STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

For reporting on
FFY 2022

U.S. Virgin Islands

PART C DUE
February 1, 2024

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

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

The 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 every week to answer any questions they had and assist where needed. The Director of the ITP has also filled in to complete various tasks as needed in the St. Croix district. Despite the shortage, no child in the VI ITP did not receive 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. In June 2022, several interviews were conducted and a selection was made with the assistance of an ICC member to fill the Service Coordinator vacancy in St. Croix. That Service Coordinator began on September 26, 2022. During this reporting period, the ITP has two Service Coordinators, one in the St. Croix district and one in the St. Thomas/St. John district. Weekly meetings are held with the Service Coordinators to provide updates and to discuss any concerns they may have with their daily tasks.

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 continues to receive technical assistance from the Early Childhood Technical Assistance Center (ECTA Center) the DaSy State Liason, and the Center for IDEA Fiscal Reporting. There is a standing bi-weekly TA meeting with DaSy/SRI/ECTA. The TAs in these centers are experienced in IDEA requirements and compliance and continue to assist the VI ITP. The DaSy TA provided resources and links for Service Coordinator Training. There is always input from the TA Centers in developing the ITP's APR/SSIP. The TA Center most recently assisted with the clarification for Indicator 4 on this APR. The database, created with the assistance of DaSy and ECTA, continues to be a valuable tool in providing reliable data. The Director of the ITP attended the CIFR Training (May 2023), Part C Data Leadership Convening 2023 (June 2023) annual OSEP Leadership Conference (July 2023). The benefits of attending were networking with other Directors, hearing about the latest processes, and finding solutions to problems that the ITP may be experiencing.

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 have resumed in person. Other professional development opportunities include webinars from the TA centers and early intervention organizations. 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 continue to benefit from professional development training from both the DOE and the Infants and Toddlers Program. There remain continued challenges regarding recruiting and retaining early intervention providers as well as pediatric OT, PT, and S/LP. Listed below are a few of the trainings and workshops the ITP EI providers attended during this reporting cycle.
Smart Beginnings 2022
Act Early VI Professional Development Series Topic I: Developmental Milestones, Developmental Monitoring/LTSAE, and Developmental Screening
Act Early VI Professional Development Series Topic II: Let's Talk About Autism: Early Signs and Family Conversations
Office of Child Care & Regulatory Services (DHS) Discussing Speech and Language Disorders (Speaker - ITP SLP and ICC member)
Court Improvement Program in collaboration with the Department of Human Services, Children and Family Services - U.S. Virgin Islands Inaugural Child Welfare Academy.

Stakeholder Engagement:

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

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as

additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

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 the grant application, APR, social media, and other topics of importance to the children and their families. Unfortunately, consistent attendance is a challenge. In 2024 new and additional members will be recruited and subsequently appointed to the VI ICC.

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. There are currently 41 followers on the Facebook page. Some examples of followers are the VI Family Resource Center, Nana's Baby Children's Home, and the USVI Project Launch Program. The Council for Exceptional Children, a national organization, also is a follower on the Facebook page as well as one of the local businesses that provide services to our children and families. This business also regularly posts to the site.

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 Virgin Islands Department of Health's ITP advised the public that the GEPA Section 427 Form and FFY 2023 Grant Application for funds under Part C of the Individuals with Disabilities Education Act (IDEA) was available for review in both districts for 60 days starting March 24, 2023, ending May 22, 2023. The opportunity for public comments for 30 days, beginning April 1, 2023, and ending April 30, 2023, was also posted indicating where the application was available for review in each district. This information was posted on the VI ICC's Facebook page on March 24, 2023, and the DOH website. On February 8, 2023, a post was made on the VI ICC's Facebook page urging the public to visit the Department of Health's website doh.vi.gov to view the FFY 2021 Annual Performance Report (APR) under the Programs tab.

Making Results Available to the Public:

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

The Virgin Islands Department of Health's ITP advised the public that the GEPA Section 427 Form and FFY 2023 Grant Application for funds under Part C of the Individuals with Disabilities Education Act (IDEA) was available for review in both districts for 60 days starting March 24, 2023, ending May 22, 2023. The opportunity for public comments for 30 days, beginning April 1, 2023, and ending April 30, 2023, was also posted indicating where the application was available for review in each district. This information was posted on the VI ICC's Facebook page on March 24, 2023, and the DOH website. On February 8, 2023, a post was made on the VI ICC's Facebook page urging the public to visit the Department of Health's website doh.vi.gov to view the FFY 2021 Annual Performance Report (APR) under the Programs tab.

Reporting to the Public:

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

The SPP/APR data and targets are shared in the weekly DOH Director's Team meetings when the VI ITP is asked to present. The information was also posted during the reporting period to the website for the SPP/APR: https://doh.vi.gov/programs/infant-and-toddlers-program. On February 8, 2023, a post was made on the VI ICC's Facebook page urging the public to visit the Department of Health's website doh.vi.gov to view the FFY 2021 Annual Performance Report (APR) under the Programs tab.

Intro - Prior FFY 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.

Response to actions required in FFY 2021 SPP/APR

The VI ITP reported the FFY 2021 performance via the lead agency's website. Unfortunately, when the website was being updated, the information was removed. It has since been reinstated.
The VI ITP has not changed any targets during this reporting period. Discussions have taken place in the ICC meetings on the implementation of the Ages and Stages Questionnaire as an improvement strategy to increase the families' awareness of their child's immediate needs. Outside of this reporting period the VI ITP has participated in outreach activities in collaboration with the Department of Human Services and other programs within the Department of Health in order to increase child find.

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 Virgin Islands SPP/APR documents.

The Virgin Islands determinations for both 2022 and 2023 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 21, 2023 determination letter informed the Virgin Islands that it must report with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the Virgin Islands received assistance; and (2) the actions the Virgin Islands took as a result of that technical assistance. The Virgin Islands provided the required information.

The Virgin Islands has not provided a description of the activities conducted to increase the capacity of diverse groups of parents.

The Virgin Islands has not reported on the mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.

The Virgin Islands has not reported 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.

The Department and OSEP have separately imposed Specific Conditions on the Virgin Islands Department of Health’s IDEA Part C grant award for the last three or more years; both of those Specific Conditions are in effect at the time of the determination letter.

Intro - Required Actions

The Virgin Islands' (VI's) IDEA Part C determination for both 2023 and 2024 is Needs Assistance. In the Virgin Islands' 2024 determination letter, the Department advised the Virgin Islands of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the Virgin Islands to work with appropriate entities. The Department directed the Virgin Islands to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The Virgin Islands must report, with its FFY 2023 SPP/APR submission, due February 1, 2025, on: (1) the technical assistance sources from which the Virgin Islands received assistance; and (2) the actions the Virgin Islands took as a result of that technical assistance.

The Virgin Islands did not, as required, fully report on: (1) 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, (2) the mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress, and (3) 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 2023 SPP/APR, the Virgin Islands must provide the required information.

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	98.70%	99.55%	95.13%	99.09%	99.55%

Targets

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

FFY 2022 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
219	243	99.55%	100%	99.18%	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.

22

Provide reasons for delay, if applicable.

In the St. Thomas/St. John district in 2021 delays were due to COVID-19; daycare providers and parents were reluctant to meet face to face. Some families opted out of virtual services, and some children had medical appointments off-island for extended periods. In 2022 and 2023 families left the island for extended periods and cell phone numbers were changed without notifying the program.
In the St. Croix district delays were due to families moving without notifying the program, changing cell phone numbers without notifying the program, canceling or rescheduling appointments, and finally in 2021 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 occur between the date of written IFSP consent by the 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, 2022 to June 30, 2023

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

This data accurately reflects all children for whom an IFSP was developed from July 1, 2022, to June 30, 2023. 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 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

A total of one finding of noncompliance was identified in the St. Croix district. The case 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 this 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 finding of non-compliance; and informing them of corrections of noncompliance according to 09-02. The ITP corrective actions include 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 file that was not in compliance, was 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 child received the services listed on the IFSP. The file was reviewed and developmental services were provided specifically 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 2021

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

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

1 - Prior FFY Required Actions

Because the 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.

Response to actions required in FFY 2021 SPP/APR

A total of one finding of noncompliance was identified in the St. Croix district. The case needed 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 this 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 finding of non-compliance; and informing them of corrections of noncompliance according to 09-02. The ITP corrective actions include 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.

1 - OSEP Response

While the Virgin Islands provided the number of documented delays attributable to family circumstances for this indicator, they did not account for the delays for two children due to provider reasons. Further, the Virgin Islands reported the reasons for delays occurred in multiple years including 2021, 2022, and 2023, failing to specify the reporting year and the islands where the delays occurred. Therefore, OSEP was unable to determine whether the Virgin Islands reviewed the reasons for delay.

Third-party fiduciary payments to ensure timely service provision is part of OSEP's Specific Conditions on the Virgin Islands Department of Health IDEA Part C grant award since 2000. The Virgin Islands Department of Health timely submitted its February 1, 2024, and its May 1, 2024, progress reports under its FFY 2023 IDEA Part C Specific Conditions. OSEP will respond to the Virgin Islands Department of Health IDEA Part C Specific Conditions progress reports in its FFY 2024 IDEA Part C grant award letter.

1 - Required Actions

The Virgin Islands must report reasons for delay, as required by the Measurement Table, in its FFY 2023 SPP/APR.

Because the Virgin Islands reported less than 100% compliance for FFY 2022, the Virgin Islands must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the Virgin Islands must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the Virgin Islands must describe the specific actions that were taken to verify the correction. If the Virgin Islands did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the Virgin Islands did not identify any findings of noncompliance in FFY 2022.

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	2017	2018	2019	2020	2021
Target>=	96.00%	97.00%	97.00%	97.00%	97.00%
Data	93.18%	96.08%	95.19%	92.38%	78.70%

Targets

FFY	2022	2023	2024	2025
Target >=	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 advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	115
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey;	08/30/2023	Total number of infants and toddlers with IFSPs	132

Source	Date	Description	Data
Section A: Child Count and Settings by Age			

FFY 2022 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
115	132	78.70%	97.00%	87.12%	Did not meet target	No Slippage

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

A. Positive social-emotional skills (including social relationships);

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

C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

A. Positive social-emotional skills (including social relationships);

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Instructions

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

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

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

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

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

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

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

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

3 - Indicator Data

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

NO

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

Historical Data

Outcome	Baseline	FFY	2017	2018	2019	2020	2021
A1	2008	Target>=	86.50%	87.00%	87.00%	87.00%	87.00%
A1	84.20%	Data	87.93%	86.90%	84.91%	84.31%	79.71%
A2	2008	Target>=	54.50%	55.00%	55.00%	55.00%	55.00%
A2	52.40%	Data	49.18%	62.92%	50.46%	31.37%	36.23%
B1	2008	Target>=	86.50%	87.00%	87.00%	87.00%	87.00%
B1	84.20%	Data	91.67%	92.05%	92.59%	88.24%	91.30%
B2	2008	Target>=	43.00%	43.50%	43.50%	43.50%	43.50%
B2	40.50%	Data	40.98%	51.69%	52.29%	33.33%	40.58%
C1	2008	Target>=	86.50%	87.00%	87.00%	87.00%	87.00%
C1	83.80%	Data	85.00%	85.88%	85.19%	80.39%	85.29%
C2	2008	Target>=	70.00%	70.00%	70.00%	70.00%	70.00%
C2	69.00%	Data	47.54%	58.43%	46.36%	33.33%	42.03%

Targets

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

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%

Outcome A 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	6	9.68%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	32	51.61%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	24	38.71%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	0	0.00%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	56	62	79.71%	87.00%	90.32%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	24	62	36.23%	55.00%	38.71%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	0	0.00%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3	4.84%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	33	53.23%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	26	41.94%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	0	0.00%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	59	62	91.30%	87.00%	95.16%	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	26	62	40.58%	43.50%	41.94%	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%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	4	6.45%

Outcome C 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	33	53.23%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	25	40.32%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	0	0.00%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program 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	62	85.29%	87.00%	93.55%	Met 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	25	62	42.03%	55.00%	40.32%	Did not meet target	Slippage

Provide reasons for C2 slippage, if applicable

With stakeholder input, the VI ITP wishes to change the baseline data for Outcome C2. The VI ITP will continue to review the historical data for this indicator. Discussions will continue with the VI ICC and ITP staff to determine the best actions to take. 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 new staff, the ITP has begun to conduct outreach to the various referral sources as suggested by members of the VI ICC.

FFY 2022 SPP/APR Data

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	114
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.	34
Number of infants and toddlers with IFSPs assessed	80

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

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).

During clarification, the VI ITP upon review realized that the data was incomplete. Entry and exit data was missing from the data base due to errors in the excel formulas. The VI ITP will follow up with the TA Center to review the Child Outcomes Report section.

3 - Prior FFY Required Actions

None

3 - OSEP Response

The Virgin Islands reported 62 as the denominator in its calculation of the percent of infants and toddlers who were functioning within age expectations in each outcome area by the time they turned three years of age or exited the program. However, the Virgin Islands also reported 80 infants and toddlers with IFSPs were assessed. The Virgin Islands did not explain this discrepancy.

3 - Required Actions

In the FFY 2023 SPP/APR, submission the Virgin Islands must explain any discrepancies between the FFY 2023 total number assessed and the FFY 2023 denominator in its calculation of the percent of infants and toddlers who were functioning within age expectations in each outcome area by the time they turned three years of age or exited the program.

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

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

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

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

Data Source

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

Measurement

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

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

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

Instructions

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2006	Target>=	94.00%	98.00%	98.00%	98.00%	98.00%
A	86.00%	Data	94.37%	98.28%	100.00%	98.31%	100.00%
B	2006	Target>=	88.00%	98.00%	98.00%	98.00%	98.00%
B	86.00%	Data	94.37%	98.28%	100.00%	100.00%	100.00%
C	2006	Target>=	94.00%	100.00%	100.00%	100.00%	100.00%
C	86.00%	Data	94.37%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2022	2023	2024	2025
Target A>=	98.00%	98.00%	98.00%	98.00%
Target B>=	98.00%	98.00%	98.00%	98.00%
Target C>=	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 advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

FFY 2022 SPP/APR Data

The number of families to whom surveys were distributed	74
Number of respondent families participating in Part C	68
Survey Response Rate	91.89%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	68
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	68
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	67
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	68
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	67
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	68

Measure	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	100.00%	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%	98.53%	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%	98.53%	Did not meet target	Slippage

Provide reasons for part C slippage, if applicable

One question on 2 different surveys that were not answered impacted the overall response rate drastically. The VI ITP has a small population of families enrolled.

Sampling Question	Yes / No
Was sampling used?	NO

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

Response Rate

FFY	2021	2022
Survey Response Rate	94.74%	91.89%

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 and toddlers on St. Thomas/St. John and St. Croix.

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

The ITP used the ECTA calculator to determine any non-response bias. The calculator did not demonstrate non-response bias for the FFY2022 data for this indicator in the St. Thomas District. In the St. Croix district there was non-response bias in the African American category. In the St. Thomas district target representation was 80% compared to actual of 81%, a difference of 1%. In the St. Thomas district target representation was 65% compared to actual of 90%, a difference of 25%.

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

YES

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 91.89%. The decrease in response rate is attributed to transition meetings with DOE and DHS continuing to be conducted virtually. 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. 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 response rate did identify cases of nonresponse bias in the St. Croix district. The VI ITP will work with the TA centers to get a better understanding of what actions can be taken to reduce the indentified bias in the African American demographic.

Provide additional information about this indicator (optional).

4 - Prior FFY Required Actions

None

4 - OSEP Response

In its description of its FFY 2022 data, the Virgin Islands did not address whether the response group was representative of the demographics of infants and toddlers enrolled in the Part C program. Specifically, the Virgin Islands reported, "The ECTA Calculator determined that our data was representative of all infants and toddlers on St. Thomas/St. John and St. Croix."

When reporting the extent to which the demographics of infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, the Virgin Islands did not include race/ethnicity in its analysis, as required by the Measurement Table.

4 - Required Actions

In the FFY 2023 SPP/APR, the Virgin Islands must include its 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 by race/ethnicity and at least one other demographic category approved through the stakeholder input process, as required by the Measurement Table. Additionally, the Virgin Islands must report whether its FFY 2023 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the Virgin Islands is taking to address this issue.

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	2017	2018	2019	2020	2021
Target >=	1.48%	1.48%	1.48%	1.48%	1.48%
Data	0.42%	0.96%	1.38%	1.08%	0.54%

Targets

FFY	2022	2023	2024	2025
Target >=	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 advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 1 with IFSPs	15
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 1	1,092

FFY 2022 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
15	1,092	0.54%	1.48%	1.37%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Data Source

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (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	2017	2018	2019	2020	2021
Target >=	2.70%	2.70%	2.70%	2.70%	2.70%
Data	1.52%	1.76%	1.79%	1.81%	3.68%

Targets

FFY	2022	2023	2024	2025
Target >=	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 advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 3 with IFSPs	132
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 3	2,798

FFY 2022 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
132	2,798	3.68%	2.70%	4.72%	Met target	No Slippage

Provide additional information about this indicator (optional).

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

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

Data Source

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

Measurement

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

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

Instructions

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

Targets must be 100%.

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

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

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

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

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	99.10%	99.59%	100.00%	100.00%

Targets

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

FFY 2022 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
230	243	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.

13

Provide reasons for delay, if applicable.

Reasons for delay continue to be difficulty with contacting parents who change telephone numbers without notification as well as not keeping appointments. Some families travel without notifying the ITP as well.

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, 2022 to June 30, 2023

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, 2022 to June 30, 2023

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

7 - Prior FFY Required Actions

None

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

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

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

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

FFY 2022 SPP/APR Data

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

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
122	122	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, 2022 to June 30, 2023.

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, 2022, to June 30, 2023.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8A - Prior FFY Required Actions

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

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

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

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

FFY 2022 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
122	122	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.

0

Provide reasons for delay, if applicable.

Describe the method used to collect these data.

The Infants & Toddlers Program utilized the upgraded Excel database to review the children with IFSPs from July 1, 2022 to June 30, 2023.

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, 2022 to June 30, 2023.

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, 2022 to June 30, 2023.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8B - Prior FFY Required Actions

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.

Response to actions required in FFY 2021 SPP/APR

The Infants & Toddlers Program utilized the upgraded Excel database to review the children with IFSPs from July 1, 2021 to June 30, 2022.

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

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

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

Data Source

Data to be taken from monitoring or State data system.

Measurement

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

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

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

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

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

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	94.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	76.06%	100.00%	100.00%	100.00%	100.00%

Targets

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

FFY 2022 SPP/APR Data

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

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
107	122	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.

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.

15

Provide reasons for delay, if applicable.

Although the families agreed to meet with Part B for the transition meetings several families decided not to attend without notifying the Service Coordinator. The Program tried to contact the families to reschedule the transition meetings but the family was unavailable to reschedule within the 90 day window.

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, June 1, 2022 to July 30, 2023.

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, 2022 to June 30, 2023.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8C - Prior FFY Required Actions

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.

YES

Provide an explanation of why it is not applicable below.

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

OSEP notes that this indicator is not applicable.

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 report them in the corresponding SPP/APR.

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

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

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

10 - Indicator Data

Select yes to use target ranges

Target Range not used

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

NO

Prepopulated Data

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

Targets: Description of Stakeholder Input

The Virgin Islands Infants and Toddlers stakeholders consist of members of the VI Interagency Coordinating Council (VI-ICC), who advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2017	2018	2019	2020	2021
Target>=					

Data					

Targets

FFY	2022	2023	2024	2025
Target>=				

FFY 2022 SPP/APR Data

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

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Indicator 11: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

11 - Indicator Data

Section A: Data Analysis

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

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.

www.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	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	43.50%	43.50%	43.50%	43.50%

FFY 2022 SPP/APR Data

Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
26	62	40.58%	43.50%	41.94%	Did not meet target	No Slippage

Provide the data source for the FFY 2022 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 Excel database with the embedded formulas to calculate the required result.

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)

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.

Currently, the DOH website is being redesigned and updated. Unfortunately when the update was made the Webmaster failed to transfer the ITP's most recent information to the new page. The PIO was made aware and is currently working on getting the problem rectified.

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 began the process of hiring two Service Coordinators in the St. Croix district. One Service Coordinator was hired in September 2022. The candidate chosen for the second vacancy declined and the process to recruit began again. An ICC member is part of the interview team for all new hires for the ITP. The VI ICC Facebook page has been operational with updates made as needed. Several EI providers and families participated in training from the OneOp Program. The organization offered virtual webinars and Continuing Education Credits were offered. The Presenters were faculty and Ph.D. students from the University of Illinois.

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 Excel database continues to enable 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: Biweekly meetings are held with DaSy and ECTA. Currently, CiFR has begun to join the team in anticipation of the upcoming DMS monitoring.
FINANCE: The Third Party Fiduciary contract remains in effect providing financial monitoring and oversight. The Third Party Contract was renewed in November 2023. Lutheran Social Services has been informed of the DMS 2.0 monitoring that will begin in 2024 and hopefully end by 2027.
PROFESSIONAL DEVELOPMENT: ASQ training was provided. The St. Thomas Service Coordinator held a training for the St. Thomas EI Providers to assist with completing the Child Outcome Summary Forms. This training will also be offered to St. Croix EI Providers.

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 now has a full complement of staff. The second Service Coordinator on St. Croix was hired and onboarded in December 2023. The Program Administrator position is also filled. That staff position will serve as the immediate supervisor for all Service Coordinators.
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/ECTA TA providers.
Explore ways to increase ICC stakeholder engagement.
Submit new ICC recommendations to the Governor for appointments.
Appoint new ICC members
Develop a schedule to visit the Day Care Centers and Pediatric offices to increase Child Find
Create one-page flyers to distribute to parents and providers to assist with understanding the ITP processes
Update the ITP brochure

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

The Court Improvement Program in collaboration with the Department of Human Services, Children and Family Services hosted the U.S. VI Child Welfare Academy. The two-day multi-disciplinary event featured panels and speakers on Child Development, Safety, Permanency, and Well-Being in the U.S. Virgin Islands.

UVI launched a professional development series in early childhood special education:
Autism
Working with challenging behaviors

Office of Child Care & Regulatory Services offered Professional Development which focused on discussing Speech and Language Disorders.

Provide a summary of each evidence-based practice.

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.

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

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.

Based on the results of the SiMR in this APR period, there is a continued need for offering evidence-based practices to the EI Providers.

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

The VI ITP will continue to work with the TA Centers to identify evidence based trainings. in 2023 the several EI providers participated in an ASQ training.

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.

The ITP will work with the TA Centers for assistance with creating an outline of the changes to be implemented.

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 advise and assist the ITP regarding the provision of early intervention services for children with disabilities from birth to three and other child development agencies. 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. In 2024, new members from the mandated government agencies will be recruited as well as additional parent members. There were meetings held in December 2022, February 2023, May 2023, and August 2023. The grant application and the APR were presented to and discussed with the members to obtain stakeholder input. Suggestions were offered concerning advertising and staffing as well as information for possible sites for the relocation of the St. Croix office. The ITP Director also serves on the Project Launch Young Child Wellness Advisory Council. One such council meeting was held in January 2023 where the implementation of the ASQ was discussed. Implementing the ASQ as early as possible helps to ensure that children enter school with better social and emotional skills. Quarterly Interagency meetings are held with the DOE, DOH, and DHS to ensure that the Interagency Transition Agreement is being followed, ensuring that children are being transitioned timely. Any concerns by any of the departments involved are addressed during this time. The Director for the ITP attends monthly Children & Youth Task Force meetings. The Children and Youth Task Force focuses on the well-being of children and families, including disaster preparedness, climate change adaptation, and human trafficking. The meeting also includes updates from federal partners, the Department of Human Services, other government agencies, and community-based organizations highlighting the importance of collaboration and preparedness in responding to disasters and supporting children and families. The ITP also collaborates with the University of the Virgin Islands via one of the ICC members, who is the Dean of Education and a licensed SLP. 2024 ICC meetings are scheduled for February, May, August, and November.

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 Maternal Child Health was held to revise and update the outdated MOU. There will be an increase in outreach activities to the various entities that are the main referral sources.

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

NO

Additional Implementation Activities

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

The ITP facilitated training for the Service Coordinators and EI Providers to learn the ASQ for implementation during the intake process when children are referred. The ASQ will also be administered when the annual IFSP reviews are due. This will assist the parents with a better understanding of how the EI Providers are improving the children's functioning to be closer to their same-aged peers in the acquisition and use of their knowledge and skills.

The University of the Virgin Islands offers Act Early VI Professional Development Series - Upcoming
Includes: Working with challenging behaviors, EHDI and Hearing Health, Parent Advocacy, Division for Early Childhood (DEC) Recommended Practices

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

The data collection and measures will be ongoing. Weekly meetings continue with the Service Coordinators to discuss challenges and to discuss ideas for improvements. Professional development webinars and activities will be offered to staff and EI Providers.

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

The St. Croix district continues to experience infrastructure barriers to carrying out the mandates of the ITP program. In September 2022 DOH hours of operation were curtailed due to environmental factors. Sargassum seaweed has plagued much of the Caribbean including the VI. As the St. Croix offices are near the coastline the odor resulting from the dead seaweed caused some staff to become ill and DOH needed to curtail the hours of operation. Also in September 2022, Tropical Storm Fiona was a possible threat to the VI resulting in the closure of offices until the threat was diminished. January 2023 the DOH St. Croix on St. Croix lost the ability to conduct business using the telephone landlines. The problem could not be rectified and the ITP began the process of securing cell phone usage for the Service Coordinator to contact families. September 2023, all DOH programs were required to move out of the modular units that were erected after the 2017 hurricanes. Most programs are currently renting spaces or teleworking. The ITP was graciously given an office space for at least one SC and the other is teleworking as needed. The Department anticipates a semi-permanent solution within the next 3-4 months.

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 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.

Response to actions required in FFY 2021 SPP/APR

11 - OSEP Response

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

The Virgin Islands did not provide the numerator and denominator descriptions in the FFY 2022 SPP/APR Data table.

The Virgin Islands did not summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity.

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

The Virgin Islands did not provide an Evaluation Plan.

11 - Required Actions

The Virgin Islands did not report on all of the required components of this indicator. In the FFY 2023 SPP/APR, the Virgin Islands must report on all the required components of this indicator, consistent with the Measurement Table.