|  |  |
| --- | --- |
| APR Checklist and Tips—Indicator B-12: Early Childhood Transition | " " |
|  | December 2022 |

Compliance indicator: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. (20 U.S.C. 1416(a)(3)(B))

For an overview of the indicator, including explanation of the measurement, please access the SPP/APR modules: [SPP/APR Basics, What you Need to Know](https://dasycenter.org/spp-apr-basics-what-you-need-to-know/). For more detailed information please access the current [FFY Part C SPP/APR Package](https://sites.ed.gov/idea/grantees/#SPP-APR,FFY20-25-SPP-APR-Package). The Measurement Table language is also included at the beginning of the indicator in the SPP/APR template/platform.

**What to Know About this Indicator**

* Indicator B-12 reports the percent of children for whom transition from Part C to Part B occurred according to IDEA regulations.
* Data for this indicator includes children referred by Part C and found eligible for Part B who have an IEP developed and implemented by their third birthday.
* The measurement for B-12 has multiple data components to consider in the measurement calculation.
* This indicator is a compliance indicator and targets are always 100%.
* Guidance on late referrals helps determine how to report children who are referred to Part C less than 135 days from their third birthday and are referred to Part B: [Federal IDEA Part C and Part B Transition Requirements for Late Referrals to IDEA Part C](https://ectacenter.org/~pdfs/topics/transition/Timeline_for_late_referral.pdf) *(2018).*

This indicator is not applicable for those territories where IDEA Part C services are not provided.

General Tips

* Review and respond to information included in the sections “OSEP Response” and “Required Actions” from the previous year’s APR for this indicator. Include the state’s response in " Prior FFY Required Actions" section for the SPP/APR reporting platform.
* Ensure that all information is entered into the appropriate fields in the platform.
* Check that your numbers exactly match the OSEP pre-populated/auto-calculated numbers.

Exclude extraneous information that may cause confusion or create additional questions for the reader.

1. Indicator Data

| Were the following completed? | Yes | No | Notes |
| --- | --- | --- | --- |
| 1. Indicated “yes” if the indicator is not applicable |  |  |  |
| 1. Provided an explanation as to why it is not applicable |  |  |  |

1. Historical Data

| Were the following completed? | Yes | No | Notes |
| --- | --- | --- | --- |
| 1. Verified or changed baseline year (*Previous data pre-populated*) |  |  |  |
| 1. Verified or changed baseline data (*Previous data pre-populated*) |  |  |  |
| 1. Verified accuracy of previous 5 years of data (*Pre-populated*) |  |  |  |

Tips (if baseline changed)

* Change both the baseline year (FFY) and the baseline data in the “Historical Data” section. Baseline can be changed to reflect the current FFY or a prior FFY.
* Record the baseline data so it is consistent with the state’s data for that FFY as reported in the “Historical Data” section or in the “Current FFY Data” section. Do not round up or round down the numbers (e.g., use 89.52% not 90%).
* Describe how stakeholders were involved in the decision to change baseline and what information/data was shared to inform their input (e.g., trend data, data quality issues, state initiatives impacting the data). Include this information in the “Additional Information” section unless information specific to changing baseline for this indicator is included in the “Introduction” and the stakeholder engagement information is checked to repeat for each indicator.
* Describe the justification/reason(s) for resetting baseline in the “Additional Information” section. Reasons most frequently impact comparability of data across FFYs, such as changes in state data collection tools, methodology, or data source (e.g., state changed their data source and methodology for reporting timely services data from reporting data from a selection of records based on monitoring to reporting all children using their new state data base).

See the following resources for more information on justifications for resetting baseline and targets:

* + [Target Setting Guide](https://dasycenter.org/target-setting-guide/)
  + [OSEP’s Universal TA for FFY 2020-2025](https://sites.ed.gov/idea/files/Universal-TA-for-FFY-2020-2025-SPP-APR.pdf)

[IDEA Part C SPP/APR User Guide](https://osep.communities.ed.gov/#program/spp-apr-resources)

Note: Targets cannot be changed for Indicator B-12 since it is a compliance indicator.

2. FFY SPP/APR Data

2A. Current FFY Data

| Were the following completed? | Yes | No | Notes |
| --- | --- | --- | --- |
| * 1. Provided number of children: |  |  |  |
| * 1. Who have been served in Part C and referred to Part B for Part B eligibility determination (category a) |  |  |  |
| * 1. Who were referred and determined to be NOT eligible and whose eligibility was determined prior to their third birthday (category b) |  |  |  |
| * 1. Who were found eligible and have an IEP developed and implemented by their third birthday (category c) |  |  |  |
| * 1. For whom parent refusals to provide consent caused delays in evaluation or initial services or the child move to another LEA during the evaluation time See 34 CFR 300.301(d) (category d) |  |  |  |
| * 1. For whom their parents chose to continue early intervention services beyond the child’s third birthday through a State’s extended Part C option policy under 34 CFR 303.211 or a similar State option (category e) |  |  |  |
| 1. Verified accuracy of status regarding meeting or not meeting target (*Auto-calculated by comparing current FFY data to current FFY target*) |  |  |  |
| 1. Verified accuracy of numerator (*pre-populated with number of children in category – those who were found eligible and have an IEP in place by third birthday*) |  |  |  |
| 1. Verified accuracy of denominator (pre-populated with total numbers of children in categories a, b, d, and f) |  |  |  |
| 1. Verified accuracy of previous FFY data |  |  |  |
| 1. Verified accuracy of current FFY target (*Pre-populated – always 100% for Indicator B-12*) |  |  |  |
| 1. Verified accuracy of current FFY data (*Auto-calculated by dividing number of children in category c by total number of children in categories a, b, d, e, and f. Calculation should not exceed 100%*) |  |  |  |
| 1. Verified accuracy of status regarding meeting or not meeting target (*Auto-calculated by comparing current FFY data to current FFY target*) |  |  |  |
| 1. Verified accuracy of slippage statement (*Auto-calculated using OSEP’s definition of slippage - see* [*IDEA Part B SPP/APR User Manual*](https://osep.communities.ed.gov/#program/spp-apr-resources) *[page 28]*) |  |  |  |
| 1. Described reasons for slippage, if applicable |  |  |  |
| 1. Verified accuracy of number of children served in Part C and referred to Part B for eligibility determination that are not included in categories b, c, d, e, or f |  |  |  |
| 1. Described range of days beyond the third birthday when eligibility was determined and the IEP developed and reasons for delays, if applicable |  |  |  |
| * 1. Attached PDF table *(optional)* |  |  |  |

Tips (if slippage occurred):

* Consider factors that have impacted slippage (e.g., policies and procedures are not clear, change in local leadership, personnel/workforce shortage, providers not understanding requirements and procedures, natural disaster) when describing reasons for slippage. See [State Examples of Slippage](https://dasycenter.org/spp-apr-checklists-and-tips/SlippageExamples_Acc.pdf).

Report specific reasons for the delays based on review of records for children whose eligibility evaluation and IEP development were delayed due to the LEA.

* + Staff not available
  + Lost track of the referral

Inadequate planning to complete evaluation and development of the IEP

2B. Data Sources

| Were the following completed? | Yes | No | Notes |
| --- | --- | --- | --- |
| 1. Indicated whether data for this indicator came from state monitoring or state database |  |  |  |
| * 1. Described the method used to collect these data, and if data are from state monitoring, described the procedures used to collect the data |  |  |  |
| 1. Provided additional information about this indicator, if needed (e.g., justification for changing baseline) |  |  |  |

3. Correction of Findings of Noncompliance in Previous FFY

| Were the following completed? | Yes | No | Notes |
| --- | --- | --- | --- |
| 1. Provided number of findings of noncompliance identified |  |  |  |
| 1. Provided number of findings of noncompliance verified as corrected within one year |  |  |  |
| 1. Verified accuracy of number of findings of noncompliance subsequently corrected (*Auto-calculated subtracting number of findings of noncompliance corrected in one year from the number of identified in previous FFY*) |  |  |  |
| 1. Described how state verified that the source of noncompliance is correctly implementing the regulatory requirements if previous FFY finding were verified as corrected |  |  |  |
| 1. Described how state verified that each individual case of noncompliance was corrected if previous FFY finding were verified as corrected |  |  |  |
| 1. Described actions taken if previous FFY findings of noncompliance were not yet corrected |  |  |  |

Tips (if findings of noncompliance were identified in the previous year):

* Describe **how** the state verified correction of **both** the regulatory requirements and the individual cases of noncompliance. Both must be verified as corrected for a finding of noncompliance to be considered corrected. See [OSEP Memorandum 09-02](https://sites.ed.gov/idea/files/policy_speced_guid_idea_memosdcltrs_osep09-02timelycorrectionmemo.pdf).

Describe **how** the state verified that each district/LEA is correctly implementing the regulatory requirements for early childhood transition (e.g., performing at 100% compliance) by including the following:

* + Number of districts/LEAs that had findings of noncompliance. For example: Of the 100 LEAs in the state five LEAs had finding of noncompliance. A total of eight findings of noncompliance were identified across the five LEAs.

Data source and the amount of updated or subsequent data reviewed to determine program/district is at 100% compliance. For example: The state reviewed one month of updated or subsequent data from the state’s data system on all children who were referred to Part B from Part C for eligibility determination and IEP development for each of the five LEAs with findings.

* + - If different amounts of data were used to verify correction for each district/LEA based on the level and extent of the noncompliance describe those differences. For example: For two LEAs, each with one finding due to one child with noncompliance, five subsequent records for children who were served in Part C and referred to Part B were reviewed to determine if these children were found eligible and an IEP was developed and implemented by age three to verify correction. For one additional LEA with a finding due to 10 children with noncompliance, 30 subsequent records for children who were served in Part C and referred to Part B were reviewed to verify these children were found eligible for Part B and had an IEP developed and implemented by their third birthday. Based on the review of data, the state determined that each LEA was at 100% compliance and correctly implementing the early childhood transition requirements.

Describe **how** the state verified that each individual case of noncompliance was corrected by including the following:

* + Number of children identified with noncompliance from previous FFY
  + Number of children for whom records were reviewed to determine if they received an evaluation and had an IEP developed and implemented although late unless they were no longer in the jurisdiction of the program.
  + Data source used to verify child correction (e.g., data system, child record)

Total number of children verified as corrected (e.g., number who received an evaluation and had an IEP developed and implemented although late and number who were no longer in the jurisdiction of the program)

* Describe the actions taken to address the noncompliance not verified as corrected including information regarding the nature of any continuing noncompliance, methods used to ensure correction, and any enforcement actions that were taken.

Explain why the state did not identify any findings of noncompliance if the State reported less than 100% compliance for the previous reporting period. For example: In the previous FFY, there were 20 children identified with noncompliance across three LEAs. The state verified correction of noncompliance for each of the three LEAs prior to issuing findings (pre-correction). To verify this correction, the state reviewed records for each of the 20 children and determined they had been found eligible and had an IEP developed and implemented although late or they were no longer in the jurisdiction of the LEA. In addition, the state reviewed one month of updated or subsequent data on children who were served in Part C and referred to Part B for each of the three LEAs and verified these children in each of the LEAs were found eligible and had an IEP developed and implemented by age three. The state confirmed each LEA was performing at 100% compliance and implementing the timely early childhood transition requirements.

4. Correction of Findings of Noncompliance Identified Prior to Previous FFY (Longstanding Noncompliance)

| Were the following completed? | Yes | No | Notes |
| --- | --- | --- | --- |
| 1. Provided number of findings of noncompliance identified |  |  |  |
| 1. Provided number of findings of noncompliance verified as corrected within one year |  |  |  |
| 1. Verified accuracy of number of findings of noncompliance subsequently corrected (Auto-calculated subtracting number of findings of noncompliance corrected in one year from the number of identified in previous FFY) |  |  |  |
| 1. Described how state verified that the source of noncompliance is correctly implementing the regulatory requirements if previous FFY finding were verified as corrected |  |  |  |
| 1. Described how state verified that each individual case of noncompliance was corrected if previous FFY finding were verified as corrected |  |  |  |
| 1. Described actions taken if previous FFY findings of noncompliance were not yet corrected |  |  |  |

Tips (if there were identified findings of noncompliance prior to the previous year, i.e., longstanding noncompliance):

* Describe **how** the state verified correction of **both** the regulatory requirements and the individual cases of noncompliance. Both must be verified as corrected for a finding of noncompliance to be considered corrected. See [OSEP Memorandum 09-02](https://sites.ed.gov/idea/files/policy_speced_guid_idea_memosdcltrs_osep09-02timelycorrectionmemo.pdf).

Describe **how** the state verified that each district/LEA is correctly implementing the regulatory requirements for timely services (e.g., performing at 100% compliance) by including the following:

* + Number of programs/districts that had findings of noncompliance. For an example, see 3 above in the section on *Tips (if there were identified findings of noncompliance in the previous year).*

Data source and the amount of updated or subsequent data reviewed to determine district/LEA is at 100% compliance. If different amounts of data were used to verify correction for each program/district describe those differences. For examples, see 3 above in the section on *Tips (if there were identified findings of noncompliance in the previous year).*

Describe **how** the state verified that each individual case of noncompliance was corrected by including the following:

* + Number of children with identified noncompliance from previous FFY
  + Number of children for whom records were reviewed to determine if they had been found eligible and had an IEP developed and implemented although late or were no longer in the jurisdiction of the LEA.
  + Data source used to verify child correction (e.g., data system, child record)

Total number of children verified as corrected (e.g., number who received an evaluation and had an IEP developed and implemented although late and number who were no longer in the jurisdiction of the program)

* Describe the actions taken to address the noncompliance not verified as corrected including information regarding the nature of any continuing noncompliance, methods used to ensure correction, and any enforcement actions that were taken.

|  |  |  |
| --- | --- | --- |
| **Suggested Citation**  DaSy Center, & ECTA Center. (2022). *APR Checklist and Tips—Indicator B-12: Early Childhood Transition.* SRI International. | | |
|  |  | |
| **About Us**  The contents of this document were developed under a grant, #H373Z190002, and a cooperative agreement, #H326P170001, from the Office of Special Education Programs, U.S. Department of Education. However, the content does not necessarily represent the policy of the U.S. Department of Education, and you should not assume endorsement by the Federal Government. DaSy Center Project Officers: Meredith Miceli and Amy Bae. ECTA Center Project Officer: Julia Martin Eile. | | IDEAS that Work. U.S. Office of Special Education Program logo |
| Find out more at [dasycenter.org](https://dasycenter.org/) and [ectacenter.org](https://ectacenter.org/). | | |