

SPP/APR Indicator C12 Reporting Guidance for FFY 2023 Submission

## Scenario 2: C1 Timely Services and Other IDEA Requirements – Findings Issued by Child



November 2024

The state has 15 EIS programs and issues findings by children. The state reviews its data system using a whole year of data to identify noncompliance with Indicator C1 [percent of infants and toddlers with IFSPs who receive early intervention services on their IFSPs in a timely manner (20 U.S.C. 1416(a)(3)(A) and 1442)].

The number of findings for Indicator C1 is equivalent to the number of children who did not receive early intervention services in a timely manner in the prior fiscal year. In this case, ***in FFY 2022, there were 55 children with untimely services. The programs with these 55 children received the number of written findings equivalent to the number of children in their program with untimely service.***

Additionally, ***8 findings were issued across other IDEA requirements related to Indicator C1*** that were monitored by the state in FFY 2022:

- Services provided in accordance with the IFSP.
  - [\[34 C.F.R. §303.340\(a\)\]](#), [\[34 C.F.R. § 303.344\(d\)\]](#), [\[34 C.F.R. §303.344\(f\)\(1\)\]](#)
- Services provided by qualified personnel.
  - [\[34 C.F.R. § 303.13\(c\)\]](#)

Finally, ***1 finding was issued as the result of a state complaint*** related to:

- Interim IFSPs – Provision of services before evaluations and assessments are completed.
  - [\[34 C.F.R. § 303.345\]](#)

**Table 1. Local Program Findings (Issued by Child) by Type**

(The two types are: Indicator C1 & Other IDEA Requirements. The Indicator C1 findings are counted and reported in two sections of the APR: within the Indicator C1 Findings of Noncompliance section and in the Indicator C12 table.)

		Indicator C1			C1: Other IDEA Requirements			Total Findings <b>Corrected and Verified Timely</b>
		Findings issued by child	Timely Corrected Findings	Findings NOT corrected timely	Findings from Other IDEA Requirements related to C1	Timely Corrected Findings	Findings NOT corrected timely	
<b>Program A</b>	x	10	10					
<b>Program B</b>	x	5	5					
<b>Program C</b>	x	8	0	8*				
<b>Program D</b>	x	0	0		5^	5		
<b>Program E</b>		0	0					
<b>Program F</b>		0	0					
<b>Program G</b>	x	13	12	1+	3^	2	1	
<b>Program H</b>		0	0					
<b>Program I</b>	x	8	8					
<b>Program J</b>		0	0					
<b>Program K</b>	x	6	6					
<b>Program L</b>	x	0	0		1◇	1		
<b>Program M</b>		0	0					
<b>Program N</b>	x	5	5					
<b>Program O</b>		0	0					
<b>TOTALS</b>	9	55	46	9	9	8	1	46 + 8 = 54

- Program C corrected all individual cases of noncompliance but did not demonstrate 100% compliance at a subsequent data review, so all findings remain open.
- ♦ Program G could not demonstrate that it had made corrections for each individual case of noncompliance (one case remains uncorrected), but did otherwise demonstrate 100% compliance at a subsequent data review.
- ^ Program D had 5 child findings related to “services provided in accordance with the IFSP.” Program G had two different types of related findings—2 related to “services provided in accordance with the IFSP” and 1 related to “services provided by qualified personnel”—and only the former were corrected timely. The latter individual case of noncompliance was not corrected timely.
- ◇ Program L had 1 child finding issued as the result of a state complaint related to Interim IFSPs - Provision of services before evaluations and assessments are completed.

**Table 2. Summary data for Scenario 2 presented as it would appear in DaSy’s IDEA Part C Indicator 12 Data Tracking Tool (Excel)**

	Total of Column A	Total of Column B	Total of Column C1	Total of Column C2	Total of Column D	Total of Column E [(C1+C2)/(A+B))*100]
<b>Total Findings for Indicator C1 and other IDEA requirements</b>	<b>55</b>	<b>9</b>	<b>46</b>	<b>8</b>	<b>10</b>	<b>84.38%</b>
<b>Compliance Indicator: C1.</b> <i>Percent of infants and toddlers with Individualized Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner.</i>	<b>Column A</b> Number of written findings of noncompliance identified in FFY 2022	<b>Column B</b> <i>Data entered in next section, Other IDEA Requirements, below</i>	<b>Column C1</b> Number of written findings of noncompliance from column A that were verified as corrected	<b>Column C2</b> <i>Data entered in next section, Other IDEA Requirements, below</i>	<b>Column D</b> Number of findings not timely corrected (A minus C1)	<b>Column E</b> Calculation of percent of findings <u>timely corrected</u> [(C1/A)*100]
<b>Findings Reported in SPP/APR Indicator C1</b>	55		46		9	83.64%
<b>Other IDEA Requirements</b>	<b>Column A</b> <i>Not applicable in Other IDEA Requirements section</i>	<b>Column B</b> Number of any other written findings of noncompliance identified in FFY 2022 (NOT reported in column A above), if applicable	<b>Column C1</b> <i>Not applicable in Other IDEA Requirements section</i>	<b>Column C2</b> Number of written findings of noncompliance from column B that were verified as corrected	<b>Column D</b> Number of findings not timely corrected (B minus C2)	<b>Column E</b> Calculation of percent of findings <u>timely corrected</u> [(C2/B)*100]
<b>Dispute resolution findings related to Indicator C1</b>		1		1	0	100.00%
<b>Fiscal findings (including audit findings) related to Indicator C1</b>						
<b>IDEA Related Requirements</b>						
Contents of an IFSP, Dates and Duration of Service [34 C.F.R. §303.344(f)(1)]		7		7	0	100.00%
Early intervention services – Qualified personnel [34 C.F.R. § 303.13(c)]		1		0	1	0.00%

## Scenario 2 Example C12 Responses Specific to Indicator C1 Questions in the APR

**APR Question:** Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator C1 due to various factors (e.g., additional findings related to other IDEA requirements).

In FFY 2022, a total of 64 findings were issued to 9 of the 15 EIS programs. Fifty five (55) of the findings issued to programs were related to Indicator C1 Timely services. Eight (8) findings were issued to 2 EIS programs based on the state’s monitoring of the following 2 related requirements:

- Services provided in accordance with the IFSP [\[34 C.F.R. §303.340\(a\)\]](#), [\[34 C.F.R. § 303.344\(d\)\]](#), [\[34 C.F.R. §303.344\(f\)\(1\)\]](#)
- Services provided by qualified personnel [\[34 C.F.R. § 303.13\(c\)\]](#)

As a result of state complaint, one program was issued a finding for another IDEA requirement:

- Interim IFSPs – Provision of services before evaluations and assessments are completed [\[34 C.F.R. § 303.345\]](#)

**APR Question:** Please describe, consistent with OSEP QA 23-01, how the State verified that the EIS program/provider is correctly implementing the regulatory requirements based on updated data.

### Example Response for Indicator C12 specific to C1:

A total of 64 findings were issued by child. For Indicator C1 Timely Service, 55 findings were issued across 7 EIS programs and for the other IDEA related requirements, 9 findings were issued across 3 EIS programs.

To verify correction of noncompliance for each of the 64 findings, the state reviewed subsequent data from the state’s data system to verify that each EIS program with findings were at 100% compliance and correctly implementing the regulatory requirements and that each individual case of noncompliance was corrected.

To verify that the 9 EIS programs were correctly implementing regulatory requirements for C1 timely services and/or each of the 3 other IDEA requirements for which findings were issued, the state reviewed one month of data from the state’s data system by program for each of these requirements. The data reviewed was collected subsequent to the identification of noncompliance for each requirement. The review revealed the following:

- 54 of the 64 findings were verified as timely corrected (within one year of identification) since data demonstrated the programs with these findings were at 100% compliance and correctly implementing the requirements and each case of noncompliance was also corrected (see how the state verified each individual case of noncompliance below).
- Two (2) findings, issued to one program on separate requirements, were not verified as timely corrected due to the individual cases of noncompliance not being corrected within one year of identification despite data reflecting that the program was at 100% compliance during the subsequent data review. This program was required to conduct a root cause analyses in coordination with the state, revise policies and procedures, and develop appropriate administrative supports to ensure correction of the 2 remaining findings, 1 related to

Indicator C1 Timely Services and the second finding on another IDEA requirement. The status of correction for these findings will be reported in the next SPP/APR.

- Eight (8) findings were not verified as corrected due to data not demonstrating 100% compliance at the subsequent data review despite each individual case of noncompliance having been corrected. This program was required to conduct a root cause analysis in coordination with the state, revise policies and procedures, provide training to personnel, and develop appropriate administrative supports to ensure correction. The status of correction for these 8 findings will be reported in the next SPP/APR.

**APR Question:** Please describe, consistent with OSEP 23-01, how the State verified that each *individual case* of noncompliance was corrected.

**Example Response for Indicator C12 specific to C1:**

The state identified 64 individual cases of noncompliance across 9 programs for Indicator C1 Timely Services and the 4 other IDEA requirements related to Indicator C1 that were monitored or investigated as part of a state complaint. The state reviewed the records of each of these 64 children and determined the following:

- Of the 55 individual cases of noncompliance related to Indicator C1 Timely Services, 54 children received their services, although late. One child had not received their services and has not yet been verified as corrected. (Note: 8 child level findings were not verified as corrected due to not demonstrating 100% compliance at a subsequent data review despite each child having received their services, although late.)
- Of the 7 individual cases of noncompliance related to “Services provided in accordance with the IFSP,” 7 children subsequently received services in accordance with their IFSP.
- For the 1 individual case of noncompliance related to “Interim IFSPs - Provision of services before evaluations and assessments are completed,” the child had an IFSP developed and services were provided in accordance with the IFSP.
- For the 1 individual case of noncompliance related to “Services provided by qualified personnel,” the child has not yet received services by qualified personnel and has not been verified as corrected.

**Suggested Citation**

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