ask questions about the entire process. The caregiver's preferences for the assessment are taken into consideration. In collaboration with the EI provider, the assessment, and the family's preferences, priorities, and needs are used to develop IFSP outcomes.

Children with Challenging Behaviors supports caregivers in describing, identifying, and defining the challenging behavior(s). EI providers inquiry about routines, activities, environments, or with what people the behavior is most likely to occur. Behavior support specialist can help to support the caregiver and child. In some cases, a functional behavior assessment (FBA) can be used to identify the function of the challenging behavior. When a behavior support plan is needed, the EI provider will ask questions to identify family priorities and preferences. The behavior support plan or IFSP outcome includes routines and strategies that are meaningful to the family. Strategies are developmentally appropriate and easy for caregiver and child to

implement. Caregivers are provided the opportunity to practice new skills and strategies with specific and positive feedback from the EI provider that supports caregiver confidence and competence. EI providers use reflective discussion to support caregiver use of new strategies. Easy mechanisms to document challenging behavior and new skills are identified through collaboration between EI provider and caregiver. Ask questions to check for caregiver understanding of data or progress. Make changes as needed.

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

SoonerStart is implementing the Pyramid Model framework as the SSIP. The PM provides a tiered framework for implementing supports and interventions that help families promote their infant's or toddler's healthy social, emotional, and behavioral development. Implementing this framework with fidelity will impact the SiMR by changing SoonerStart policies, procedures and practices at the program and provider levels, while also improving parent/caregiver outcomes by increasing their capacity to meeting the SE needs of their children. As a result of these improvements, children's outcomes will be enhanced.

At the universal tier (level of support), practices are intended to promote the development of all infants and toddlers. Early interventionists implement practices as a first response with all infants and toddlers and fluidly provide targeted prevention and/or intensive interventions as needed.

At the targeted tier (level of support), targeted prevention practices support infants and toddlers who are identified at risk for social emotional delays or challenging behavior. SoonerStart uses a linked system of screening and assessment to identify children at risk. The Ages and Stages Questionnaire, Social-Emotional, 2nd edition (Squires, Bricker, & Twombly, 2015; ASQ:SE-2) is administered for all children at entry and every six months, and the Social-Emotional Assessment/Evaluation Measure (Squires, Bricker, Waddell, Funk, Clifford, & Hoselton, 2014; SEAM) can be used for children who score at-risk on the ASQ:SE-2 and/or caregiver expressed concern. The SEAM can be used to identify concerns about social emotional development, develop IFSP outcomes, and monitor and evaluate progress.

At the intensive tier (level of support), intensive interventions support children with persistent, challenging behaviors. Prevent, Teach-Reinforce for Families (Dunlap, Strain, Lee, Joseph, Vatland, & Fox, 2017; PTR-F) practices can be used to guide assessment, intervention, and monitoring of progress. PTR-F is an evidence-based practice situated in applied behavior analysis and positive behavior supports.

Sustainability of the PM improvement strategies depends on implementation of PM practices with fidelity. The online coaching platform, TORSH, has been purchased and developed through SPDG funding to meet the unique needs of SoonerStart staff. The full-time Practitioner Coach will provide training on TORSH for the new local practitioner coaches. TORSH, that will be utilized for virtual coaching. With this platform, EI providers will upload videos of visits with families into the secure coaching platform to be reviewed by their designated Practitioner Coach. The Practitioner Coach provides feedback on observed (or unobserved) evidence-based practices completed by the EI Provider with the family and/or child. Practice-based coaching supports the use of EBP. Short-term measures were initially achieved in Year 2 but due to multiple staff resignations or staff choosing to no longer serve, a new cohort of practitioner coaches will be trained in 2024. SoonerStart will work toward meeting mid-term measures by the end of Year 4.

The EBPs highlighted by the PM framework align with the Division of Early Childhood (DEC) Recommended Practices (2014) and the Principles of Early Intervention (Workgroup on Principles and Practices in Natural Environments, 2008). Independent research supports PM practices (e.g., Hemmeter, Snyder, Fox, & Algina, 2016; Hemmeter et al., 2021). Each tier of the PM is informed by science and comprises evidence-based practices that promote and support social emotional development of young children (Hunter & Hemmeter, 2009). For example, at the universal tier evidence-based practices focus on supporting responsive, nurturing relationships between caregivers and their young children in supportive environments (Shonkoff & Phillips, 2000). At the targeted tier, practices target teaching self-regulation skills that begin developing during infancy and are thought to be crucial for a child's evolving independence and social functioning (Hunter & Hemmeter, 2009; Shonkoff & Phillips, 2000). The skills are taught and reinforced during meaningful, predictable everyday routines. At the intensive tier, individualized, intensive interventions are designed and implemented to reduce persistent, challenging behaviors and teach new skills. PTR-F is the recommended evidenced-based practice for children in high need of interventions, as it is situated in applied behavior analysis and positive behavior supports. It has been identified through a literature review to be an appropriate intervention for children younger than 3 years (Conroy, Dunlap, Clarke, & Alter, 2005).

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

In 2023, EI providers completed the EIC one time per week as a self-assessment of the evidence-based practices they demonstrated during an intervention visit with one family. The data is collected electronically, and reports are generated monthly to direct local leadership teams, newsletter development, and future professional development needs. In Year 3, The SLT reviewed the data to monitor fidelity of implementation to completing the EIC weekly at the PM implementation sites. The data retrieved from the online system indicated there were 1417 EICs recorded, resulting in a 62.69% rate of fidelity to implementation of completion. These results indicate a significant decrease in the EIC completion rate from Year 2 (76.10%) to Year 3. Based on the marked decrease in completion rates, local Pyramid Model leadership teams will add EIC review to their monthly agendas. The Pyramid Model Project Manager and Data Manager will ensure the teams are getting timely data to review prior to this monthly meeting. The decrease is puzzling to Pyramid Model state leadership team. Data analysis is on-going.

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

IFSP teams utilize the ASQ-SE-2 completed at intake and at the 6-month and 12-month IFSP reviews to inform IFSP outcomes and services to address social and emotional needs. For the SiMR, SoonerStart reported that 53.59% of children at the PM implementation districts (after at least six months of IFSP services) scored Below Cut-off indicating no social-emotional concerns. These data indicated a decrease in children scoring below cut-off on the ASQ: SE-2 from the previous year. The data were disaggregated by the two implementation districts for analysis. The percentage of children scoring below cut-off in District 12 decreased from 58.97% in 2022 to 51.44% in 2023. There are several variables that could be associated with this decrease. These include an increase in referrals experiencing challenging behavior; IFSP outcomes chosen by the family, or lack of completed ASQ:SE-2s at the 6-month and annual IFSP review. The PM SLT is working with District 12 to determine how to best support the EI providers in working with children to address social-emotional concerns and increase Below-Cut-off scores.

In District 3, however, the percentage of children scoring below cut-off increased from 55.50% in 2022 to 60.46% in 2023. SoonerStart believes the analysis of these data supports the decision to continue the ongoing use of all evidence-based practices as designed in the PM framework.

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

SoonerStart will continue implementation of the third component of the ToC (EI providers develop and utilize their acquired knowledge and skills in providing services to families). The anticipated outcomes include:

Outcome 3.1 EI providers demonstrate knowledge gains in PM EBPs

New staff at implementation sites will be trained in PM practices by SoonerStart personnel (the SSIP Project Manager and Practitioner Coach). SoonerStart will use pre and post training surveys to assess knowledge gains. A follow-up survey will be conducted for personnel who were trained in PM practice in 2023 to assess long-term knowledge gains. These results will be reported and used to measure outcome achievement.

Outcome 3.2 EI providers demonstrate fidelity to implementation of PM EBPs

Service providers are monitored to ensure they are demonstrating fidelity to PM implementation and the use of EBPs. SoonerStart will use the EIC to monitor fidelity to implementation processes, procedures and practices. Data obtained from the EIC will be used to inform SLT, professional development, and the highlighted EBP in the PM newsletter .

Outcome 3.3 Practitioner coaches demonstrate ability to support and monitor EI providers

Practitioner Coaches will demonstrate their ability to support early intervention staff in their provision of services to families. SoonerStart has committed to expanded training time for the new cohort of Practitioner Coaches to build capacity and confidence. Practitioner Coaches will begin coaching cycles with EI providers to support and monitor evidence-based practices when training is completed. Data will be recorded on the EIPPF by the Practitioner Coach and used by the coachee to set goals and inform practice change. The state Practitioner Coach will provide support to local Practitioner Coaches and monitor the coaching process.

SoonerStart partially met the mid-term measures associated with the major outcomes identified for this third component of the ToC in Year 3. Work will continue toward achieving all mid-term measures by the end of Year 4.

SoonerStart added ToC Components 4 and 5 along with the associated short, medium, and long-term outcome measurements to the evaluation plan for FFY 2021.

ToC Component four: Families' knowledge about SE development will increase to support their child's SE growth

Outcome 4.1 Caregivers demonstrate knowledge of SE development shared through program implementation of PM EBPs and other activities.
In year 3, SoonerStart utilized the parent portal feature of a child's electronic early intervention record to share social and emotional developmental resources from ASQ:SE-2 with families. This information is provided to all families enrolled in Oklahoma's Part C program and will not be limited to the PM implementation sites. SoonerStart will partner with the Oklahoma Parent Center to develop a podcast for families related to SE development in young children.

ToC Component five: Families will recognize their child's SE strengths and manage challenging behavior successfully.

Outcome 5.1 Caregivers report successful management of children's challenging behavior and identification of strengths.
In Year 4, SoonerStart will survey caregivers of children receiving EI services at the PM implementation districts for their feedback on the efficacy of the PM EBPs provided to their family. This will collect data on their use of the EBPs and the benefits they realize as a result of using the EBPs. The survey has been developed by the SSIP Project Manager with input from the SLT and stakeholders. The survey will be distributed to families annually.

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

YES

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

Data reflect that progress is being made toward building infrastructure supports at local implementation districts and prospective scale-up sites. SoonerStart has met its mid-term measures for all outcomes in ToC components one and two except Outcome 2.3. Mid-term measures for the ToC component three outcomes (supporting the implementation of evidence-based practices) have been met for all components except 3.3. SoonerStart has met the short-term measure of ToC component 4.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Stakeholder feedback and support for the SSIP informs and drives all aspects of the work moving forward. SoonerStart has engaged with stakeholders throughout the SSIP development process to ensure high quality planning, implementation, and evaluation of SSIP efforts. The ICC serves as the primary stakeholder group providing ongoing guidance and input into SSIP development. Information and updates are provided regularly at each ICC meeting regarding progress towards the SiMR. Local teams have engaged with staff and families to gather feedback for use in planning, implementation, and evaluation. SoonerStart worked with the Oklahoma Parent Center to increase outreach to parents, as well as the Oklahoma Family Network (an advocacy organization for families of children with developmental disabilities). Feedback is broadly solicited from early intervention staff through a monthly newsletter. Stakeholder engagement has been a key factor in the success of preparing for and implementing the Pyramid Model.

Stakeholders representing multiple state and community programs, state agencies, early intervention service providers and parents of children currently or formerly enrolled in the SoonerStart program participated in the development and implementation of the SSIP. These include the following entities or roles, with counts of representatives in ().

Sooner Success – OU Health Sciences Center (2)
Oklahoma AbleTech (Assistive Technology Center) - Oklahoma State University (1)
Infant Mental Health - Oklahoma Department of Mental Health and Substance Abuse (1)
Special Education Services – Oklahoma State Department of Education (2)
SoonerStart Early Intervention Service Providers (75)
SoonerStart Early Intervention Service Coordinators (45)
SoonerStart State Leadership Team (8)
Parents of Children with Developmental Disabilities – SoonerStart (43)
Oklahoma State Regents for Higher Education (1)
Oklahoma Parent Center (2)
Oklahoma Commission on Children and Youth (1)
Oklahoma Partnership for School Readiness (1)
Oklahoma Deaf/Blind Project (1)
Oklahoma Head Start Collaboration Agency (1)
Community Head Start Providers (4)
Early Childhood Education - Oklahoma State Department of Education (2)
Oklahoma State Department of Health (3)
Oklahoma Part C Interagency Coordinating Council (ICC) Oklahoma Family Network (2)
Oklahoma Health Care Authority (1)
Oklahoma Department of Human Services (2)
Sunbeam Family Services (1)
Community Development Support Association (1)
Oklahoma School for the Deaf (1)
Oklahoma Public School Teachers (3)
Community Preschools/Child Care Programs (5)

The Oklahoma Pyramid Model State Leadership Team is chaired by a SoonerStart representative. A SoonerStart representative also serves as a member of the Oklahoma MTSS State Leadership Team.

It is important to Oklahoma that stakeholders are not just informed about the SSIP, but they have a voice in continuous efforts to achieve outcomes related to the identified strategies. Through regularly scheduled meetings, surveys, website announcements, and email notifications, Oklahoma seeks input into decisions related to the SSIP strategies.

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

Oklahoma understands that stakeholder involvement leads to a better process, greater community support and buy-in, more creativity, a better understanding of the systems and challenges and, ultimately, a more effective effort to improve outcomes for infants and toddlers. SoonerStart has continued to engage stakeholders in SSIP improvement efforts through quarterly Stakeholder advisory meetings and quarterly ICC meetings designed to provide updates on Pyramid Model implementation activities and seek input on proposed next steps. Stakeholders also receive the Pyramid Model newsletter monthly which describes evidence-based practices promoted at the local Pyramid Model implementation sites.

SoonerStart hosted four Stakeholder Advisory meetings to engage stakeholders in key improvement efforts during 2023. These meetings were held on:
February 17, 2023
May 5, 2023
September 26, 2023
December 13, 2023

Additionally, SoonerStart engaged ICC stakeholders at their regularly scheduled meetings on:
February 7, 2023
June 6, 2023
September 8, 2023
December 7, 2023

Stakeholder meeting agendas are shared in advance via an email invitation that includes the link to the SSIP information pages posted on the SoonerStart website. A brief overview of the SSIP process and Pyramid Model framework is provided at each meeting and stakeholder input continues to be solicited during meetings in multiple ways. SoonerStart frequently uses the Ideaz Board website tool which provides a virtual "sticky note" that allows participants to share their thoughts, ideas, and questions anonymously during virtual meetings. Polls are added to meeting presentations when necessary for voting on improvement strategies and evaluation methods. Stakeholders who are unable to attend a real-time virtual meeting, have the option to view the recorded discussion and email their questions or suggestions.

To increase the capacity of stakeholders to actively participate in meeting discussions and provide input, SoonerStart has included all stakeholders on the mailing list for the Pyramid Model monthly newsletter.

Based on the results of a stakeholder survey in Year 2, SoonerStart has worked to improve stakeholder satisfaction and build presentations that reflect their stated priorities. In Year 3, SoonerStart focused on explaining the PM levels or tiers of support (universal, targeted or intensive intervention) that guide the PM evidence-based practices provided to families (listed as a priority interest by 54% of stakeholders). Additional information was shared on the data results from the ASQ-SE2 assessment and the EIIC fidelity measurement (listed as a priority interest by 46% of stakeholders).

SoonerStart strives to create an open environment for stakeholders to share their thoughts on program improvement with each other and program administration throughout the stakeholder input process. In response to positive feedback from stakeholders who stated satisfaction with the meeting process and participation, SoonerStart has continued in Year 3 to ensure that there is ample opportunity for stakeholders to ask questions and share ideas during meetings. SoonerStart is committed to ensure that the information presented is understandable and that stakeholder capacity to fully engage in the systems change project (SSIP) is supported.

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

NO

Additional Implementation Activities

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

None

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

N/A

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

As mentioned in previous sections, SoonerStart continues to experience multiple challenges in launching practice-based coaching. In Year 2, after practitioner coaches completed training provided by the PMC, SoonerStart learned that the volunteers were not the appropriate EI staff to serve as practitioner coaches because they also served in a supervisory role. In mid-2022, new coaches were selected and trained. A Coaching CoP met monthly to support the coaches to provide effective practice-based coaching. In December 2022, the program experienced a major set-back in the implementation of PBC when all but one trained practitioner coach resigned from SoonerStart or decided against continuing in that role. In 2023, a full-time state Practitioner Coach was hired to lead implementation of PBC. While this was accomplished during the 2023 SSIP year, it occurred later than anticipated. The position was expanded from part time to full time to also provide technical assistance to non-implementation local districts and build the capacity of the state team. The Practitioner Coach is charged with building buy-in for coaching, supporting districts in identifying appropriate coaches, training the new practitioner coaches, and providing ongoing support to practitioner coaches.

In Year 4, District 3 has volunteered to start PBC and provide feedback to develop local coaching procedures and practices. District 3 has identified a potential practitioner coach that will start exploration in spring 2024. The SSIP Program Manager and Practitioner Coach will work with Districts 9 and 12 to identify a potential practitioner coach to begin exploration. The onboarding of new practitioner coaches will begin fall 2024.

District 9 was added as a PM district in 2023 and has completed exploration and is in implementation. District 9 has struggled with staffing problems and interagency issues. The local health department supervisor in District 9 made the decision to postpone PM LLT meetings, against the recommendation of the SLT. The state leadership team continued, during this time, to send out technical assistance and communication to help alleviate any backslide of knowledge and skills of the Pyramid Model. Monthly leadership meetings are scheduled to resume in January 2024. State leadership renewed the commitment of providing the support, structure and feedback necessary to get District 9 back on track and schedule. The LLT assured the state team that they are still committed to the Pyramid Model and will resume meetings with the entirety of the LLT.

Provide additional information about this indicator (optional).

In addition to informing the SiMR, the ASQ:SE-2 data also provides an early opportunity in the Part C process to support families with concerns about their child's social emotional development. As a part of Oklahoma's commitment for continuous improvement, the ASQ:SE-2 was added as a component of the intake for children referred to the program after January 1, 2022. If the results suggest a social emotional developmental concern, but the child is determined not eligible for Part C services, the Resource Coordinator has information to provide appropriate referrals and other resource options to the family. If the child is determined eligible for Part C services, any social emotional concerns identified by the family at the intake can be discussed by the IFSP team when developing outcomes for the initial IFSP. The ASQ:SE-2 results will also assist the IFSP team in determining if a higher level of support (targeted or intensive in the Pyramid Model approach) is indicated for the early intervention services planned in the initial IFSP.

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role

Designated Lead Agency Director

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

Name:

Lou Anne Mullens

Title:

Part C Assistant Program Director

Email:

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Phone:

405-517-5407

Submitted on:

02/01/24 12:44:34 AM

Determination Enclosures

RDA Matrix

2024 Part C Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results			
Compliance			

2024 Part C Results Matrix

I. Data Quality

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

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

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

Data Anomalies Score (please see Appendix B for a detailed description of this calculation)	
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II. Child Performance

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

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

Performance Change Score (please see Appendix D for a detailed description of this calculation)	
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Summary Statement Performance	Outcome A: Positive Social Relationships SS1 (%)	Outcome A: Positive Social Relationships SS2 (%)	Outcome B: Knowledge and Skills SS1 (%)	Outcome B: Knowledge and Skills SS2 (%)	Outcome C: Actions to Meet Needs SS1 (%)	Outcome C: Actions to Meet Needs SS2 (%)
FFY 2022						
FFY 2021						

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2024: Part B."

2024 Part C Compliance Matrix

Part C Compliance Indicator (2)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2021 (3)	Score
Indicator 1: Timely service provision			
Indicator 7: 45-day timeline			
Indicator 8A: Timely transition plan			
Indicator 8B: Transition notification			
Indicator 8C: Timely transition conference			
Timely and Accurate State-Reported Data			
Timely State Complaint Decisions			
Timely Due Process Hearing Decisions			
Longstanding Noncompliance			
Specific Conditions			
Uncorrected identified noncompliance			

(2) The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf

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

Appendix A

I. (a) Data Completeness:

The Percent of Children Included in your State's 2022 Outcomes Data (Indicator C3)

Data completeness was calculated using the total number of Part C children who were included in your State's FFY 2022 Outcomes Data (C3) and the total number of children your State reported in its FFY 2022 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State's Indicator C3 data by the number of children your State reported exited during FFY 2022 in the State's FFY 2022 IDEA Section 618 Exit Data.

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

Appendix B

I. (b) Data Quality:

Anomalies in Your State's FFY 2022 Outcomes Data

This score represents a summary of the data anomalies in the FFY 2022 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2018 – FFY 2021 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e (numbers are shown as rounded for display purposes, and values are based on data for States with summary statement denominator greater than 199 exiters). In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2022 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State's data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

Outcome A	Positive Social Relationships
Outcome B	Knowledge and Skills
Outcome C	Actions to Meet Needs

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

Expected Range of Responses for Each Outcome and Category, FFY 2022

Outcome\Category	Mean	StDev	-1SD	+1SD
Outcome A\Category a				
Outcome B\Category a				
Outcome C\Category a				

Outcome\Category	Mean	StDev	-2SD	+2SD
Outcome A\ Category b				
Outcome A\ Category c				
Outcome A\ Category d				
Outcome A\ Category e				
Outcome B\ Category b				
Outcome B\ Category c				
Outcome B\ Category d				
Outcome B\ Category e				
Outcome C\ Category b				
Outcome C\ Category c				
Outcome C\ Category d				
Outcome C\ Category e				

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

Anomalies in Your State's Outcomes Data FFY 2022

Number of Infants and Toddlers with IFSP's Assessed in your State	
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Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance					
Performance (%)					
Scores					

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance					
Performance (%)					
Scores					

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance					
Performance (%)					
Scores					

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

Data Anomalies Score	
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Appendix C

II. (a) Data Comparison:

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

This score represents how your State's FFY 2022 Outcomes data compares to other States' FFY 2022 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement (values are based on data for States with a summary statement denominator greater than 199 exiters). Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

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

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

Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2022

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10						
90						

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

Your State's Summary Statement Performance FFY 2022

Summary Statement (SS)	Outcome A: Positive Social Relationships SS1	Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)						
Points						

Total Points Across SS1 and SS2(*)	
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Your State's Data Comparison Score	
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Appendix D

II. (b) Performance Change Over Time:

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

The Summary Statement percentages in each Outcomes Area from the previous year's reporting (FFY 2021) is compared to the current year (FFY 2022) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of $p \leq .05$. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of '0', '1', or '2' for each State is based on the total points awarded. Where OSEP has approved a State's reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of 'N/A' for this element.

Test of Proportional Difference Calculation Overview

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

Step 1: Compute the difference between the FFY 2022 and FFY 2021 summary statements.

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

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

$$\text{Sqrt}[(\text{FFY}2022\% * (1-\text{FFY}2022\%)) / \text{FFY}2022N) + ((\text{FFY}2023\% * (1-\text{FFY}2023\%)) / \text{FFY}2023N)] = \text{Standard Error of Difference in Proportions}$$

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

$$\text{Difference in proportions} / \text{standard error of the difference in proportions} = z \text{ score}$$

Step 4: The statistical significance of the z score is located within a table and the p value is determined.

Step 5: The difference in proportions is coded as statistically significant if the p value is it is less than or equal to .05.

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

- 0 = statistically significant decrease from FFY 2021 to FFY 2022
- 1 = No statistically significant change
- 2= statistically significant increase from FFY 2021 to FFY 2022

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

Indicator 3 Overall Performance Change Score	Cut Points for Change Over Time in Summary Statements Total Score
0	Lowest score through 3
1	4 through 7
2	8 through highest

Summary Statement/ Child Outcome	FFY 2021 N	FFY 2021 Summary Statement (%)	FFY 2022 N	FFY 2022 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase
SS1/Outcome A: Positive Social Relationships										
SS1/Outcome B: Knowledge and Skills										
SS1/Outcome C: Actions to meet needs										
SS2/Outcome A: Positive Social Relationships										
SS2/Outcome B: Knowledge and Skills										
SS2/Outcome C: Actions to meet needs										

Total Points Across SS1 and SS2	
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Your State's Performance Change Score	
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Data Rubric

FFY 2022 APR (1)

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

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

APR Score Calculation

Subtotal	
Timely Submission Points - If the FFY 2022 APR was submitted on-time, place the number 5 in the cell on the right.	
Grand Total - (Sum of Subtotal and Timely Submission Points) =	

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

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/Settings Due Date: 8/30/23				
Exiting Due Date: 2/21/24				
Dispute Resolution Due Date: 11/15/23				

618 Score Calculation

Subtotal	
Grand Total (Subtotal X 2) =	

Indicator Calculation

A. APR Grand Total	
B. 618 Grand Total	
C. APR Grand Total (A) + 618 Grand Total (B) =	
Total N/A Points in APR Data Table Subtracted from Denominator	
Total N/A Points in 618 Data Table Subtracted from Denominator	
Denominator	
D. Subtotal (C divided by Denominator) (3) =	
E. Indicator Score (Subtotal D x 100) =	

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

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 Submission

SPP/APR Data

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

Part C 618 Data

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

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

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

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

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

<https://sites.ed.gov/idea/how-the-department-made-determinations/>