

# **STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C**

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

**For reporting on  
FFY 2019**

**Puerto Rico**



**PART C DUE  
February 1, 2021**

**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 Puerto Rico Early Intervention Program – Avanzando Juntos resides within the Maternal, Child and Adolescents Health Division of the Department of Health. The State Office Team is comprised by the Part C Coordinator, the Program Evaluator, a Data Manager, a Child Development Consultant and soon, a Family Liaison. There are seven regional programs led by regional supervisors in which early interventions services are provided island-wide. The Program has a technical assistance system implemented where the Child Development Consultant is the lead and works closely with the Supervision and Monitoring Unit (SMU) to coordinate TA activities based on data and needs identified through monitoring and data collection activities. Direct consultations from the service providers and discussions in monthly meetings with the regional supervisors are also methods to identify areas for technical assistance. Information from several TA Centers are also used, distributed and discussed in order to ensure the timely delivery of high quality, support to our regional programs. As required, the PREIP has a professional development system, also led by the Child Development Consultant. For this component, the UPR UCEDD is our academic/scientific partner, and collaborates as requested. Regular meetings are scheduled with the SICC, in which the PREIP State Office Team discusses important information in order to design strategies for improvement and set targets for the results indicators. Targets for FFY 2019 were discussed with this group that brings together the most important EIP stakeholders after thorough data analysis carried out by the SMU.

The jurisdiction had a few events that impacted data for this year. Months before the coronavirus pandemic was declared, Puerto Rico was hit by earthquakes in the southwest part of the island, although the impact was deeper in these areas, where people experienced homelessness and other necessities, the events affected other parts of the island as well. As the COVID-19 pandemic hit, the Government of Puerto Rico enforced a lock down from March 16th, 2020 and in-person visits were not allowed. Consecutive Executive Orders were issued extending the lock down period as COVID-19 related data was released forcing the State Office to design a new system for virtual service delivery, a first for Puerto Rico. The territory did not have an infrastructure in place for telemedicine so several barriers were encountered as the new protocol was designed. As OSEP encouraged states to continue providing services, in our case, to infants and toddlers with developmental delays and their families, the state team worked tremendously on complying. In order to establish the new system, weekly meetings were held with the regional supervisors with the purpose of receiving feedback. Services have transitioned to teleinterventions following the territory's guidelines and Executive Orders. The pandemic has impacted the Program, as the child count is at a historic low (this is FFY2020 data already collected) child find activities and referrals were interrupted for several weeks at the end of the fiscal year, and slippage is noted on indicators 3, 4 and 6. A few reasons for slippage come into play, but teleworking, virtual services, and the lower number of referrals when compared with previous fiscal years or the lack of, have put the PREIP in a new situation where evaluation, data-driven decision making, reflection and reinvention is called for. It is the mission and the duty of the PREIP to deliver high quality, evidenced-based early intervention services that are timely and adequate to infants and toddlers birth to three and their families.

#### Additional information related to data collection and reporting

Federal Fiscal Year 2019-2020 saw changes in the data collection methods in some of the indicators due to the COVID-19 pandemic. The new methods were implemented as the Program had to adapt to changes caused by the Executive Orders that enforced lock downs since March 2020. All services and processes transitioned to Telehealth and several data collection methods were also carried out in the new modality. Nevertheless, the Supervision and Monitoring Unit (SMU) was able to conduct on-site monitoring and APR data collection activities as per usual.

Activities closely related to the SiMR, such as the training and implementation of the new eligibility tool, had to be delayed due to the pandemic.

#### General Supervision System

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

The Puerto Rico Early Intervention Program – Avanzando Juntos has a single line of authority for general administration and supervision, identification and coordination of resources, the development of procedures to ensure that services are provided in a timely manner and for the overall implementation of the minimum components required under IDEA Part C. The lead agency for PREIP is the Department of Health (PRDoH). The Program is located under the Maternal, Child and Adolescent Health Division and has seven regional offices island-wide within the seven health regions that comprise the Department. The State Office includes the Part C Coordinator, the Program Evaluator, the Data Manager and a Child Development Advisor. During this fiscal year, the PREIP started making arrangements to hire a Family Liaison set to lead the family engagement activities and strategies for one of the strands of action for indicator 11 – the State Systemic Improvement Plan (SSIP). The Coordinator is responsible for overseeing all the program's activities in order to ensure that early intervention services are being provided -- as required by the regulations -- to infants and toddlers with developmental delays that are determined eligible. The accountability and the identification of resources are also the Coordinator's responsibility. The Program Evaluator designs and implements data collection methods and leads the monitoring and evaluation activities conducted in all regional programs. The Data Manager works alongside the Evaluator, collecting data from those regional programs and making sure that these are precise and reliable in order to complete all mandatory reports and also, to help guide the Program's data-driven decision-making processes. The Child Development Advisor who is a developmental pediatrician, ensures continuous support to service providers and shares his expertise in the implementation of routine based strategies, and other evidence-based practices and models as appropriate.

Each of the seven (7) regional programs is led by a regional supervisor who is responsible for the intake and service coordinators' supervision. The regional supervisor also facilitates the implementation of strategies to support children with disabilities and their families to improve their outcomes by overseeing all the regional program's activities, including data collection as designed by the Evaluator and reporting back to the state office. The Supervision and Monitoring Unit (SMU) comprised by the Evaluator and Data Manager, schedule regular visits to the regional programs where technical assistance and monitoring activities are carried out. These activities include record review and guidance to the personnel based on monitoring results and data analysis from other reports submitted to the SMU on a regular basis. A data submission calendar is developed and shared with regional programs in order to ensure timely data submission, a component that is evaluated in order to issue local regional determinations. Monitoring activities to gather APR data occur once a year between August and September, after the fiscal year that is being evaluated ends. These are SMU on-site visits in which a random sample of records is selected for review. If events of non-compliance are detected, the Program Evaluator and Data Manager explain the reasons the SMU will issue a finding of non-compliance and will provide a set of recommendations to improve performance. This allows supervisors to design and implement strategies to ensure compliance. Regular submission of COS and family outcomes data are also evaluated, and the SMU regularly engages in data quality activities to ensure that the data are valid and reliable. Collection of dispute resolutions data is also included in the monitoring activities led by the SMU to ensure compliance with Part C due processes.

### **Technical Assistance System:**

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

The mechanisms for the Puerto Rico Early Intervention Program to ensure the timely delivery of high quality, evidenced based technical assistance and support to our regional programs are led by the Child Development Advisor who is a Pediatrician specialist in developmental pediatrics. The Advisor works closely with the Supervision and Monitoring Unit to address identified needs related with early intervention service provision strategies, development of functional outcomes in the IFSP, eligibility determination and assessments, as well as child outcomes data. The consultant has wide background in child development and knowledge of the IDEA norms, procedures and regulations, the Early Childhood Technical Assistance (ECTA) guidelines, DEC best practices and child outcomes measurement. These needs are identified either through monthly meetings with the regional supervisors, on-site monitoring activities, through data collection and analysis or other consultations that are made to the state office. Some of the trainings are tailored to the needs identified by a particular region, while other trainings are carried out with the purpose of continuing the support to all regional programs. Tools developed by the National Center for Systemic Improvement (NCSI), ECTA, the Center for Early Childhood Data Systems (DaSy), and information made available by OSEP are also included in the TA system, as the state office distributes, shares and discusses important topics as needed. The PRUCEDD/LEND program frequently collaborates with the PREIP and provides trainings as solicited. Periodic conference calls with technical assistance people from some of the TA centers are scheduled to discuss implementation of strategies to improve results and ensure continued support and high quality early intervention services. New strategies to strengthen this system has been thought out by the state office as needs continue to be identified. As the pandemic hit, the supports to regional personnel had to be more robust so weekly meetings with the supervisors were conducted. These had the purpose of designing the system to provide virtual early intervention services. The Teleinterventions Protocol for Early Intervention Services was developed as information was made available by OSEP and the TA Centers. The regional supervisors were the backbone to the implementation of the protocol as they had the duty of training service coordinators and other regional personnel on the new modality. Feedback from the regions was collected in order to modify and improve, the TA system, as well as the all services within the Program.

### **Professional Development System:**

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

The Child Development Advisor is the person within the State Office who is in charge of training service providers on topics around the delivery of services in natural environments to improve results for infants and toddlers with developmental delay and their families. Trainings are usually provided on-site in each EI regional Program or at the State Office. Regional supervisors meet monthly with the Part C coordinator to discuss providers' performance in natural environments, COS ratings, and data collection methods such as the use of the decision tree to improve outcomes for children and families. These meetings result in the design and implementation of new strategies and technical assistance meetings in order to improve those areas. The consultant gathers their input and coordinates meetings at the regional offices to provide technical assistance and continuous training to ensure that providers have the skills to effectively provide services that improve results for infants and toddlers with disabilities and their families. As part of the State Systemic Improvement Plan, PR EIP established and has maintained an agreement with the Puerto Rico University of Puerto Rico UCEDD/LEND program to serve as the early intervention system scientific partner. With this collaboration, the system personnel will receive the latest information and in service training in evidence based practices that can be translated in strategies to ensure high quality services for the children and families. During FFY 2019 the PREIP started discussions to change the tool used in evaluations of eligibility determination. The Coordinator had meetings with the team in order to choose the most convenient tool for the jurisdiction. After the tool was selected and purchased, the team had meetings with the PRUCEDD team to guide them to elaborate a proposal for the trainings for all EIP personnel on the new tool. The proposal was submitted to the Program and was on its way of being accepted when a lock down was announced on March 15th, 2020 due to the COVID-19 pandemic. As everything in the territory shut down and everyone was teleworking, these efforts were delayed. Soon after people began to return to the offices, the process of reviewing and accepting the proposal resumed. The PREIP plans to start these trainings in around March 2021.

#### **Stakeholder Involvement:**

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

The Puerto Rico State Interagency Coordination Council (PRSIICC) is the group that brings together the main PREIP stakeholders. The group is composed of representatives of the Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children's Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service Community-Based Organization), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service Community-Based Organization), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services (EDIS). During FFY 2019-2020, the SICC worked together in 1 meeting to provide input on issues regarding personnel development, SSIP, compliance with IDEA requirements and other collaboration activities. Specifically, the January 27th, 2020 meeting was convened to discuss and analyze the data and information included in the APR to be submitted February 1st. The members of the Council were provided with the data and discussion was held around strategies to improve data collection and results around some of the indicators. The stakeholders suggested to start the discussions towards strengthening the child find infrastructure as well as rethinking strategies for increasing the number of questionnaires returned for indicator 4 - Family Outcomes. The work group was engaged in discussions around the differences between regional programs and their impacts on service delivery, data and results.

Starting FFY 2019, a change in leadership in the state office delayed convening meetings the first semester of the fiscal year. A new meeting was coordinated for May 2020 but could not be held due to a lockdown in the island because of the COVID-19 pandemic since March 16, 2020. The SICC held its next meeting on September 11th, 2020. Discussions held during that meeting were aimed at knowing how the program transitioned from in-person visits in natural environments to virtual teleinterventions, how families were coping and how the personnel were adjusting to the new modality. The objective was to identify areas for improvement and provide input on new and existing strategies. The SICC also provides feedback about the State Determination issued by OSEP and discusses recommendations for new strategies to improve all Programs' areas as needed.

#### **Apply stakeholder involvement from introduction to all Part C results indicators (y/n)**

YES

#### **Reporting to the Public:**

**How and where the State reported to the public on the FFY 2018 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 2018 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2018 APR in 2020, is available.**

As required, the PREIP makes publicly available all data and information regarding all regional Early Intervention Programs performance in all compliance and results indicators. The FFY 2018 APR and the Public Reporting can be found using the link below:

### **Intro - Prior FFY Required Actions**

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State's capacity to improve its SiMR data.

### **Response to actions required in FFY 2018 SPP/APR**

#### **Intro - OSEP Response**

Puerto Rico Interagency Coordinating Council (ICC) 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 ICC noted it has elected to support Puerto Rico's lead agency 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 Puerto Rico's SPP/APR documents.

#### **Intro - Required Actions**

OSEP notes that one or more of the Indicator 11 attachments included in Puerto Rico's FFY 2019 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, Puerto Rico must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

### Data Source

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

### Measurement

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

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

### Instructions

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

Targets must be 100%.

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	80.50%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.37%	99.46%	100.00%	97.81%	93.94%

### Targets

FFY	2019
Target	100%

### FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
240	263	93.94%	100%	98.48%	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.*

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**Include your State's criteria for "timely" receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).**

Puerto Rico's criterion to consider that early intervention services were delivered in a timely manner is that the period from parent consent at the IFSP meeting to the date of service provision is 30 days or less. During monitoring and data collection activities, the Supervision and Monitoring Unit (SMU) randomly selects records to be reviewed, and specifically, the IFSP date and the date of service provision in the service provider's progress notes are taken into account. This includes the initial IFSP and subsequent revisions. If there is a case where services were provided after the 30-day deadline, the program evaluator will then look for the reasons of delay to further classify the events of non-compliance as extraordinary family circumstances or of program related causes.

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

State monitoring

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

The PREIP does not sample the regional programs for monitoring activities; all programs are included in data collection and monitoring activities all year around. The SMU selects a random sample of records from all regional programs as the source of data for this indicator. The Puerto Rico Part C team selected the records for the evaluation of Indicator 1 according to the date of the IFSP meeting. The inclusion criterion was that the IFSP had to be developed between July 1st, 2019 and June 30th, 2020. SPP/APR data collection activities are conducted every year from August to September, after the fiscal year ends. The SMU uses the child count data regional programs submit to the state office to produce a list of records that fall within the inclusion criterion for this indicator. Based on the population, a random sample size is calculated using the web-based tool, OpenEpi and, a list of random numbers is created using the random numbers module of the same tool. Records are chosen matching the number from the random numbers list to the record number from the child count report. For all regional programs, data were collected through on-site monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors as an important process of education and corrective actions that take place. Non-compliance events are also shared and explained to the supervisor. After the on-site data collection is completed, the SMU performs the analysis and, if necessary, phone calls with the regional supervisors are scheduled with the purpose of asking for additional information. Documented exceptional family circumstances that prevented timely provision of services are included in the numerator and denominator to calculate the data.

**If needed, provide additional information about this indicator here.**

The SMU identified four (4) cases of non-compliance due to program related causes in 4 regional programs. In the Arecibo Program, the date of service provision was mistakenly selected to be 31 days after the parents' consent the day the IFSP was developed. Therefore, the service was provided after the 30-day deadline with no documented exceptional family circumstances. On the other hand, the Fajardo regional program was affected by a delay in the process of contracting the private corporations of service providers with the Department of Health. As a result, a case of non-compliance was identified where the service was provided 51 days after the IFSP was developed. Another case of non-compliance was identified in the Mayagüez regional program where the service was provided 48 days after the IFSP meeting. The service provider who had the case assigned resigned, which caused the delay in service provision. The 4th case of non-compliance was identified in the Ponce regional program, where the service provider canceled the visit due to personal circumstances. The visit was later rescheduled but the service was provided 34 days after the parents' consent.

**Correction of Findings of Noncompliance Identified in FFY 2018**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
14	14	0	0

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

Regional supervisors are responsible for implementing strategies to avoid delays in service delivery. For the current reporting period, after Puerto Rico received its determination letter, the SMU developed local determination letters that informed the regional programs of the findings of non-compliance identified in monitoring activities. When findings of non-compliance were identified, the SMU requested the regional programs to develop a Corrective Action Plan (CAP) in which the details of the findings, strategies to be implemented, the expectations from the regional program regarding implementation of the regulatory requirements, the resources, and the timeline to completion are included. These are also topics of discussions held in the supervisor's monthly meetings and other direct technical assistance activities.

We reviewed updated data by convenience-sampling during subsequent on-site monitoring activities in order to ensure that the regional programs are correctly implementing the regulatory requirements related to timely service delivery. These activities were conducted only on the centers that had findings of non-compliance during the previous year. When we found that there were no further findings of non-compliance, the SMU concluded that the program is correctly implementing the regulatory requirements. When findings of noncompliance persisted, the SMU scheduled follow-up visits to review more records and provided technical assistance to the regional supervisor and other personnel.

During FFY 2018, the SMU identified fourteen (14) findings of non-compliance in six (6) regional programs. The state office reviewed updated data on all regional programs that had non-compliance and, and that review reflected no additional findings of non-compliance. Therefore, based on that review, the state concluded that it achieved 100% compliance of the regulatory requirements.

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

These individual cases were thoroughly discussed with the supervisors of the regional programs that were the source of non-compliance and were included in the regional determinations. The regional supervisors implemented or strengthened strategies in order to ensure timely service provision. The SMU verified through record review in on-site monitoring activities, that all 14 findings of non-compliance reported in FFY 2018 were corrected within one year. Although services began later than 30 days after the IFSP was developed, all children received the services stipulated in the IFSP, and thus these cases are classified as corrected.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

<b>Year Findings of Noncompliance Were Identified</b>	<b>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR</b>	<b>Findings of Noncompliance Verified as Corrected</b>	<b>Findings Not Yet Verified as Corrected</b>
0			
0			
0			

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

**1 - Required Actions**

Because Puerto Rico reported less than 100% compliance for FFY 2019, Puerto Rico must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, Puerto Rico must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 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 2020 SPP/APR, Puerto Rico must describe the specific actions that were taken to verify the correction.

If Puerto Rico did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why Puerto Rico did not identify any findings of noncompliance in FFY 2019.

## 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 EDFacts Metadata and Process System (EMAPS)).

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	99.70%

FFY	2014	2015	2016	2017	2018
Target>=	99.81%	99.82%	99.82%	99.83%	99.83%
Data	99.92%	100.00%	100.00%	100.00%	100.00%

### Targets

FFY	2019
Target>=	99.85%

### Targets: Description of Stakeholder Input

The Puerto Rico State Interagency Coordination Council (PRISICC) is the group that brings together the main PREIP stakeholders. The group is composed of representatives of the Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children's Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service Community-Based Organization), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service Community-Based Organization), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services (EDIS). During FFY 2019-2020, the SICC worked together in 1 meeting to provide input on issues regarding personnel development, SSIP, compliance with IDEA requirements and other collaboration activities. Specifically, the January 27th, 2020 meeting was convened to discuss and analyze the data and information included in the APR to be submitted February 1st. The members of the Council were provided with the data and discussion was held around strategies to improve data collection and results around some of the indicators. The stakeholders suggested to start the discussions towards strengthening the child find infrastructure as well as rethinking strategies for increasing the number of questionnaires returned for indicator 4 - Family Outcomes. The work group was engaged in discussions around the differences between regional programs and their impacts on service delivery, data and results.

Starting FFY 2019, a change in leadership in the state office delayed convening meetings the first semester of the fiscal year. A new meeting was coordinated for May 2020 but could not be held due to a lockdown in the island because of the COVID-19 pandemic since March 16, 2020. The SICC held its next meeting on September 11th, 2020. Discussions held during that meeting were aimed at knowing how the program transitioned from in-person visits in natural environments to virtual teleinterventions, how families were coping and how the personnel were adjusting to the new modality. The objective was to identify areas for improvement and provide input on new and existing strategies. The SICC also provides feedback about the State Determination issued by OSEP and discusses recommendations for new strategies to improve all Programs' areas as needed.

The PRISICC members are aware of the requirement of providing early intervention services in natural environments to extend possible, and agree that the PREIP continue to implement strategies to do so. All regional personnel are trained and supported in this regard, hence, achieving 100% performance and meeting the target.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	2,555
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Total number of infants and toddlers with IFSPs	2,555

**FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
2,555	2,555	100.00%	99.85%	100.00%	Met 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 Puerto Rico State Interagency Coordination Council (PRSIICC) is the group that brings together the main PREIP stakeholders. The group is composed of representatives of the Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children’s Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service Community-Based Organization), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service Community-Based Organization), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services (EDIS). During FFY 2019-2020, the SICCC worked together in 1 meeting to provide input on issues regarding personnel development, SSIP, compliance with IDEA requirements and other collaboration activities. Specifically, the January 27th, 2020 meeting was convened to discuss and analyze the data and information included in the APR to be submitted February 1st. The members of the Council were provided with the data and discussion was held around strategies to improve data collection and results around some of the indicators. The stakeholders suggested to start the discussions towards strengthening the child find infrastructure as well as rethinking strategies for increasing the number of questionnaires returned for indicator 4 - Family Outcomes. The work group was engaged in discussions around the differences between regional programs and their impacts on service delivery, data and results.

Starting FFY 2019, a change in leadership in the state office delayed convening meetings the first semester of the fiscal year. A new meeting was coordinated for May 2020 but could not be held due to a lockdown in the island because of the COVID-19 pandemic since March 16, 2020. The SICCC held its next meeting on September 11th, 2020. Discussions held during that meeting were aimed at knowing how the program transitioned from in-person visits in natural environments to virtual teleinterventions, how families were coping and how the personnel were adjusting to the new modality. The objective was to identify areas for improvement and provide input on new and existing strategies. The SICCC also provides feedback about the State Determination issued by OSEP and discusses recommendations for new strategies to improve all Programs’ areas as needed.

This is the third federal fiscal year that it was required for the States to report child outcomes data on all children exiting Part C. The EIP kept implementing strategies to ensure the regional programs were gathering the data to report on this indicator, such as monthly follow up and consultation with regional personnel as needed. At the time of the analyses, the SMU matched the number of children exiting Part C as submitted in the 618 Exiting Data report to the number of children with COS data reported by the regional programs. If data were missing or data quality issues arose, further clarifications and more data were requested to the regional program. In instances where the service provider was no longer part of the EIP, the family moved out of the jurisdiction, or exited Part C because of several unsuccessful attempts of contact, the regional nurse was responsible of collecting the data and filling out the form using all the information gathered in the file. Data entry personnel was responsible to fill out the Excel form with the data so that the regional supervisor can submit it to the state office as required. These efforts have allowed the PREIP to continue collecting and reporting 100% of the COS data.

As known, the COVID-19 pandemic hit early in 2020 impacting the health, life and activities of people around the globe. The PREIP is no exception, with services having to be delivered virtually after thorough analysis and system design and implementation by the state office and the regional programs as well. In March 2020, a lock down was enforced and all work had to be done remotely. This event had a effect on the number of service providers that were available, and the number of children with COS data that was submitted to the regional programs. Following safety guidelines that were required state-wide, regional nurses gathered all the information on the files to complete the forms so that regional supervisors could submit the reports to the State Office. During that time, it required a tremendous amount of work, and although the 100% target was met, the percentages in all outcomes decreased when compared to FFY 2018. Between March 16th and June 30th, 2020 (the period when Puerto Rico enforced the lock down to the end of the fiscal year), 6% of the children had the same or lower exit COS scores than entry COS scores, when taking into account all outcomes. Additionally, for children that exited the program during the second semester of the FY, 12% had the same or lower scores at the time of exit. It is important to emphasize that the island started year 2020 with a series of earthquakes that mainly impacted the southwest area, but its effects were felt throughout the territory. That meant that some families exited due to unsuccessful attempts of contact or parent withdrawal as many families experienced homelessness and other pressing needs. On the other hand, 24% of children exiting in FFY 2019 had the same or lower scores. This represents a big difference from a 16% for FFY 2018. Certainly, these events deeply impacted child outcomes in the island. Nevertheless, the SMU agreed on looking into the procedures and steps that regional teams take to collect COS data to verify if data issues arose. The teams were asked for additional information with the purpose of identifying possible areas of need to design new technical assistance strategies or to improve the existing ones. The PREIP is committed to identify all possible sources for child outcomes lower than in FFY 2018, so the technical assistance system will be strengthened with new and updated training led by the Child Development Consultant, as well as the UPR UCEDD.

#### **Historical Data**

Outcome	Baseline	FFY	2014	2015	2016	2017	2018
A1	2011	Target>=	43.80%	43.81%	43.82%	43.83%	43.84%
A1	39.40%	Data	65.68%	63.83%	67.11%	58.49%	58.59%
A2	2011	Target>=	57.00%	57.01%	57.02%	57.03%	57.04%
A2	53.90%	Data	76.24%	82.64%	85.14%	81.70%	84.31%
B1	2011	Target>=	46.64%	46.65%	46.66%	46.67%	46.68%
B1	32.50%	Data	71.10%	73.53%	76.03%	72.74%	71.55%
B2	2011	Target>=	34.69%	34.70%	34.71%	34.72%	34.73%
B2	18.70%	Data	52.45%	56.01%	56.04%	52.38%	53.45%
C1	2011	Target>=	38.03%	38.04%	38.05%	38.06%	38.07%
C1	28.30%	Data	63.10%	61.18%	63.54%	56.12%	56.98%
C2	2011	Target>=	51.36%	51.37%	51.38%	51.39%	51.40%
C2	43.90%	Data	71.74%	77.94%	80.75%	76.62%	77.81%

#### Targets

FFY	2019
Target A1>=	58.60%
Target A2>=	84.21%
Target B1>=	71.56%
Target B2>=	53.46%
Target C1>=	56.98%
Target C2>=	77.82%

#### FFY 2019 SPP/APR Data

##### Number of infants and toddlers with IFSPs assessed

2,638

##### 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	33	1.25%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	339	12.85%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	75	2.84%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	326	12.36%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,865	70.70%

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 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	401	773	58.59%	58.60%	51.88%	Did Not Meet Target	Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	2,191	2,638	84.31%	84.21%	83.06%	Did Not Meet Target	Slippage

### **Provide reasons for A1 slippage, if applicable**

Data for indicator 3, Outcome A1 show that the jurisdiction had a lower performance when compared with FFY 2018 and did not meet the target set for FFY 2019. Targets were submitted last fiscal year and were selected after thorough analysis of data collected for previous years. Since FFY 2015, data for this indicator met and surpassed the targets submitted, while percentages of data completion were rising. Through the years, the PREIP has implemented strategies to collect more COS data that would lead to more robust data for the indicator and would show the reality for the child outcomes each fiscal year. Since targets were exceeded each year in all outcomes, even when back-to-back hurricanes made landfall in the island, the PREIP State Office decided to rise the targets for FFY 2019 taking into account the data for FFY 2018. The targets for all outcomes have proved to be higher than what the PREIP could achieve, especially when the program had to deal with the direct consequences of earthquakes and a pandemic.

Prior to the COVID-19 pandemic, all early intervention services in PR were provided as in-person visits, with no infrastructure of telehealth. As a lockdown was enforced in March 13th, 2020, all services were interrupted while the Government was working to share next steps with the population and the EIP State Team worked on a protocol that would allow for virtual services to be provided. As the protocol was distributed and discussed, some service providers did not want to continue providing services as only the virtual modality was allowed. After March 2020, the PREIP had 29% less service providers than in February 2020 which accounted for the most drastic decrease in the number of service providers in the program. Personnel turnover presented barriers for collecting the data, as regional nurses had to complete the forms with only the information that was available in the records. Information was sometimes incomplete due to the turnover. It is important to emphasize that regional nurses are not the children's primary service providers; therefore, they have no additional information on their progress. This could mean that in some cases, COS ratings may not be reflecting the reality of the child's progress. Personnel turnover while in lockdown, meant less opportunities for formal training for the new service providers that had no previous experience with the COS data collection and reporting process. Regional nurses had the duty to virtually train the new service providers. In order to ensure collection of reliable data, the Supervision and Monitoring Unit (SMU) asked the regional programs to review the data submitted, especially data that showed differences of 3 or more COS categories between entry and exit, since this could mean data quality issues. Regional programs were able to provide additional information that would justify the COS ratings, therefore, if there were no errors in the previous submission, no changes were made to the data. Data analyses conducted show that 24% of children that exited the program in FFY 2019 had exit COS ratings equal or lower than entry ratings versus 16% in FFY 2018. Similarly, 12% of children that exited the program between January and June 2020 had exit COS ratings equal or lower than entry ratings, compared with 8% of children that exited the program between January and June 2019. FFY 2019 data for Outcome A show an increase of 1.67% in the progress category b versus a decrease of 2.59% in category d when compared with the same categories in FFY 2018. This led to a worsening in performance and inability to meet the target. Possible reasons are service interruption due to the COVID-19 lockdown and barriers for COS data collection in the regional programs.

Currently, the PREIP is working on the planning stage of training sessions that will be provided to the personnel, including regional supervisors and nurses, service coordinators and service providers, to acquire the skills for the administration of the new eligibility tool, the AEPS 2nd edition. These training sessions will also include topics on COS data collection using data gathered from the new tool and the implementation of best practices to report valid and reliable data. Additionally, the state office team started to conduct virtual round tables with the service providers led by the Developmental Pediatrics Consultant in order to explore areas of opportunity for designing and implementing new strategies for personnel retention and training.

### **Provide reasons for A2 slippage, if applicable**

Data for indicator 3, Outcome A2 show that the jurisdiction had a lower performance when compared with FFY 2018 and did not meet the target set for FFY 2019. Targets were submitted last fiscal year and were selected after thorough analysis of data collected for previous years. Since FFY 2015, data for this indicator met and surpassed the targets submitted, while percentages of data completion were rising. Through the years, the PREIP has implemented strategies to collect more COS data that would lead to more robust data for the indicator and would show the reality for the child outcomes each fiscal year. Since targets were exceeded each year in all outcomes, even when back-to-back hurricanes made landfall in the island, the PREIP State Office decided to rise the targets for FFY 2019 taking into account the data for FFY 2018. The targets for all outcomes have proved to be higher than what the PREIP could achieve, especially when the program had to deal with the direct consequences of earthquakes and a pandemic.

Prior to the COVID-19 pandemic, all early intervention services in PR were provided as in-person visits, with no infrastructure of telehealth. As a lockdown was enforced in March 13th, 2020, all services were interrupted while the Government was working to share next steps with the population and the EIP State Team worked on a protocol that would allow for virtual services to be provided. As the protocol was distributed and discussed, some service providers did not want to continue providing services as only the virtual modality was allowed. After March 2020, the PREIP had 29% less service providers than in February 2020 which accounted for the most drastic decrease in the number of service providers in the program. Personnel turnover presented barriers for collecting the data, as regional nurses had to complete the forms with only the information that was available in the records. Information was sometimes incomplete due to the turnover. It is important to emphasize that regional nurses are not the children's primary service providers; therefore, they have no additional information on their progress. This could mean that in some cases, COS ratings may not be reflecting the reality of the child's progress. Personnel turnover while in lockdown, meant less opportunities for formal training for the new service providers that had no previous experience with the COS data collection and reporting process. Regional nurses had the duty to virtually train the new service providers. In order to ensure collection of reliable data, the Supervision and Monitoring Unit (SMU) asked the regional programs to review the data submitted, especially data that showed differences of 3 or more COS categories between entry and exit, since this could mean data quality issues. Regional programs were able to provide additional information that would justify the COS ratings, therefore, if there were no errors in the previous submission, no changes were made to the data. Data analyses conducted show that 24% of children that exited the program in FFY 2019 had exit COS ratings equal or lower than entry ratings versus 16% in FFY 2018. Similarly, 12% of children that exited the program between January and June 2020 had exit COS ratings equal or lower than entry ratings, compared with 8% of children that exited the program between January and June 2019. FFY 2019 data for Outcome A show an increase of 1.67% in the progress category b versus a decrease of 2.59% in category d when compared with the same categories in FFY 2018. This led to a worsening in performance and inability to meet the target. Possible reasons are service interruption due to the COVID-19 lockdown and barriers for COS data collection in the regional programs.

Currently, the PREIP is working on the planning stage of training sessions that will be provided to the personnel, including regional supervisors and nurses, service coordinators and service providers, to acquire the skills for the administration of the new eligibility tool, the AEPS 2nd edition. These training sessions will also include topics on COS data collection using data gathered from the new tool and the implementation of best practices to report valid and reliable data. Additionally, the state office team started to conduct virtual round tables with the service providers led by the Developmental Pediatrics Consultant in order to explore areas of opportunity for designing and implementing new strategies for personnel retention and training.

### **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	36	1.36%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	736	27.90%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	551	20.89%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,068	40.49%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	247	9.36%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	1,619	2,391	71.55%	71.56%	67.71%	Did Not Meet Target	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	1,315	2,638	53.45%	53.46%	49.85%	Did Not Meet Target	Slippage

**Provide reasons for B1 slippage, if applicable**

Data for indicator 3, Outcome B1 show that the jurisdiction had a lower performance when compared with FFY 2018 and did not meet the target set for FFY 2019. Targets were submitted last fiscal year and were selected after thorough analysis of data collected for previous years. Since FFY 2015, data for this indicator met and surpassed the targets submitted, while percentages of data completion were rising. Through the years, the PREIP has implemented strategies to collect more COS data that would lead to more robust data for the indicator and would show the reality for the child outcomes each fiscal year. Since targets were exceeded each year in all outcomes, even when back-to-back hurricanes made landfall in the island, the PREIP State Office decided to rise the targets for FFY 2019 taking into account the data for FFY 2018. The targets for all outcomes have proved to be higher than what the PREIP could achieve, especially when the program had to deal with the direct consequences of earthquakes and a pandemic.

Prior to the COVID-19 pandemic, all early intervention services in PR were provided as in-person visits, with no infrastructure of telehealth. As a lockdown was enforced in March 13th, 2020, all services were interrupted while the Government was working to share next steps with the population and the EIP State Team worked on a protocol that would allow for virtual services to be provided. As the protocol was distributed and discussed, some service providers did not want to continue providing services as only the virtual modality was allowed. After March 2020, the PREIP had 29% less service providers than in February 2020 which accounted for the most drastic decrease in the number of service providers in the program. Personnel turnover presented barriers for collecting the data, as regional nurses had to complete the forms with only the information that was available in the records. Information was sometimes incomplete due to the turnover. It is important to emphasize that regional nurses are not the children's primary service providers; therefore, they have no additional information on their progress. This could mean that in some cases, COS ratings may not be reflecting the reality of the child's progress. Personnel turnover while in lockdown, meant less opportunities for formal training for the new service providers that had no previous experience with the COS data collection and reporting process. Regional nurses had the duty to virtually train the new service providers. In order to ensure collection of reliable data, the Supervision and Monitoring Unit (SMU) asked the regional programs to review the data submitted, especially data that showed differences of 3 or more COS categories between entry and exit, since this could mean data quality issues. Regional programs were able to provide additional information that would justify the COS ratings, therefore, if there were no errors in the previous submission, no changes were made to the data. Data analyses conducted show that 24% of children that exited the program in FFY 2019 had exit COS ratings equal or lower than entry ratings versus 16% in FFY 2018. Similarly, 12% of children that exited the program between January and June 2020 had exit COS ratings equal or lower than entry ratings, compared with 8% of children that exited the program between January and June 2019. FFY 2019 data for Outcome B show an increase of 3.58% in the progress category b versus a decrease of 3.61% in category d when compared with the same categories in FFY 2018. This led to a worsening in performance and inability to meet the target. Possible reasons are service interruption due to the COVID-19 lockdown and barriers for COS data collection in the regional programs.

Currently, the PREIP is working on the planning stage of training sessions that will be provided to the personnel, including regional supervisors and nurses, service coordinators and service providers, to acquire the skills for the administration of the new eligibility tool, the AEPS 2nd edition. These training sessions will also include topics on COS data collection using data gathered from the new tool and the implementation of best practices to report valid and reliable data. Additionally, the state office team started to conduct virtual round tables with the service providers led by the Developmental Pediatrics Consultant in order to explore areas of opportunity for designing and implementing new strategies for personnel retention and training.

**Provide reasons for B2 slippage, if applicable**

Data for indicator 3, Outcome B2 show that the jurisdiction had a lower performance when compared with FFY 2018 and did not meet the target set for FFY 2019. Targets were submitted last fiscal year and were selected after thorough analysis of data collected for previous years. Since FFY 2015, data for this indicator met and surpassed the targets submitted, while percentages of data completion were rising. Through the years, the PREIP has implemented strategies to collect more COS data that would lead to more robust data for the indicator and would show the reality for the child outcomes each fiscal year. Since targets were exceeded each year in all outcomes, even when back-to-back hurricanes made landfall in the island, the PREIP State Office decided to rise the targets for FFY 2019 taking into account the data for FFY 2018. The targets for all outcomes have proved to be higher

than what the PREIP could achieve, especially when the program had to deal with the direct consequences of earthquakes and a pandemic.

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Currently, the PREIP is working on the planning stage of training sessions that will be provided to the personnel, including regional supervisors and nurses, service coordinators and service providers, to acquire the skills for the administration of the new eligibility tool, the AEPS 2nd edition. These training sessions will also include topics on COS data collection using data gathered from the new tool and the implementation of best practices to report valid and reliable data. Additionally, the state office team started to conduct virtual round tables with the service providers led by the Developmental Pediatrics Consultant in order to explore areas of opportunity for designing and implementing new strategies for personnel retention and training.

**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	29	1.10%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	478	18.12%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	108	4.09%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	451	17.10%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,572	59.59%

Outcome C	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 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	559	1,066	56.98%	56.98%	52.44%	Did Not Meet Target	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	2,023	2,638	77.81%	77.82%	76.69%	Did Not Meet Target	Slippage

**Provide reasons for C1 slippage, if applicable**

Data for indicator 3, Outcome C1 show that the jurisdiction had a lower performance when compared with FFY 2018 and did not meet the target set for FFY 2019. Targets were submitted last fiscal year and were selected after thorough analysis of data collected for previous years. Since FFY 2015, data for this indicator met and surpassed the targets submitted, while percentages of data completion were rising. Through the years, the PREIP has implemented strategies to collect more COS data that would lead to more robust data for the indicator and would show the reality for the child outcomes each fiscal year. Since targets were exceeded each year in all outcomes, even when back-to-back hurricanes made landfall in the island, the PREIP State Office decided to rise the targets for FFY 2019 taking into account the data for FFY 2018. The targets for all outcomes have proved to be higher than what the PREIP could achieve, especially when the program had to deal with the direct consequences of earthquakes and a pandemic.

Prior to the COVID-19 pandemic, all early intervention services in PR were provided as in-person visits, with no infrastructure of telehealth. As a lockdown was enforced in March 13th, 2020, all services were interrupted while the Government was working to share next steps with the population

and the EIP State Team worked on a protocol that would allow for virtual services to be provided. As the protocol was distributed and discussed, some service providers did not want to continue providing services as only the virtual modality was allowed. After March 2020, the PREIP had 29% less service providers than in February 2020 which accounted for the most drastic decrease in the number of service providers in the program. Personnel turnover presented barriers for collecting the data, as regional nurses had to complete the forms with only the information that was available in the records. Information was sometimes incomplete due to the turnover. It is important to emphasize that regional nurses are not the children's primary service providers; therefore, they have no additional information on their progress. This could mean that in some cases, COS ratings may not be reflecting the reality of the child's progress. Personnel turnover while in lockdown, meant less opportunities for formal training for the new service providers that had no previous experience with the COS data collection and reporting process. Regional nurses had the duty to virtually train the new service providers. In order to ensure collection of reliable data, the Supervision and Monitoring Unit (SMU) asked the regional programs to review the data submitted, especially data that showed differences of 3 or more COS categories between entry and exit, since this could mean data quality issues. Regional programs were able to provide additional information that would justify the COS ratings, therefore, if there were no errors in the previous submission, no changes were made to the data. Data analyses conducted show that 24% of children that exited the program in FFY 2019 had exit COS ratings equal or lower than entry ratings versus 16% in FFY 2018. Similarly, 12% of children that exited the program between January and June 2020 had exit COS ratings equal or lower than entry ratings, compared with 8% of children that exited the program between January and June 2019. FFY 2019 data for Outcome C show an increase of 2.14% in the progress category b versus a decrease of 2.03% in category d when compared with the same categories in FFY 2018. This led to a worsening in performance and inability to meet the target. Possible reasons are service interruption due to the COVID-19 lockdown and barriers for COS data collection in the regional programs.

Currently, the PREIP is working on the planning stage of training sessions that will be provided to the personnel, including regional supervisors and nurses, service coordinators and service providers, to acquire the skills for the administration of the new eligibility tool, the AEPS 2nd edition. These training sessions will also include topics on COS data collection using data gathered from the new tool and the implementation of best practices to report valid and reliable data. Additionally, the state office team started to conduct virtual round tables with the service providers led by the Developmental Pediatrics Consultant in order to explore areas of opportunity for designing and implementing new strategies for personnel retention and training.

**Provide reasons for C2 slippage, if applicable**

Data for indicator 3, Outcome C@ show that the jurisdiction had a lower performance when compared with FFY 2018 and did not meet the target set for FFY 2019. Targets were submitted last fiscal year and were selected after thorough analysis of data collected for previous years. Since FFY 2015, data for this indicator met and surpassed the targets submitted, while percentages of data completion were rising. Through the years, the PREIP has implemented strategies to collect more COS data that would lead to more robust data for the indicator and would show the reality for the child outcomes each fiscal year. Since targets were exceeded each year in all outcomes, even when back-to-back hurricanes made landfall in the island, the PREIP State Office decided to rise the targets for FFY 2019 taking into account the data for FFY 2018. The targets for all outcomes have proved to be higher than what the PREIP could achieve, especially when the program had to deal with the direct consequences of earthquakes and a pandemic.

Prior to the COVID-19 pandemic, all early intervention services in PR were provided as in-person visits, with no infrastructure of telehealth. As a lockdown was enforced in March 13th, 2020, all services were interrupted while the Government was working to share next steps with the population and the EIP State Team worked on a protocol that would allow for virtual services to be provided. As the protocol was distributed and discussed, some service providers did not want to continue providing services as only the virtual modality was allowed. After March 2020, the PREIP had 29% less service providers than in February 2020 which accounted for the most drastic decrease in the number of service providers in the program. Personnel turnover presented barriers for collecting the data, as regional nurses had to complete the forms with only the information that was available in the records. Information was sometimes incomplete due to the turnover. It is important to emphasize that regional nurses are not the children's primary service providers; therefore, they have no additional information on their progress. This could mean that in some cases, COS ratings may not be reflecting the reality of the child's progress. Personnel turnover while in lockdown, meant less opportunities for formal training for the new service providers that had no previous experience with the COS data collection and reporting process. Regional nurses had the duty to virtually train the new service providers. In order to ensure collection of reliable data, the Supervision and Monitoring Unit (SMU) asked the regional programs to review the data submitted, especially data that showed differences of 3 or more COS categories between entry and exit, since this could mean data quality issues. Regional programs were able to provide additional information that would justify the COS ratings, therefore, if there were no errors in the previous submission, no changes were made to the data. Data analyses conducted show that 24% of children that exited the program in FFY 2019 had exit COS ratings equal or lower than entry ratings versus 16% in FFY 2018. Similarly, 12% of children that exited the program between January and June 2020 had exit COS ratings equal or lower than entry ratings, compared with 8% of children that exited the program between January and June 2019. FFY 2019 data for Outcome C show an increase of 2.14% in the progress category b versus a decrease of 2.03% in category d when compared with the same categories in FFY 2018. This led to a worsening in performance and inability to meet the target. Possible reasons are service interruption due to the COVID-19 lockdown and barriers for COS data collection in the regional programs.

Currently, the PREIP is working on the planning stage of training sessions that will be provided to the personnel, including regional supervisors and nurses, service coordinators and service providers, to acquire the skills for the administration of the new eligibility tool, the AEPS 2nd edition. These training sessions will also include topics on COS data collection using data gathered from the new tool and the implementation of best practices to report valid and reliable data. Additionally, the state office team started to conduct virtual round tables with the service providers led by the Developmental Pediatrics Consultant in order to explore areas of opportunity for designing and implementing new strategies for personnel retention and training.

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

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	2,638
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.	1,991

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

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

The Puerto Rico EIP calculates the number of children exiting Part C also using the COS Calculator. The 6-month period is measured using the date of initial COSF and the exit date. Since the SMU collected 100% of the COS data, 647 is the number of children who did not receive services for at least 6 months, of those who were reported in COS data.

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

### **3 - Prior FFY Required Actions**

None

### **3 - OSEP Response**

### **3 - Required Actions**

## Indicator 4: Family Involvement

### Instructions and Measurement

**Monitoring Priority:** Early Intervention Services In Natural Environments

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

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

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

#### Data Source

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

#### Measurement

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

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

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

#### Instructions

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

Provide the actual numbers used in the calculation.

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

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

Report the number of families to whom the surveys were distributed.

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

If the analysis shows that the demographics of the families responding are not representative of the demographics of infants, toddlers, and families enrolled 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.

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

## 4 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2006	Target>=	90.47%	90.48%	90.49%	90.50%	94.51%
A	60.00%	Data	96.23%	96.96%	96.37%	96.54%	97.44%
B	2006	Target>=	89.07%	89.08%	89.09%	89.10%	89.11%
B	57.00%	Data	96.23%	96.59%	96.12%	95.91%	97.18%
C	2006	Target>=	94.40%	94.41%	94.42%	94.43%	94.44%
C	79.00%	Data	98.12%	98.42%	98.00%	98.90%	98.59%

### Targets

FFY	2019
Target A>=	97.45%
Target B>=	97.19%
Target C>=	98.60%

### Targets: Description of Stakeholder Input

The Puerto Rico State Interagency Coordination Council (PRSIICC) is the group that brings together the main PREIP stakeholders. The group is composed of representatives of the Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children's Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service Community-Based Organization), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service Community-Based Organization), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services (EDIS). During FFY 2019-2020, the SICCC worked together in 1 meeting to provide input on issues regarding personnel development, SSIP, compliance with IDEA requirements and other collaboration activities. Specifically, the January 27th, 2020 meeting was convened to discuss and analyze the data and information included in the APR to be submitted February 1st. The members of the Council were provided with the data and discussion was held around strategies to improve data collection and results around some of the indicators. The stakeholders suggested to

start the discussions towards strengthening the child find infrastructure as well as rethinking strategies for increasing the number of questionnaires returned for indicator 4 - Family Outcomes. The work group was engaged in discussions around the differences between regional programs and their impacts on service delivery, data and results.

Starting FFY 2019, a change in leadership in the state office delayed convening meetings the first semester of the fiscal year. A new meeting was coordinated for May 2020 but could not be held due to a lockdown in the island because of the COVID-19 pandemic since March 16, 2020. The SICC held its next meeting on September 11th, 2020. Discussions held during that meeting were aimed at knowing how the program transitioned from in-person visits in natural environments to virtual teleinterventions, how families were coping and how the personnel were adjusting to the new modality. The objective was to identify areas for improvement and provide input on new and existing strategies. The SICC also provides feedback about the State Determination issued by OSEP and discusses recommendations for new strategies to improve all Programs' areas as needed.

Due to the COVID-19 pandemic, the Puerto Rico Early Intervention Program could not collect data for this indicator from March 16th to June 15th, 2020. A state-wide lockdown was enforced through an Executive Order, and in-person visits were not allowed. Prior the pandemic, the data was collected for this indicator while in-person visits for IFSP meetings were conducted by service coordinators, to families whose infants and toddlers received early intervention services for 6 months or more receiving and would be soon exiting the Program. The SMU actively managed to design a new way to collect the data and transferred the NCSEAM tool to a Google Form, where families could fill out the survey at their own convenience. The state received 244 valid responses in the final weeks of the fiscal year, allowing the territory to have significant data that is complete and representative of the families that we serve.

**FFY 2019 SPP/APR Data**

The number of families to whom surveys were distributed	712
Number of respondent families participating in Part C	712
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	639
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	712
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	634
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	712
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	669
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	712

Measure	FFY 2018 Data	FFY 2019 Target	FFY 2019 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)	97.44%	97.45%	89.75%	Did Not Meet Target	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)	97.18%	97.19%	89.04%	Did Not Meet Target	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)	98.59%	98.60%	93.96%	Did Not Meet Target	Slippage

**Provide reasons for part A slippage, if applicable**

Approximately 33% of the data for this indicator was collected during the COVID-19 pandemic, while services were transitioned to a virtual modality after facing a brief interruption due to state-wide lockdown. This had a deep effect in the percent of families that reported that early intervention services helped their family know their rights. The PR EIP concludes that the change in how the services are provided and perceived by families, and the amount of data collected in the unusual period, impacted the indicator percentages. Regional programs that had higher percentages collected a lower amount of data. The SMU will include these results in the monthly meetings with the supervisors and a part of the technical assistance system and the implementation of corrective actions.

**Provide reasons for part B slippage, if applicable**

Approximately 33% of the data for this indicator was collected during the COVID-19 pandemic, while services were transitioned to a virtual modality after facing a brief interruption due to state-wide lockdown. This had a deep effect in the percent of families that reported that early intervention services have helped their family effectively communicate their children's needs. The PR EIP concludes that the change in how the services are provided and perceived by families, and the amount of data collected in the unusual period, impacted the indicator percentages. Regional programs that had higher percentages collected a lower amount of data. The SMU will include these results in the monthly meetings with the supervisors and a part of the technical assistance system and the implementation of corrective actions.

**Provide reasons for part C slippage, if applicable**

Approximately 33% of the data for this indicator was collected during the COVID-19 pandemic, while services were transitioned to a virtual modality after facing a brief interruption due to state-wide lockdown. This had a deep effect in the percent of families that reported that early intervention services helped their family help their children develop and learn. The PR EIP concludes that the change in how the services are provided and perceived by families, and the amount of data collected in the unusual period, impacted the indicator percentages. Regional programs that had higher percentages

collected a lower amount of data. The SMU will include these results in the monthly meetings with the supervisors and a part of the technical assistance system and the implementation of corrective actions.

Sampling Question	Yes / No
Was sampling used?	NO

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

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

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

Every family with a child receiving Part C services for at least six (6) months at the time of exit had the opportunity to partake in the survey. The family survey response group represents the population of children that were active in the Early Intervention Program (EIP) from July 1, 2019 to June 30, 2020 in every local program, by age group, eligibility criteria, and by geographic location. Surveys were returned from 7 EIPs throughout Puerto Rico. In total, 712 surveys were returned.

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

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

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

**4 - Prior FFY Required Actions**

None

**4 - OSEP Response**

**4 - Required Actions**

## Indicator 5: Child Find (Birth to One)

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / Child Find

**Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(B) and 1442)

#### Data Source

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

#### Measurement

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

#### Instructions

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

Describe the results of the calculations and compare the results to the target and to national data. 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	0.56%

FFY	2014	2015	2016	2017	2018
Target >=	0.49%	0.51%	0.53%	0.55%	0.57%
Data	0.45%	0.66%	0.44%	0.39%	0.51%

### Targets

FFY	2019
Target >=	0.58%

### Targets: Description of Stakeholder Input

The Puerto Rico State Interagency Coordination Council (PRSIICC) is the group that brings together the main PREIP stakeholders. The group is composed of representatives of the Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children's Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service Community-Based Organization), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service Community-Based Organization), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services (EDIS). During FFY 2019-2020, the SICCC worked together in 1 meeting to provide input on issues regarding personnel development, SSIP, compliance with IDEA requirements and other collaboration activities. Specifically, the January 27th, 2020 meeting was convened to discuss and analyze the data and information included in the APR to be submitted February 1st. The members of the Council were provided with the data and discussion was held around strategies to improve data collection and results around some of the indicators. The stakeholders suggested to start the discussions towards strengthening the child find infrastructure as well as rethinking strategies for increasing the number of questionnaires returned for indicator 4 - Family Outcomes. The work group was engaged in discussions around the differences between regional programs and their impacts on service delivery, data and results.

Starting FFY 2019, a change in leadership in the state office delayed convening meetings the first semester of the fiscal year. A new meeting was coordinated for May 2020 but could not be held due to a lockdown in the island because of the COVID-19 pandemic since March 16, 2020. The SICCC held its next meeting on September 11th, 2020. Discussions held during that meeting were aimed at knowing how the program transitioned from in-person visits in natural environments to virtual teleinterventions, how families were coping and how the personnel were adjusting to the new modality. The objective was to identify areas for improvement and provide input on new and existing strategies. The SICCC also provides feedback about the State Determination issued by OSEP and discusses recommendations for new strategies to improve all Programs' areas as needed.

The PREIP met and exceeded the target that was selected for the territory for FFY 2019. This indicator has been of difficulty for the island due to a few events that had impacted the percent of infants that are served. The child count has been severely impacted by back-to-back hurricanes and the trend of families leaving the island for other states. Nevertheless, in FFY 2019 the number of infants with an active IFSP, specifically on December 1st, was higher than it was in FFY 2018. Additionally, the estimates of the population of infants and toddlers birth to 1 decreased during the last fiscal year, rising the percent for the indicator. Child find activities conducted by the service coordinators island-wide and partnerships created by the regional supervisors have resulted in identifying infants with developmental delays.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 1 with IFSPs	149
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 1	19,262

**FFY 2019 SPP/APR Data**

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
149	19,262	0.51%	0.58%	0.77%	Met Target	No Slippage

**Compare your results to the national data**

Although the FFY 2019 target for indicator was met and exceeded with an increase of 0.26% when compared to FFY 2018, the territory sits below the FFY 2018 mean of 1.4% and the national percentage of 1.25%. This is the regular trend for the jurisdiction, even in fiscal years that the target is met. However, in FFY 2018, 20 states served somewhere around 0 and 1% of infants birth to 1, the category that Puerto Rico belongs to. Although child find activities are continuously carried out by service coordinators around the island, and others are often coordinated by the regional supervisors, discussions around strengthening the Child Find strategies have been held with the regional supervisors, the State Office team and the SICC.

**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 compared to national data. (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 EDFacts Metadata and Process System (EMAPS)) and Census (for the denominator).

#### Measurement

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

#### Instructions

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

Describe the results of the calculations and compare the results to the target and to national data. 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	2.56%

FFY	2014	2015	2016	2017	2018
Target >=	3.09%	3.10%	3.11%	3.12%	3.13%
Data	3.29%	3.18%	3.08%	2.65%	3.34%

#### Targets

FFY	2019
Target >=	3.35%

#### Targets: Description of Stakeholder Input

The Puerto Rico State Interagency Coordination Council (PRSIICC) is the group that brings together the main PREIP stakeholders. The group is composed of representatives of the Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children's Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service Community-Based Organization), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service Community-Based Organization), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services (EDIS). During FFY 2019-2020, the SICCC worked together in 1 meeting to provide input on issues regarding personnel development, SSIP, compliance with IDEA requirements and other collaboration activities. Specifically, the January 27th, 2020 meeting was convened to discuss and analyze the data and information included in the APR to be submitted February 1st. The members of the Council were provided with the data and discussion was held around strategies to improve data collection and results around some of the indicators. The stakeholders suggested to start the discussions towards strengthening the child find infrastructure as well as rethinking strategies for increasing the number of questionnaires returned for indicator 4 - Family Outcomes. The work group was engaged in discussions around the differences between regional programs and their impacts on service delivery, data and results.

Starting FFY 2019, a change in leadership in the state office delayed convening meetings the first semester of the fiscal year. A new meeting was coordinated for May 2020 but could not be held due to a lockdown in the island because of the COVID-19 pandemic since March 16, 2020. The SICCC held its next meeting on September 11th, 2020. Discussions held during that meeting were aimed at knowing how the program transitioned from in-person visits in natural environments to virtual teleinterventions, how families were coping and how the personnel were adjusting to the new modality. The objective was to identify areas for improvement and provide input on new and existing strategies. The SICCC also provides feedback about the State Determination issued by OSEP and discusses recommendations for new strategies to improve all Programs' areas as needed.

#### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment Data Groups	07/08/2020	Number of infants and toddlers birth to 3 with IFSPs	2,555
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/25/2020	Population of infants and toddlers birth to 3	90,133

**FFY 2019 SPP/APR Data**

<b>Number of infants and toddlers birth to 3 with IFSPs</b>	<b>Population of infants and toddlers birth to 3</b>	<b>FFY 2018 Data</b>	<b>FFY 2019 Target</b>	<b>FFY 2019 Data</b>	<b>Status</b>	<b>Slippage</b>
2,555	90,133	3.34%	3.35%	2.83%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

Child count has been decreasing consistently for the past years. However the number of infants and toddlers birth to 3 that were determined eligible and had an active IFSP in the jurisdiction was higher when compared to the number for FFY 2018, but population estimates are higher for this year. For the past year, indicator 6 data was calculated using the population estimates that were available at the time. However, new and more reliable data were released, and population estimates changed substantially, making them higher than was originally reported. Consequently, using the estimates for this year--that are similar to the corrected population estimates-- constitutes slippage. Have the PREIP used the now corrected population estimates, the indicator 6 data for FFY 2018 would have been close to 2.43%, which is lower than the data reported for FFY 2019. This means that there would have been no slippage. The PREIP still acknowledges that the past years have been tough for the island, having families move out of the jurisdiction after the hurricanes in 2017. But there have also been a trend of families returning to the island. Child find activities carried out by regional personnel have also helped identify infants and toddlers birth to 3 with developmental delays that are determined eligible for the PREIP.

**Compare your results to the national data**

The 2018 national percentage of infants and toddlers birth to three receiving early intervention services is 3.48%, whereas Puerto Rico's percentage for FFY 2019 is 2.83%. This is significantly below the national percentage as well as below the national mean of 3.6%. A decrease of 0.51% is observed when comparing the FFY 2019 data with the FFY 2018 data reported for the territory. An increase in the population estimates and a lower number of infants and toddlers with an active IFSP have impacted the data for this indicator positioning the jurisdiction with only other 15 states.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	86.80%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.37%	98.73%	100.00%	100.00%	99.15%

### Targets

FFY	2019
Target	100%

### FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
66	67	99.15%	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.

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

State monitoring

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

The Puerto Rico Part C team selected the records for the evaluation of Indicator 7 taking into account the date of the referral and the date the IFSP was developed. The inclusion criterion for files to be included for review is that the referral was received in any of our regional offices between July 1st, 2019 and June 30th, 2020. All (7) seven EI programs in Puerto Rico were included for data collection, as the SMU does not sample regional programs. The SPP/APR data collection and monitoring activities are conducted every year from August to September, after the fiscal year ends. The SMU uses the child count data that regional programs submit to produce a list of records that fall within the inclusion criterion for this indicator. Based on the population, a random sample size is calculated using the web-based tool, OpenEpi and, a list of random numbers is created using the random numbers module of the same tool. Records are chosen matching the number from the random numbers list to the record from the child count report. For all regional programs, data were collected through onsite monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors. Non-compliance events are also shared and explained to the supervisor, as an important process of education and corrective actions that take place. After the on-site data collection is made, the SMU performs the analysis and, if necessary, phone calls with the regional supervisors are scheduled with the purpose of asking for additional information. Documented exceptional family circumstances that prevented initial evaluation, assessment and an initial IFSP meeting to be conducted in 45 days or less after the referral is received, are included in the numerator and denominator to calculate the data.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

Regional supervisors are responsible for implementing strategies to avoid delays in the evaluation for eligibility determination and IFSP development. For the current reporting period, after Puerto Rico received its determination letter, the SMU developed local determination letters that informed the regional programs of the findings of non-compliance identified in monitoring activities. When findings of non-compliance were identified, the SMU requested the regional programs to develop a Corrective Action Plan (CAP) in which the details of the findings, strategies to be implemented, the expectations from the regional program regarding implementation of the regulatory requirements, the resources, and the timeline to completion are included. These are also topics of discussions held in the supervisor's monthly meetings and other direct technical assistance activities.

We reviewed updated data by convenience-sampling during subsequent on-site monitoring activities in order to ensure that the regional programs are correctly implementing the regulatory requirements related to timely evaluation and IFSP development. These activities were conducted only on the centers that had findings of non-compliance during the previous year. When we found that there were no further findings of noncompliance, the SMU concluded that the program is correctly implementing the regulatory requirements. When findings of noncompliance persisted, the SMU scheduled follow-up visits to review more records and provided technical assistance to the regional supervisor and other personnel.

During FFY 2018, the SMU identified one (1) finding of non-compliance in one (1) regional program. The state office reviewed updated data on the regional program that the finding, and that review reflected no additional findings of non-compliance. Therefore, based on that review, the state concluded that it achieved 100% compliance of the regulatory requirements.

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

After the SMU identifies non-compliance events, the regional program that is the source of non-compliance is required to provide information regarding the correction of the finding, and to include strategies to verify progress and improvement. The regional supervisors implemented or strengthened strategies in order to ensure timely evaluation and IFSP development. The SMU verified through record review in on-site monitoring activities, that the finding of non-compliance reported in FFY 2018 was corrected within one year. Although the IFSP was developed after the 45-day timeline that is required, the IFSP was developed for the child and family, and thus the case is classified as corrected.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
N/A			
N/A			
N/A			

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	96.10%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	93.09%	93.97%	96.03%	95.90%	100.00%

**Targets**

FFY	2019
Target	100%

**FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
131	132	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.

1

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

State monitoring

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

The Puerto Rico Part C team selected the files for the evaluation of Indicator 8A according to the date recorded in the EI Data System that transition steps and services were developed. The inclusion criterion to select the files for review is toddlers whose third birthday was between September 29th, 2019 and September 28th, 2020, who were determined potentially eligible for Part B services and for whom transition steps were required to be developed at least 90 days prior the child's third birthday. The records selected were due to have the transition steps between July 1st, 2019 and June 30th, 2020. All (7) seven EI programs in Puerto Rico were included for data collection which takes place every year August to September, after the fiscal year ends. The SMU uses child count data that regional programs submit to the state office to produce a list of records that fall within the inclusion criterion for this indicator. Based on the population, a sample size is calculated using the web-based tool, OpenEpi and, a list of random numbers is created using the random numbers module of the same tool. Records are chosen matching the number from the random numbers list to the record from the child count report. For all regional programs, data were collected through onsite monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors as an important process of education and corrective action takes place. Non-compliance events are also shared and explained to the supervisor. After the on-site data collection is made, the SMU performs the analysis and, if necessary, phone calls with the regional supervisors are scheduled with the purpose of asking for additional information. Documented exceptional family circumstances that prevented the timely planning of transitions steps and services are included in the numerator and denominator to calculate the data.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
N/A			
N/A			
N/A			

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	91.40%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	90.32%	98.28%	93.50%	85.25%	90.57%

**Targets**

FFY	2019
Target	100%

**FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
121	132	90.57%	100%	91.67%	Did Not Meet Target	No Slippage

**Number of parents who opted out**

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

0

**Describe the method used to collect these data**

Puerto Rico Part C team selected the records for the evaluation of Indicator 8B according to the notification to SEA/LEA date recorded in the EI Data System and the monthly report regional supervisors submit to the state office. The inclusion criterion for record selection was toddlers whose third birthday was between September 29th, 2019 and September 28th, 2020, who were determined potentially eligible for Part B services, and for whom notification to the SEA/LEA was due at least 90 days prior the child's third birthday. The notification for the records selected was due between July 1st, 2019 and June 30th, 2020. These notifications are included in a monthly list regional program send to the SMU and the Part C Data Manager sends to the Part B Manager. All (7) seven EI programs in Puerto Rico were included for data collection which takes place every year from August to September. The SMU uses child count data that regional programs submit to produce a list of records that fall within the inclusion criterion for this indicator. Based on the population, a sample size is calculated using the web-based tool, OpenEpi and, a list of random numbers is created using the random numbers module of the same tool. Records are chosen matching the number from the random numbers list to the record from the list. For all regional programs, data were collected through monitoring activities conducted by the SMU at the regional and at the State Office. The Part C Data Manager reviews the list that is sent to the Part B Data Manager no later than the 15th day of every month and that constitutes the SEA/LEA notification for the territory to confirm timely notification to SEA/LEA. If the toddler's information was included in the list at least 90 days prior their birthday, the SMU concludes that notification to Part B was timely. After the on-site data collection is made, the SMU performs the analysis and, if necessary, phone calls with the regional supervisors are scheduled with the purpose of asking for additional information. These activities, the findings and importance of the process are explained to the regional supervisors, as the SMU does with other compliance indicators.

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

YES

**If yes, is the policy on file with the Department? (yes/no)**

YES

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

State monitoring

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

Puerto Rico Part C does not select EIS programs for monitoring. All (7) seven EI programs in Puerto Rico were included for the monitoring and data collection activities which take place every year from August to September.

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

On indicator 8B, 11 cases of non-compliance were identified in 5 of the 7 regional programs: Arecibo, Bayamón, Caguas, Mayagüez and San Juan. In all cases, the programs did not report that children receiving early intervention services were potentially eligible for part B services 90 days or less before the toddlers' third birthday. Each regional program has a system to report back to the Part C state office employing the service coordinators and the data system. The state office, then sends a monthly list to the SEA which constitutes the formal notification list to the Department of Education. The SMU conducts monitoring activities for the APR data collection making a selection of a random sample of files to review them. The monthly lists are compared to the sample to ensure that the notification was made as required. The SMU has identified the need to strengthen these systems, since notification to SEA/LEA is not always completed. This will continue to be included in technical assistance sessions and trainings, as well as in the monthly supervisor meetings as one of the methods for non-compliance correction.

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

In the case of indicator 8B, regional supervisors are responsible for implementing strategies to avoid delays in notifying the SEA/LEA of the possible eligibility of the child for Part B services. For the current reporting period, after Puerto Rico received its determination letter, the SMU developed local determination letters that informed the regional programs of the findings of non-compliance identified in monitoring activities. When findings of non-compliance were identified, the SMU requested the regional programs to develop a Corrective Action Plan (CAP) in which the details of the findings, strategies to be implemented, the expectations from the regional program regarding implementation of the regulatory requirements, the resources, and the timeline to completion are included. These are also topics of discussions held in the supervisor’s monthly meetings and other direct technical assistance activities.

We reviewed updated data by convenience-sampling during subsequent monitoring activities held from the state office in order to ensure that the regional programs are correctly implementing the regulatory requirements related to timely evaluation and IFSP development. The monitoring activities were conducted only for the centers that had findings of non-compliance during the previous year. When we found that there were no further findings of non-compliance, the SMU concluded that the program is correctly implementing the regulatory requirements. When findings of noncompliance persisted, the SMU scheduled follow-up visits to review more records and provided technical assistance to the regional supervisor and other personnel.

During FFY 2018, the SMU identified ten (10) findings of non-compliance in 3 regional programs. The state office reviewed updated data using the monthly list that is sent to the SEA/LEA, and that review reflected no additional findings of non-compliance. Therefore, based on that review, the state concluded that it achieved 100% compliance of the regulatory requirements.

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

The SMU verified that each individual case of the ten (10) cases of noncompliance identified were corrected as all ten children are no longer part of the jurisdiction.

These individual cases were thoroughly discussed with the supervisors of the regional programs that were the source of noncompliance and were included in the regional determinations. The regional supervisors implemented or strengthen strategies in order to ensure timely service provision. The SMU verified through record review in monitoring activities, that all 10 findings of non-compliance reported in FFY 2018 were corrected within one year. Although the notification to SEA/LEA was not made, the children are no longer in the jurisdiction of the regional program, thus these cases were classified as corrected.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
N/A			
N/A			
N/A			

**8B - Prior FFY Required Actions**

None

**8B - OSEP Response**

**8B - Required Actions**

Because Puerto Rico reported less than 100% compliance for FFY 2019, Puerto Rico must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, Puerto Rico must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 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 2020 SPP/APR, Puerto Rico must describe the specific actions that were taken to verify the correction.

If Puerto Rico did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why Puerto Rico did not identify any findings of noncompliance in FFY 2019.

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

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

#### Data Source

Data to be taken from monitoring or State data system.

#### Measurement

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

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

#### Instructions

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

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

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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	64.20%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	93.09%	93.97%	96.03%	95.90%	100.00%

**Targets**

FFY	2019
Target	100%

**FFY 2019 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 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
131	132	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.

1

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.

0

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

State monitoring

Describe the method used to select EIS programs for monitoring.

Puerto Rico Part C team selected the records for the evaluation of Indicator 8C according to the transition conference's date that is recorded in the EI Data System. The criterion for the file selection for this indicator is toddlers whose third birthday was between September 29th, 2019 and September 28th, 2020, that were determined potentially eligible for Part B services and for whom a transition conference was required to be held at least 90 days prior to the child's third birthday. The records selected were due to have the transition conference between July 1st, 2019 and June 30th, 2020. All (7) seven EI programs in Puerto Rico were included for data collection as the SMU does not sample regional programs. The SMU used the regional child counts to produce a list of records that fall within the inclusion criterion for the selection of a random sample. A random numbers list is generated based on a sample size calculated using a web tool, OpenEpi. Records are then chosen matching the number from the random numbers list to the record from the child count report. For all regional programs, data were collected through on-site monitoring activities conducted by the SMU, explaining all the process and its importance to the regional supervisors as an education and corrective action processes take place. After the on-site data collection is made, the SMU performs the analysis and, if necessary, calls the regional supervisors for further information and clarifications. Documented exceptional family circumstances that prevented a timely transition conference are included in the numerator and denominator to calculate the data.

Provide additional information about this indicator (optional)

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
N/A			
N/A			
N/A			

**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 are adopted). (2 U.S.C. 1416(a)(3)(B) and 1442)

#### Data Source

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

#### Measurement

Percent = (3.1(a) divided by 3.1) times 1.

#### 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 1. In a reporting period when the number of resolution sessions reaches 1 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.**

Puerto Rico has Part B due process procedures adopted.

### 9 - Prior FFY Required Actions

None

### 9 - OSEP Response

This Indicator is not applicable to Puerto Rico.

### 9 - Required Actions

## Indicator 10: Mediation

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

**Results indicator:** Percent of mediations held that resulted in mediation agreements. (2 U.S.C. 1416(a)(3)(B) and 1442)

#### Data Source

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

#### Measurement

Percent =  $((2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1) \text{ times } 1$ .

#### 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 1. In a reporting period when the number of mediations reaches 1 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.

### 1 - 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 219-2 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/4/22	2.1 Mediations held	
SY 219-2 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/4/22	2.1.a.i Mediations agreements related to due process complaints	
SY 219-2 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/4/22	2.1.b.i Mediations agreements not related to due process complaints	

#### Targets: Description of Stakeholder Input

The Puerto Rico State Interagency Coordination Council (PRSIICC) is the group that brings together the main PREIP stakeholders. The group is composed of representatives of the Developmental Delays Institute (UPR UCEDD/LEND), the Families and Children's Affairs Administration, the Association of Parents of Children with Disabilities, the Health Services Administration, the Mental Health Services Administration, Health Insurance Commissioner, Centro Margarita (Service Community-Based Organization), NY Foundling, the Office of the Ombudsman for Persons with Disabilities, SER de Puerto Rico (Service Community-Based Organization), Medicaid, Department of Education, and Army Educational & Developmental Intervention Services (EDIS). During FFY 219-22, the SICCC worked together in 1 meeting to provide input on issues regarding personnel development, SSIP, compliance with IDEA requirements and other collaboration activities. Specifically, the January 27th, 22 meeting was convened to discuss and analyze the data and information included in the APR to be submitted February 1st. The members of the Council were provided with the data and discussion was held around strategies to improve data collection and results around some of the indicators. The stakeholders suggested to start the discussions towards strengthening the child find infrastructure as well as rethinking strategies for increasing the number of questionnaires returned for indicator 4 - Family Outcomes. The work group was engaged in discussions around the differences between regional programs and their impacts on service delivery, data and results.

Starting FFY 219, a change in leadership in the state office delayed convening meetings the first semester of the fiscal year. A new meeting was coordinated for May 22 but could not be held due to a lockdown in the island because of the COVID-19 pandemic since March 16, 22. The SICCC held its next meeting on September 11th, 22. Discussions held during that meeting were aimed at knowing how the program transitioned from in-person visits in natural environments to virtual teleinterventions, how families were coping and how the personnel were adjusting to the new modality. The objective was to identify areas for improvement and provide input on new and existing strategies. The SICCC also provides feedback about the State Determination issued by OSEP and discusses recommendations for new strategies to improve all Programs' areas as needed.

#### Historical Data

Baseline Year	Baseline Data
25	

FFY	214	215	216	217	218
Target>=					
Data					

**Targets**

FFY	219
Target>=	

**FFY 219 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 218 Data	FFY 219 Target	FFY 219 Data	Status	Slippage
						N/A	N/A

Provide additional information about this indicator (optional)

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

Puerto Rico reported fewer than ten mediations held in FFY 219. Puerto Rico is not required to provide targets until any fiscal year in which ten or more mediations were held.

**1 - Required Actions**

## **Certification**

### **Instructions**

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

### **Certify**

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

### **Select the certifier's role**

Designated Lead Agency Director

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

### **Name:**

Manuel I. Vargas Bernal, MD, MPH

### **Title:**

Maternal, Child and Adolescent Health Division Director

### **Email:**

mivargas@salud.pr.gov

### **Phone:**

787-765-2929 ext. 4583

### **Submitted on:**

4/27/21 3:39:24 PM