STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2021

US Virgin Islands

PART C DUE
February 1, 2023

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The Virgin Islands Infants and Toddlers Program (VI-ITP), Part C of IDEA, is an early intervention program that serves infants and toddlers with established conditions and developmental delays, birth to three. The ITP serves the districts of St. Thomas/St. John and Water Island, and the district of St. Croix. The ITP offers case management services to assist and enable an infant or toddler with a disability and their family to receive their services and know their rights, coordinates evaluations and assessments, facilitates the development, review, and evaluation of IFSPs, and serve as the single point of contact in assisting parents of infants and toddlers in obtaining access to needed early intervention services. The early intervention services offered by the VI-ITP are free of charge to the family. Technical assistance is provided to the VI-ITP by a team of professionals representing the IDEA Data Center (IDC), the Early Childhood Technical Assistance Center (ECTA Center), the DaSy Center, the Center for IDEA Fiscal Reporting (CIFR) and the National Center for Systemic Improvement (NCSI) who are experienced in IDEA requirements and compliance mandates.

Additional information related to data collection and reporting

General Supervision System

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

The Virgin Islands Infants and Toddlers Program (ITP) consists of two districts: St Thomas/St John and St Croix. VI ITP has policies and procedures in place to ensure that IDEA requirements are met, and the processes which enable the program to identify and correct non-compliance are implemented. The VI ITP has experienced staff shortages specifically in the St. Croix district since 2018. As a result the ITP has had to rely on the two more experienced EI providers to serve as Interim Service Coordinators (ISC). Communication between the Director and the ISCs occurred on a weekly basis to answer any questions they had and assist where needed. Despite the shortage, no child in the VI ITP has not received services as indicated on their IFSP. The VI Infants and Toddlers Program Director notifies the early intervention personnel of any non-compliance areas and meets with all personnel to convey the areas of noncompliance and improvement and any corrections needed. In cases where there was non compliance, the VI ITP ensured that it was corrected on the child specific level as well as the state level as required by the OSEP 09-02 Memo.

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 ITP received technical assistance from the Early Childhood Technical Assistance Center (ECTA Center) and the DaSy State Liason, and the Center for IDEA Fiscal Reporting. There is a standing bi-weekly TA meeting with DaSy/SRI/ECTA. The TA's in these centers are experienced in IDEA requirements and compliance and continues to assist the VI ITP.
As a result of COVID-19, some initiatives for provider training have been put on hold. There is still concerns by some providers. There was input from the TA Centers in developing this APR/SSIP. The TA Centers assisted the ITP in improving the database used to provide the information for all federal reports submitted including this APR. This database continues to be a valuable tool in providing reliable data. Comments from families of children enrolled in the ITP were collected through family survey responses.

Professional Development System:

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

The ITP staff is committed, experienced, and dedicated to improving infants' and toddlers' lives in the Virgin Islands. Monthly provider meetings are conducted virtually to allow providers to seek assistance regarding any challenging issues and provide the staff an opportunity to share strategies and experiences. The VI ITP has asked the EI staff to consider the possibility of having in-person monthly meetings. Other professional development opportunities include webinars from the ECTA centers and a weekly newsletter from himama based in Canada. These newsletters have provided valuable strategies as we continue to experience the impact of COVID-19. Early intervention providers have received information from the Hunt Institute, STEMIE, Learn the Signs Act Early for professional development opportunities. Both St. Thomas and St. Croix districts have part-time staff who work for both Preschool Special Education and the Infants and Toddlers Program. They will benefit from professional development training from both the DOE and the Infants and Toddlers Program once there is less health threat due to COVID-19. There remain continued challenges regarding recruiting and retaining early intervention providers as well as pediatric OT, PT, and S/LP.

Broad Stakeholder Input:

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

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

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

YES

Number of Parent Members:

4

Parent Members Engagement:

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

Parent members participated in the VI-ICC meetings where there were discussions about setting new targets. During the last three years many organizations have not been able to meet or continue to function as a result of the lockdowns, social distancing requirements and just the overall "Covid-19 fatigue". The Project Launch Program has recently decided to restart hosting Parent Cafes which the VI ITP will participate in.

Activities to Improve Outcomes for Children with Disabilities:

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

The VI ICC Facebook page is updated with information that would benefit families with infants & toddlers with disabilities and their families. Some modules from the DaSy website was shared with providers in each district that will assist them with completing their assessments and assisting them with working with the children they are assigned. In February 2022, the Service Coordinator from the St. Thomas/St. John district, seven EI providers between both districts and 4 parents between both districts participated in a three week asynchronous training held by the Play Project. Some EI providers participated in the ACT EARLY VI Professional Development Series held by the University of the Virgin Islands School of Education.

Soliciting Public Input:

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

Public input is solicited during the public notice of the grant application. The grant applications are located in the office on each island and are posted on the Department of Health's (DOH) website. The notice of where you can review the grant application is also posted on the VI ICC Facebook page.

Making Results Available to the Public:

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

The VI ITP has not began the process of reviewing and setting new targets. Once this process begins notice will be made available on the DOH website as well as the VI ICC Facebook page.

Reporting to the Public:

How and where the State reported to the public on the FFY 2020 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 2020 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

The SPP/APR data and targets was shared in the weekly DOH Director's Team meeting where the VI ITP was asked to present. The website for the SPP/APR: https://doh.vi.gov/programs/infant-and-toddlers-program

Intro - Prior FFY Required Actions

Virgin Island Department of Health's (VIDH) IDEA Part C FFY 2021 and FFY 2022 grants were subject to both OSEP Specific Conditions as well as Department-wide Specific Conditions.

VI has not publicly reported on the FFY 2019 (July 1, 2019-June 30, 2020), FFY 2018 (July 1, 2018-June 30, 2019), FFY 2017 (July 1, 2017-June 30, 2018), and FFY 2016 (July 1, 2016 - June 30, 2017) performance of each EIS program or provider located in the VI on the targets in VI's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of IDEA. With its FFY 2021 SPP/APR, VI must provide a Web link demonstrating that VI reported to the public on the performance of each early intervention service program or provider located in the VI on the targets in the SPP/APR for FFY 2019, FFY 2018, FFY 2017 and FFY 2016. In addition, VI must report with its FFY 2021 SPP/APR, how and where VI reported to the public on the FFY 2020 performance of each early intervention service program or provider located in the VI on the targets in the SPP/APR.

VI's IDEA Part C determination for both 2021 and 2022 is Needs Assistance. In VI's 2022 determination letter, the Department advised VI of available sources of technical assistance, including OSEP-funded technical assistance centers, and required VI to work with appropriate entities. The Department directed VI to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.

VI must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which VI received assistance; and (2) the actions VI took as a result of that technical assistance.

Response to actions required in FFY 2020 SPP/APR

The VI ITP has received technical assistance from DaSy, ECTA and CiFR. Meetings with DaSy and ECTA were initially scheduled monthly until early 2022 when the meetings were increased to twice a month. The ITP Director attends the monthly CiFR meetings virtually and when necessary contacts the TA representative by email. Attending the 2022 IDIO Conference was beneficial in that there were many processes and procedures from other States that could be implemented in the VI ITP with stakeholder input from the VI ICC.
Stakeholder input, Fiscal, Data/Monitoring
DaSy has presented in the VI ICC meetings to educate the members about IDEA, Part C and how the VI ITP carries out the mandates. The members were also educated on what their roles were in advising and assisting the VI ITP.
With the assistance of DaSy and ECTA the VI ITP was able to get major improvements made to the existing Excel spreadsheet that was initially developed by the VI ITP. There were several meetings held with ITP staff in both districts to make sure that the embedded formulas were producing accurate data to be used for OSEP reporting.
Discussions with DaSy and ECTA continue on Medicaid and the possibility of incorporating a payment system in the VI ITP. There has been stakeholder engagement in VI ICC meetings and there will be continued discussions to get stakeholder input.

Intro - OSEP Response

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

The Virgin Islands' (VI's) determinations for both 2021 and 2022 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 22, 2022 determination letter informed VI that it must report with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which VI received assistance; and (2) the actions VI took as a result of that technical assistance. VI provided the required information.

OSEP's Required Actions to the State's FFY 2020 SPP/APR required the Virgin Islands to provide a Web link demonstrating that VI reported to the public on the performance of each early intervention service program or provider located in the VI on the targets in the SPP/APR for FFY 2019, FFY 2018, FFY 2017 and FFY 2016. VI provided the weblink for FFY 2018 and FFY 2019. The VI reported that early intervention records from FFY 2016 and FFY 2017 were destroyed as a result of flooding in the St. Thomas and St. Croix offices due to the catastrophic hurricanes.

The VI did not, as required, report mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.

The VI did not, as required, report on the mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.

OSEP has imposed Specific Conditions on VIDH's IDEA Part C grant award from each year from FFY 2001 through FFY 2022 related to timely payment to ensure the timely provision of services in 34 CFR 303.342(e). The Department imposed Specific Conditions on the IDEA Part C grant award as well. Both of those Specific Conditions are in effect at the time of the Department’s 2023 determination.

Intro - Required Actions

The VI must report with its FFY 2022 SPP/APR, how and where the VI reported to the public on the FFY 2021 performance of each early intervention service program or provider located in the VI on the targets in the SPP/APR.

The VI did not report on the mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress or the mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public. In the FFY 2022 SPP/APR, VI must provide the required information.

The Virgin Islands' (VI's) IDEA Part C determination for both 2022 and 2023 is Needs Assistance. In VI's 2023 determination letter, the Department advised VI of available sources of technical assistance, including OSEP-funded technical assistance centers, and required VI to work with appropriate entities. The Department directed VI to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. VI must report, with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which VI received assistance; and (2) the actions VI took as a result of that technical assistance.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	96.60%	98.70%	99.55%	95.13%	99.09%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
207	220	99.09%	100%	99.55%	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.

12

Provide reasons for delay, if applicable.

In the St. Thomas/St. John district we continue to have delays due to COVID-19; daycare providers and parents were continuing to be reluctant to meet face to face. Some families opted out of virtual services, and some children had medical appointments off island for extended periods of time.
In the St. Croix district delays were due to families moving without notifying the program, changing cell phone numbers without notifying the program, cancelling or rescheduling appointments and finally restricting services at home or daycare due to COVID.

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).

Timely criteria for early intervention services occurs between the date of IFSP consent by family and the first day of service which must not exceed 30 days.

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).

The data was collected from the full reporting period, July 1, 2021 to June 30, 2022.

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

This data accurately reflect all children for whom an IFSP was developed from July 1, 2021 to June 30, 2022. The Service Coordinator in each district receives the information/reports from the Providers and enters the information in the database. The database has formulas in place to indicate the upcoming due dates.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

A total of two findings of noncompliance were identified in the St. Croix district. The Providers assigned to these cases were concerned about Covid 19, and face to face services, therefore the cases had to be reassigned resulting in developmental services being late. The ITP has verified that the program with noncompliance under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated developmental services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The ITP monitored the St. Croix district, through meetings, review of case files and on-site verification of data. The process included notifying the program of the two findings of non-compliance; and informing them of corrections of noncompliance according to 09-02. The ITP corrective actions includes a program analysis of the root cause for the non-compliance and action steps with responsible programs and dates to correct the identified issues that led to non-compliance. The ITP reviewed subsequent data that was 100% compliant to close each finding of non-compliance. In subsequent reviews of updated data, it was verified that 100% compliance was achieved.

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

The ITP verified that the two files not in compliance, were corrected at the child level, by providing developmental services, according to the IFSP. The ITP verified that the specific regulatory requirements were implemented and ensured that the children received the services listed on the IFSP. The files for the two cases were reviewed and developmental services were provided specific to the IFSP although late. The ITP issued a finding and implemented a process of monitoring files for compliance on a quarterly basis. The ITP corrected the instances of noncompliance consistent with OSEP memorandum 09-02. A subsequent review on St. Croix showed that the files were 100% in compliance consistent with the OSEP memo 09-02.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	5	5	0
FFY 2018	1	1	0

FFY 2019

Findings of Noncompliance Verified as Corrected

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

The ITP has verified that in the St. Thomas/St. John district, each provider with noncompliance under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The ITP monitored each program, through meetings, review of case files and on-site verification of data. The process included notifying each program of any identified findings of non-compliance; and informing them of corrections of noncompliance according to 09-02. The ITP corrective actions includes a program analysis of the root cause for the non-compliance and action steps with responsible programs and dates to correct the identified issues that led to non-compliance. The ITP reviewed subsequent data that was 100% compliant to close each finding of non-compliance. In subsequent reviews of updated data, it was verified that 100% compliance was achieved.

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

As the territory was recovering from the aftermath of the two 2017 hurricanes and the effects of tropical storm Dorian in 2019, the territory was forced into a state of emergency due to COVID 19. Families were displaced after the hurricanes and it was difficult to maintain appointments. Some families opted out of appointments or continually rescheduled. These families were offered new service appointments, although late, as well as early intervention resources. The ITP subsequently followed up with these families where available. During the COVID 19 state of emergency the territory was in lockdown. During this time providers offered virtual services, and provided early intervention resources electronically. The ITP verified that the five files not in compliance, were corrected at the child level, by providing services, although late, unless the child was no longer in the program. The ITP verified that the specific regulatory requirements were implemented consistent with OSEP memo 09-02 and ensured that the children received the services listed on the IFSP. The ITP issued five findings and implemented a process of monitoring files for compliance on a quarterly basis and subsequent reviews showed that the data was 100% compliant.

FFY 2018

Findings of Noncompliance Verified as Corrected

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

In the St. Thomas/St. John district, the ITP has verified that each provider with noncompliance under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The ITP monitored each program, through meetings, review of case files and on-site verification of data. The process included notifying each program of any identified findings of non-compliance; and informing them of corrections of noncompliance according to 09-02. The ITP corrective actions includes a program analysis of the root cause for the non-compliance and action steps with responsible programs and dates to correct the identified issues that led to non-compliance. The ITP reviewed subsequent data that was 100% compliant to close each finding of non-compliance. In subsequent reviews of updated data, it was verified that 100% compliance was achieved.

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

As a result of the hardships of the hurricanes of 2017, the family was contemplating moving out of state but decided not to. The mother re-contacted the ITP to begin services and the ITP began IFSP services although late. The ITP verified that the one file not in compliance, was corrected at the child level, by providing services, according to the IFSP. The ITP verified that the specific regulatory requirements were implemented and ensured that the child received the services listed on the IFSP. The ITP issued a finding and implemented a process of monitoring files for compliance on a quarterly basis. The ITP corrected the instances of noncompliance consistent with OSEP memorandum 09-02.

1 - Prior FFY Required Actions

Because VI reported less than 100% compliance for FFY 2020, VI must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, VI must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 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 2021 SPP/APR, VI must describe the specific actions that were taken to verify the correction.

If VI did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why VI did not identify any findings of noncompliance in FFY 2020.

VI must demonstrate, in the FFY 2021 SPP/APR, that the remaining findings identified in FFY 2019 and FFY 2018 were corrected. When reporting on the correction of noncompliance, VI must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2018 and FFY 2019: (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 2021 SPP/APR, VI must describe the specific actions that were taken to verify the correction.

Reporting on the third party fiduciary payments to ensure timely service provision is part of the VIDH's FFY 2021 and FFY 2022 IDEA Part C grant award specific conditions. The VIDH timely submitted its February 1, 2022, progress report and its May 1, 2022, progress report under its FFY 2021 IDEA Part C Specific Conditions. OSEP will respond to the VIDH's IDEA Part C Specific Conditions February 1, and May 1, 2022 progress reports in its FFY 2022 IDEA Part C grant award letter.

Response to actions required in FFY 2020 SPP/APR

1 - OSEP Response

1 - Required Actions

Because the VI reported less than 100% compliance for FFY 2021, the VI must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the VI 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 VI must describe the specific actions that were taken to verify the correction.

If the VI 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 VI did not identify any findings of noncompliance in FFY 2021.

Reporting on the third-party fiduciary payments to ensure timely service provision is part of the VI's FFY 2022 and FFY 2023 IDEA Part C grant award specific conditions. The VI timely submitted its February 1, 2023, progress report and its May 1, 2023, progress report under its FFY 2021 IDEA Part C Specific Conditions. OSEP will respond to the VI's IDEA Part C Specific Conditions February 1, and May 1, 2023, progress reports in its FFY 2023 IDEA Part C grant award letter.

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 (E*MAPS*)).

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	96.00%

FFY	2016	2017	2018	2019	2020
Target>=	95.00%	96.00%	97.00%	97.00%	97.00%
Data	100.00%	93.18%	96.08%	95.19%	92.38%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	97.00%	97.00%	97.00%	97.00%	97.00%

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	85
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Total number of infants and toddlers with IFSPs	108

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
85	108	92.38%	97.00%	78.70%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

Due to COVID-19, restrictions in some settings are still in place in both districts. As requested by parents, child care providers and early intervention providers, and with parental consent, toddlers received services via virtual interactions or clinical settings where temperature checks and hand sanitizing were required.

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

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

Historical Data

Outcome	Baseline	FFY	2016	2017	2018	2019	2020
A1	2008	Target>=	86.50%	86.50%	87.00%	87.00%	87.00%
A1	84.20%	Data	91.30%	87.93%	86.90%	84.91%	84.31%
A2	2008	Target>=	54.00%	54.50%	55.00%	55.00%	55.00%
A2	52.40%	Data	52.17%	49.18%	62.92%	50.46%	31.37%
B1	2008	Target>=	86.50%	86.50%	87.00%	87.00%	87.00%
B1	84.20%	Data	91.30%	91.67%	92.05%	92.59%	88.24%
B2	2008	Target>=	42.50%	43.00%	43.50%	43.50%	43.50%
B2	40.50%	Data	41.30%	40.98%	51.69%	52.29%	33.33%
C1	2008	Target>=	86.50%	86.50%	87.00%	87.00%	87.00%
C1	83.80%	Data	89.13%	85.00%	85.88%	85.19%	80.39%
C2	2008	Target>=	69.50%	70.00%	70.00%	70.00%	70.00%
C2	69.00%	Data	36.96%	47.54%	58.43%	46.36%	33.33%

Targets

FFY	2021	2022	2023	2024	2025
Target A1>=	87.00%	87.00%	87.00%	87.00%	87.00%
Target A2>=	55.00%	55.00%	55.00%	55.00%	55.00%
Target B1>=	87.00%	87.00%	87.00%	87.00%	87.00%
Target B2>=	43.50%	43.50%	43.50%	43.50%	43.50%
Target C1>=	87.00%	87.00%	87.00%	87.00%	87.00%
Target C2>=	70.00%	70.00%	70.00%	70.00%	70.00%

FFY 2021 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

69

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	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	14	20.29%

Outcome A Progress Category	Number of children	Percentage of Total
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	30	43.48%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	25	36.23%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	0	0.00%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	55	69	84.31%	87.00%	79.71%	Did not meet target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	25	69	31.37%	55.00%	36.23%	Did not meet target	No Slippage

Provide reasons for A1 slippage, if applicable

There were a number of toddlers that traveled for medical appointments. There were a number of occasions in which toddlers where absent from daycare/home sessions cancelled due to sickness during the pandemic. This affected their ability to meet consecutively and may have resulted in slow pace of progress. Also there are a number of toddlers who were enrolled in the program for less than one full year. The VI ITP will collaborate with the Maternal Child Health Agency which has the Project Launch, EDHI and the Maternal Infant and Early Childhood Home Visiting Program under it's umbrella in an effort to identify children in the 0-1 age group.

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	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	6	8.70%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	35	50.72%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	28	40.58%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	0	0.00%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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	63	69	88.24%	87.00%	91.30%	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	28	69	33.33%	43.50%	40.58%	Did not meet 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	0	0.00%

Outcome C Progress Category	Number of Children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	10	14.49%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	30	43.48%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	28	40.58%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1	1.45%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	58	68	80.39%	87.00%	85.29%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	29	69	33.33%	70.00%	42.03%	Did not meet target	No Slippage

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	101
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.	31

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The instruments used for data gathering are the COS Entry and Exit forms. When the Service Coordinator interviews the family at the intake meeting, the information gathered serves as a baseline. The ELAP assessment tool is used by the EI Evaluator to assess the child. There is a collaboration between the parent, provider, and coordinator to discuss the ELAP assessment tool's results. Parent input is encouraged and considered during the meetings as well as assessments made by the Providers. The COS Exit is conducted by the person providing the Early Intervention services.

Provide additional information about this indicator (optional).

The VI ITP reviewed historical data and saw that the targets for this indicator have not been met in consecutive years. As noted in Indicators 5 & 6 most children are enrolled in the program when they are closer to 24 months. This short time frame does not allow for optimal improvement from when enrolled to when they exit. With stakeholder input the VI ITP wishes to change the baseline data for Outcome C2.

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 and 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	2016	2017	2018	2019	2020
A	2006	Target>=	94.00%	94.00%	98.00%	98.00%	98.00%
A	86.00%	Data	100.00%	94.37%	98.28%	100.00%	98.31%
B	2006	Target>=	88.00%	88.00%	98.00%	98.00%	98.00%
B	###C04BBASEDATA###	Data	97.67%	94.37%	98.28%	100.00%	100.00%
C	2006	Target>=	94.00%	94.00%	100.00%	100.00%	100.00%

C	86.00 %	Data	100.00%	94.37%	100.00%	100.00%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target A>=	98.00%	98.00%	98.00%	98.00%	98.00%
Target B>=	98.00%	98.00%	98.00%	98.00%	98.00%
Target C>=	100.00%	100.00%	100.00%	100.00%	100.00%

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

FFY 2021 SPP/APR Data

The number of families to whom surveys were distributed	76
Number of respondent families participating in Part C	72
Survey Response Rate	94.74%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	72
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	72
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	72
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	72
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	72
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	72

Measure	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	98.31%	98.00%	100.00%	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)	100.00%	98.00%	100.00%	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)	100.00%	100.00%	100.00%	Met target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

Question	Yes / No
Was a collection tool used?	YES

Question	Yes / No
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

Survey Response Rate

FFY	2020	2021
Survey Response Rate	98.33%	94.74%

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 for the VI ITP is 94.74%. The VI ITP intends to continue with the process of providing the surveys in person during the transition process. As it has been shown when surveys are sent to parents they are not returned. Historically the program has seen good response rates when the surveys are issued in person. The Virgin Islands used the ECTA calculator which compared the number of surveys distributed to families against the number of surveys completed.

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

The ITP used the ECTA calculator to determine any non-response bias. The calculator did not demonstrate non-response bias for the FFY2021 data for this indicator. The ECTA calculator demonstrated that the race and ethnicity for all surveys sent and compared to the race and ethnicity returned are consistent on St. Thomas/St. John and St. Croix.
In the St. Thomas/St. John district - 37 surveys distributed
32 surveys were given to black families and 29 were completed (78%), for white families, 5 were distributed and 4 were completed (11%), 5 families identified as Hispanic (14%)
In the St. Croix district - 39 surveys distributed
28 surveys were given to black families and 28 were completed (72%), 6 surveys were given to Hispanic families and 6 were returned (15%), 5 surveys were given to families who identified as two or more races and 5 were returned (13%). Of the 5 who identified as two or more races, 3 were Hispanic.

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.

Representativeness was analyzed by comparing the percentage of families enrolled in Part C during the reporting period by race and ethnicity by the percentage of surveys received by race and ethnicity.
St. Croix: 59% Black, 19% Hispanic, 7% White, 15% Two or More Races
Demographically, Black families had the highest percentage of enrollment in the St. Croix ITP.
St. Thomas/St. John: 84% Black, 7% Hispanic, 9% White
Demographically, Black families had the highest percentage of enrollment in the St. Thomas/St. John ITP.
The surveys distributed and returned were broken down as follows:
Black 57
Hispanic 6 (plus 3 from two or more)
Two or more races 5 (includes 3 Hispanic)

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 Virgin Islands used the ECTA Representativeness Calculator to measure the representativeness of the respondents for race/ethnicity and districts. The ECTA calculator uses an accepted formula to determine representativeness and non response bias. The ECTA Calculator determined that our data was representative of all infants toddlers on St. Thomas/St. John and St. Croix.

Provide additional information about this indicator (optional).

The Infants & Toddlers Program (ITP) serves a small amount of families in the St. Thomas/St. John district and in the St. Croix district. In the St. Thomas/St. John district, 37 surveys were distributed and 33 surveys were returned. In the St. Croix district, 33 surveys were distributed and 33 surveys were returned.

4 - Prior FFY Required Actions

In the FFY 2021 SPP/APR, VI must analyze the response rate to identify potential non-response bias and identify steps to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities. VI must also describe the metric used to determine representativeness, as required by the Measurement Table.

Response to actions required in FFY 2020 SPP/APR

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 E*DFacts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

Measurement

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

Instructions

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

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

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	1.38%

FFY	2016	2017	2018	2019	2020
Target >=	1.44%	1.48%	1.48%	1.48%	1.48%
Data	1.02%	0.42%	0.96%	1.38%	1.08%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	1.48%	1.48%	1.48%	1.48%	1.48%

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 1 with IFSPs	6
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	06/28/2022	Population of infants and toddlers birth to 1	1,102

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
6	1,102	1.08%	1.48%	0.54%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The Virgin Islands Infants & Toddlers Program began using actual data from the Vital Statistics office within the Department of Health for the FFY 2021 APR which demonstrates slippage from 1.08% in FFY 2020 to 0.54% in FFY 2021. The DOH Vital Statistics office is the agency responsible for all birth records in both districts (St. Thomas/St. John and St. Croix). Historically the ITP used the 2010 Census data which records children 0-5 years old without a specific breakdown that is required by OSEP. The data from the Vital Statistics office is a new method of counting the specific age groups of 0-1 and 0-3.

Provide additional information about this indicator (optional)

The population in the Virgin Islands continues to decrease based on the most recent 2020 Census as a long term result of the 2017 hurricanes and COVID 19. In the St. Croix district the Limetree Bay Oil Refinery closed in May 2021 triggering even more of an economic downturn.

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 (E*MAPS*)) and Census (for the denominator).

Measurement

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

Instructions

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

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

6 - Indicator Data

Baseline Year	Baseline Data
2005	2.58%

FFY	2016	2017	2018	2019	2020
Target >=	2.65%	2.70%	2.70%	2.70%	2.70%
Data	1.84%	1.52%	1.76%	1.79%	1.81%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	2.70%	2.70%	2.70%	2.70%	2.70%

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	07/06/2022	Number of infants and toddlers birth to 3 with IFSPs	108
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	06/28/2022	Population of infants and toddlers birth to 3	2,936

FFY 2021 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
108	2,936	1.81%	2.70%	3.68%	Met target	No Slippage

Provide additional information about this indicator (optional).

The Virgin Islands Infants & Toddlers Program began using actual data from the Vital Statistics office within the Department of Health for the FFY 2021 APR which demonstrates slippage from 1.08% in FFY 2020 to 0.54% in FFY 2021. The DOH Vital Statistics office is the agency responsible for all birth records in both districts (St. Thomas/St. John and St. Croix). Historically the ITP used the 2010 Census data which records children 0-5 years old without

a specific breakdown that is required by OSEP. The data from the Vital Statistics office is a new method of counting the specific age groups of 0-1 and 0-3. The population in the Virgin Islands continues to decrease based on the most recent 2020 Census as a long term result of the 2017 hurricanes and COVID 19.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	97.79%	100.00%	99.10%	99.59%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
199	220	100.00%	100%	100.00%	Met target	No Slippage

Number of documented delays attributable to exceptional family circumstances

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

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Provide reasons for delay, if applicable.

In the St. Thomas/St. John district we continue delays due to COVID-19; daycare providers and parents were continuing to be reluctant to meet face to face. Some families opted out of virtual services, and some children had medical appointments off island for extended periods of time.
In the St. Croix district delays were due to families moving without notifying the program, changing cell phone numbers without notifying the program, cancelling or rescheduling appointments and finally restricting services at home or daycare due to COVID.

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).

This data was collected through out the full reporting period, July 1, 2021 to June 30, 2022.

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

This data accurately reflect all children for whom an IFSP was developed from July 1, 2021 to June 30, 2022. The Service Coordinator in each district receives the information/reports from the Providers and enters the information in the database. The database has formulas in place to indicate the upcoming due dates.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	1	1	0

FFY 2019

Findings of Noncompliance Verified as Corrected

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

The Director has verified that each Service Coordinator with noncompliance under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) implemented the IFSP for the child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Director monitored each program, through meetings, review of the one file and on-site verification of data. The process included notifying the Service Coordinator of each program of any identified findings of non-compliance; and informing them of corrections of noncompliance according to 09-02. The ITP corrective actions includes a program analysis of the root cause for the non-compliance and action steps with responsible programs and dates to correct the identified issues that led to non-compliance. The ITP reviewed subsequent data that was 100% compliant to close each finding of non-compliance. In subsequent reviews of updated data, it was verified that 100% compliance was achieved.

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

As the territory was recovering from the aftermath of the two 2017 hurricanes and the effects of tropical storm Dorian in 2019, the territory was forced into a state of emergency due to COVID 19. During the COVID 19 state of emergency the territory was in lockdown on several different occasions. Some families opted out of appointments or continually rescheduled. This family was offered new appointments to sign the IFSP, although late. The ITP verified that the one file not in compliance, was corrected at the child level, by implementing the IFSP once signed. The ITP verified that the specific regulatory requirements were implemented consistent with OSEP memo 09-02 and ensured that the child received the services listed on the IFSP. The ITP issued one finding and implemented a process of monthly monitoring for this child to ensure that all future timelines were met. This child is no longer within the jurisdiction of the VI ITP.
The ITP corrected the instances of noncompliance consistent with OSEP memorandum 09-02. A subsequent review on St. Croix showed that the files were 100% in compliance consistent with the OSEP memo 09-02.

7 - Prior FFY Required Actions

VI must demonstrate, in the FFY 2021 SPP/APR, that the remaining findings identified in FFY 2019 and FFY 2018 were corrected. When reporting on the correction of noncompliance, VI must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with remaining noncompliance identified in FFY 2018 and FFY 2019 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 2021 SPP/APR, VI must describe the specific actions that were taken to verify the correction.

Response to actions required in FFY 2020 SPP/APR

SPECIAL NOTE: FFY 2018 This explains the corrections of noncompliance as there is not a designated area to complete in the previous section.

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

For FFY 2018 the Director has verified that each Service Coordinator with noncompliance under this indicator: (1) is correctly implementing the specific regulatory requirements; and (2) implemented the IFSP for the two children, although late, unless the children are no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The Director monitored each program, through meetings, review of the files and on-site verification of data. The process included notifying the Service Coordinator of each program of any identified findings of non-compliance; and informing them of corrections of noncompliance according to 09-02. The ITP corrective actions includes a program analysis of the root cause for the non-compliance and action steps with responsible programs and dates to correct the identified issues that led to non-

compliance. The ITP reviewed subsequent data that was 100% compliant to close each finding of non-compliance. In subsequent reviews of updated data, it was verified that 100% compliance was achieved.

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

For FFY 2018 2 children's evaluations and IFSPs were late. The ITP verified that the two files not in compliance, were corrected at the child level, by obtaining the necessary permission from the families to implement the IFSPs and subsequently providing services, according to the IFSP. The ITP verified that the specific regulatory requirements were implemented and ensured that the child received the services listed on the IFSP. The ITP issued a finding and implemented a process of monitoring files for compliance on a quarterly basis. The ITP corrected the instances of noncompliance consistent with OSEP memorandum 09-02. These children are no longer within the jurisdiction of the VI ITP.

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
93	93	100.00%	100%	100.00%	Met target	No Slippage

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

Provide reasons for delay, if applicable.

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).

This data was collected during the full reporting period, July 1, 2021 to June 30, 2022.

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

Data is determined to accurately reflect data for infants and toddlers with IFSPs for the full reporting period as the Infants and Toddlers Program reviewed data for all toddlers who were enrolled with an IFSP during the reporting period from July 1, 2021 to June 30, 2022.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8A - Prior FFY Required Actions

None

8A - OSEP Response

8A - Required Actions

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
76	93	100.00%	100%	100.00%	Met target	No Slippage

Number of parents who opted out

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

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Provide reasons for delay, if applicable.

Describe the method used to collect these data.

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).

This data was collected through out the full reporting period, July 1, 2021 to June 30, 2022.

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

Data is determined to accurately reflect data for infants and toddlers with IFSPs for the full reporting period as the Infants and Toddlers Program reviewed data for all toddlers who were enrolled with an IFSP during the reporting period from July 1, 2021 to June 30, 2022.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8B - Prior FFY Required Actions

None

8B - OSEP Response

The VI did not describe the method used to collect data, as required by the Measurement Table.

8B - Required Actions

The VI did not describe the method used to collect data for this indicator. In the FFY 2022 SPP/APR, the VI must provide the required information.

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

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

Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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	94.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	88.64%	76.06%	100.00%	100.00%	100.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
85	93	100.00%	100%	100.00%	Met target	No Slippage

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

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

8

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.

Provide reasons for delay, if applicable.

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).

The data was collected through out the full reporting period.

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

Data is determined to accurately reflect data for infants and toddlers with IFSPs for the full reporting period as the Infants and Toddlers Program reviewed data for all toddlers who were enrolled with an IFSP during the reporting period from July 1, 2021 to June 30, 2022.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2020

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

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

8C - Prior FFY Required Actions

None

8C - OSEP Response

8C - Required Actions

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 (E*MAPS*)).

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	0

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

Historical Data

Baseline Year	Baseline Data

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

9 - Prior FFY Required Actions

None

9 - OSEP Response

The VI reported fewer than ten resolution sessions held in FFY 2021. The VI is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

9 - Required Actions

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

Data Source

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

Measurement

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

Instructions

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

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

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

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	0
SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2016	2017	2018	2019	2020
Target>=					
Data					

Targets

FFY	2021	2022	2023	2024	2025
Target>=					

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

The VI reported fewer than ten mediations held in FFY 2021. The VI is not required to provide targets until any fiscal year in which ten or more mediations were held.

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

Baseline Data: The State must provide baseline data that must be 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 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 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 2021 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 2021 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, 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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 (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., 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 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) 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)?

The percent of infants and toddlers with IFSPs who were functioning within age expectations in the acquisition and use of knowledge and skills (including early language/communication) by the time they turned 3 or exited the program.

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

NO

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

NO

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

NO

Please provide a link to the current theory of action.

https://doh.vi.gov

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
2008	40.50%

Targets

FFY	2021	2022	2023	2024	2025
Target>=	43.50%	43.50%	43.50%	43.50%	43.50%

FFY 2021 SPP/APR Data

Number of infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	Total number of infants and toddlers exiting who had been receiving services for at least 6 months.	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
28	69	NVR	43.50%	40.58%	Did not meet target	N/A

Provide the data source for the FFY 2021 data.

The information used for this measurement is received from the EI providers with input from the families when the entry and exit COS ratings are completed. The data is from Indicator C3, Summary statement B2. Indicator C3 is calculated using the recently updated Excel database with the formulas to calculate the required result imbedded.

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

The information is received from EI service providers and entered in the Excel database by the Service Coordinators in each district.

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

NO

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

https://doh.vi.gov

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.

The VI ICC continues to meet to advise and assist with the VI ITP. During the reporting period the VI ITP begun the process of hiring two Service Coordinators in the St. Croix district. Initially there was only one Service Coordinator. The decision was made with input from the VI ICC to hire an additional Service Coordinator because of the number of children served in that district in comparison to St. Thomas/St. John. The VI ICC Facebook page has been operational with updates made as needed. Several EI providers and families participated in training from the Play Project early in 2022.

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

DATA: The recently updated Excel database enables the VI ITP to submit more accurate data as a result of the formulas embedded in the spreadsheet. The long term outcome is more accurate data and the ability to update and add additional fields when needed.
TECHNICAL ASSISTANCE:
FINANCE: The Third Party Fiduciary contract remains in effect providing financial monitoring and oversight.
PROFESSIONAL DEVELOPMENT: The Play Project provided training in evidence-based practices to the EI providers and parents who participated. This assists with better interactions with the children they serve.

Did the State implement any <u>new</u> (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.

The VI ITP will have a full compliment of staff by mid year, with an additional Service Provider for St. Croix and one for St. Thomas/St. John. The Program Administrator position will also be filled. That staff position will serve as the immediate supervisor for all Service Coordinators. With a full compliment of staff, the VI ITP will work on the following:
Implement a schedule for monitoring files in each district.
Develop a listserv in Microsoft Outlook to send mass emails to families with information that will benefit their children who are in the program as well as to update them on any new initiatives.
Develop an annual list of trainings for both providers and families.
Attend national conferences and include staff, EI providers, ICC members and families where allowable.
Continue to work on the SPP/APR throughout the year with the DaSy TA providers.
Explore ways to increase ICC stakeholder engagement.
Submit new ICC recommendations to the Governor for appointments.

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

Covid impact to SSIP plan
use of DEC checklist
MCH programs - home visiting

Provide a summary of each evidence-based practice.

The PLAY Project is an evidence-based autism early intervention program that trains child development professionals (SLP, OT, EI) to work with families who have a young child with autism.

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.

Professionals trained in PLAY add a new set of tools to their service provision.

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

The VI ITP will request specific technical assistance from DaSy/ECTA for this response.

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.

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

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

NO

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

With stakeholder input and technical assistance from DaSy/ECTA the VI ITP would like to make changes to the activities that have been placed on hold indefinitely and were out of the control of the Program. Due to the change in the Director and the affects of COVID some of the initiatives originally identified in the SSIP may be ambitious to complete. Technical Assistance meetings with DaSy/ECTA are currently held every two weeks to discuss various aspects of the program and how it will impact or improve the SSIP.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advises and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. There were meetings held in May 2022, June 2022, and December 2022. The council has a diverse membership, including parents of children with a disability and state agencies involved in the provision of early intervention services, a member responsible for the State Medicare program, the SEA responsible for child care, and other entities who give the ITP advice in areas of child development, human resources, and child find. Conference calls were held with available stakeholders to discuss the targets and how they will be reached. In an effort to increase the child find, one of the SSIP strands, the VI ITP met with VI Partners for Healthy Communities and the Project Launch program. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. Beginning in 2022 the VI ITP also presented the findings of the SPP/APR, Exiting, and Child Count reports to the DOH Leadership when required to present the status of the program. Each program within the Department of Health usually presents at least two times per calendar year.

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

The VI ICC met throughout the year with additional information sent via email. To assist with child find, a meeting with the VI Partners for Healthy Communities was held with follow-up meetings to be held in 2023. The VI ITP Director attended meetings with the Project Launch program to discuss referrals as well as the upcoming Parent Cafes to be scheduled in 2023.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

The VI ICC was concerned with the length of time it takes to hire applicants within the government system. The Director continues to speak with the Human Resources Director as well as Deputy Commissioner with direct oversight of the ITP.

Additional Implementation Activities

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

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

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

The VI ITP continues to experience barriers in onboarding staff. The intent is to have two Service Coordinators on St. Croix. There were two persons selected for the positions but due to the lengthy process, only one person accepted a position. As of January 30, 2023, the process to hire an additional Service Coordinator in St. Croix has begun. In the St. Croix district, the entire Department of Health is in the process of relocating to different offices due to the presence of mold in some of the Modular units that were put in place after the 2017 hurricanes. The ITP is waiting on a decision from the DOH Executive Team.

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

The VI did not report on all of the required components of this indicator. In the FFY 2021, SPP/APR, the VI must report on all required components of this indicator, consistent with the Measurement Table.

OSEP notes that one or more of the Indicator 11 attachment(s) included in the State's FFY 2020 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2020 SPP/APR

11 - OSEP Response

OSEP's response to the VI's FFY 2020 SPP/APR required the VI to include in the FFY 2021 SPP/APR to report on all required components of this indicator, consistent with the Measurement Table. The VI provided some of the required information.

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

The VI did not summarize the strategies or activities that ensured the use of evidence-based practices with fidelity.

The VI did not provide an Evaluation Plan.

11 - Required Actions

The VI did not report on all of the required components of this indicator. In the FFY 2022 SPP/APR, VI In the FFY 2022 SPP/APR, the VI must report on all the required components of this indicator, consistent with the Measurement Table.