Indicator 7: 45-Day Timeline

Essential Elements

| Elements | Response |
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| **Indicator Description** | Percent of eligible infants and toddlers with Individualized Family Service Plans (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) |
| **Measurement**a | 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. Provide actual numbers used in the calculation. |
| **Target Setting** | Target must be 100% as this is a compliance indicator. |
| **E*MAPS* Reporting Information:** Describe log-in information, location of manual, etc.  | Click or tap here to enter text. |
| **Data Stewards:** Provide titles and names, contact information, department, and any notes on persons responsible for collections, validation, analysis, and submission. List all parties and their role in the process, e.g., Part C coordinator, Part C data manager, data analyst, program coordinator, provider. | Click or tap here to enter text. |
| **Data Source Description:** Provide a short description of the databases or systems your state uses to gather data for this indicator.* 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. 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 describe how the data accurately represent infants and toddlers with IFSPs for the full reporting period.
 | Click or tap here to enter text. |
| **State Collection and Submission Schedule:** Provide a list of dates necessary for the timely processing and submission of these data. Include when the data collection period opens, when data are due from the local early intervention (EI) programs, and when assigned staff pull the data after the collection closes. | Click or tap here to enter text. |

a**Measurement:** Part C SPP/APR Measurement Table FFY 2020-2025.

Processes

| Element | Response |
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| **Collection:** Provide detailed information about the origin and collection of the data and names and titles of persons responsible. (If data are from state monitoring, describe the method your state uses to select early intervention (EI) programs that it monitors.) | Click or tap here to enter text. |
| **Data Quality:** Describe how the data accurately reflect the full reporting period, the data cleaning processes, and any other processes your state uses to ensure high-quality data. | Click or tap here to enter text. |
| **Data Analysis:**a Describe the process for data analysis.* 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.
* The analysis needs to account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.
 | Click or tap here to enter text. |
| **Response to OSEP-Required Actions:** Describe the procedures for reviewing Office of Special Education Programs (OSEP) feedback. Following the release of the OSEP determination, indicate who reviews OSEP feedback and how assigned staff make the plan to address concerns and create a response. | Click or tap here to enter text. |
| **Report on Correction of Identified Noncompliance:** Describe the databases, processes, sources, and persons responsible for conducting the verification of correction reported in the previous State Performance Plan Annual Performance Report (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.
 | Click or tap here to enter text. |
| **Internal Approval Process:** Describe any internal approval processes, including who must sign off and timelines. | Click or tap here to enter text. |
| **External Approval Process:** Describe the State Interagency Coordinating Council (SICC) certification process, including dates and timelines. | Click or tap here to enter text. |
| **Submission:** Describe the process for entering the data and analyses into E*MAPS*. Include information on the person and role authorized to certify the final report. | Click or tap here to enter text. |
| **Clarification:**b Describe the process your state uses to prepare a response to OSEP’s request for clarification. | Click or tap here to enter text. |
| **Data Governance:** Describe the process for reviewing and approving potential or actual changes to the data collection system and/or processes. | Click or tap here to enter text. |
| **Public Reporting:** Describe the process and format for publicly reporting the performance of each local EI program against the target of the state’s SPP/APR data. Note the person responsible and where your state posts the state and local SPP/APR data. | Click or tap here to enter text. |

a**Data Analysis:** Review data year to year, looking for patterns statewide and within local EI programs, outliers, whether targets are met or not met, and slippage.

n**Clarification:** OSEP generally sends clarification requests to states about 60 days post-submission.

Resources

Indicator 7: 45-Day Timeline

* [Part C Evaluation and Assessment Timelines in the COVID-19 Environment](https://sites.ed.gov/idea/files/QA-Evaluation-Timeline-Part-C.pdf) (OSEP, July 6, 2020)
* [OSEP Memo Regarding Reporting on Correction of Noncompliance in the SPP/APR](https://ectacenter.org/~pdfs/events/osep09-02timelycorrectionmemo.pdf) (2008)
* [FAQ Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR](https://ectacenter.org/~pdfs/events/OSEP-FAQ-Identification-Correction.pdf) (2008)
* Technical Assistance Follow-up Call on Identifying, Correcting, and Reporting Noncompliance
<https://ectacenter.org/events/webinars.asp>

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| **Acknowledgment**This resource was adapted from the Part C IDEA Data Processes Toolkit designed by the IDEA Data Center (IDC). The current resource relied heavily on the contents of the IDC Part C IDEA Data Processes Toolkit. Additions and revisions to the toolkit were informed by the expertise and input of DaSy staff. |
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