JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ĂINA O KA MOKU'ĂINA 'O HAWAI'I



STATE OF HAWAI'I DEPARTMENT OF HEALTH KA 'OIHANA OLAKINO P. O. BOX 3378 HONOLULU, HI 96801-3378

In reply, please refer to: File:

December 29, 2023

The Honorable Ronald D. Kouchi, President and Members of the Senate Thirty-second State Legislature State Capitol, Room 409 Honolulu, HI 96813 The Honorable Scott K. Saiki, Speaker And Members of the House of Representatives Thirty-second State Legislature State Capitol, Room 431 Honolulu, HI 96813

Aloha President Kouchi, Speaker Saiki, and Members of the Legislature:

For your information, I am transmitting a copy of the following report.

Annual Report on The Status of The Early Intervention Programs For Infants And Toddlers With Disabilities And Their Families, 2023

Pursuant to section 93-16, Hawaii Revised Statutes, this report may be viewed online at:

https://health.hawaii.gov/opppd/department-of-health-reports-to-2024-legislature/

Sincerely,

Kenneth S. Fink, MD, MGA, MPH Director of Health

Enclosures

C: Legislative Reference Bureau Hawaii State Library System (2) Hamilton Library

REPORT TO THE GOVERNOR STATE OF HAWAI'I

2024

PURSUANT TO SECTION 641(e)(1)(D) AND 34 C.F.R. § 303.604(c) INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

REQUIRING THE INTERAGENCY COORDINATING COUNCIL TO PROVIDE THE SECRETARY OF THE U.S. DEPARTMENT OF EDUCATION AND THE GOVERNOR AN ANNUAL REPORT ON THE STATUS OF THE EARLY INTERVENTION PROGRAMS FOR INFANTS AND TODDLERS WITH DISABILITIES AND THER FAMILIES



PREPARED BY:

STATE OF HAWAI'I DEPARTMENT OF HEALTH HEALTH RESOURCES ADMINISTRATION FAMILY HEALTH SERVICES DIVISION CHILDREN WITH SPECIAL HEALTH NEEDS BRANCH EARLY INTERVENTION SECTION

February 2024

ANNUAL REPORT CERTIFICATION OF THE INTERAGENCY COORDINATING COUNCIL UNDER PART C OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

Under IDEA Section 641(e)(1)(D) and 34 C.F.R. § 303.604(c), the Interagency Coordinating Council (ICC) of each jurisdiction that receives funds under Part C of the IDEA must prepare and submit to the Secretary of the U.S. Department of Education (Department) and to the Governor of its jurisdiction an annual report on the status of the early intervention programs for infants and toddlers with disabilities and their families operated within the State. The ICC may either: (1) prepare and submit its own annual report to the Department and the Governor, or (2) provide this certification with the State lead agency's State Performance Plan/Annual Performance Report (SPP/APR)¹ under Part C of the IDEA. This certification (including the SPP/APR) is due no later than February 1, 2024.

On behalf of the ICC of the State/jurisdiction of I hereby certify that the ICC is: [please check one]

- 1. Submitting its own annual report (which is attached); or
- 2. Using the State's Part C SPP/APR for FFY 2022 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C SPP/APR for accuracy and completeness.²

I hereby further confirm that a copy of this Annual Report Certification and the annual report or SPP/APR has been provided to our Governor.

Signature of ICC Chairperson

Date

Address or email

Daytime telephone number

¹ Under IDEA Sections 616(b)(2)(C)(ii)(II) and 642 and under 2 C.F.R. § 200.329, the lead agency's SPP/APR must report on the State's performance under its SPP/APR and contain information about the activities and accomplishments of the grant period for a particular Federal fiscal year (FFY).

² If the ICC is using the State's Part C SPP/APR and it disagrees with data or other information presented in the State's Part C SPP/APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 1, 2024.

Hawai'i State Department of Health Part C Early Intervention FFY 2022 State Performance Plan/Annual Performance Report Executive Summary

Overview

The Hawai'i State Department of Health (HDOH) is the designated Lead Agency (LA) for Part C of the Individuals with Disabilities Education Act (IDEA). HDOH ensures the provision of early intervention (EI) services to eligible infants and toddlers with special needs and their families in accordance with the provision of Part C through the Early Intervention Section (EIS). EIS is under the supervision of the Children with Special Health Needs Branch within the Family Health Services Division, Health Resources Administration.

For FFY 2022 (07/01/2022 – 06/30/2023), there were 18 Early Intervention (EI) programs statewide that served infants and toddlers who met the eligibility criteria below.

Developmentally Delayed: Children under the age of three have a developmental delay in one or more of the following areas of development: physical, cognitive, communication, social or emotional, and adaptive based on one of the following criteria:

- <-1.0 SD in at least two or more areas or sub-areas of development
- <-1.4 SD in at least one area or sub-area of development
- Multidisciplinary team observations and informed clinical opinion when the child's scores cannot be measured by the evaluation instrument

Biological Risk: Children under the age of three with a signed statement or report by a qualified provider that includes a diagnosis of a physical or mental condition that has a high probability of resulting in developmental delay if early intervention services are not provided. This includes, but is not limited to, the following conditions:

- Chromosomal abnormalities
- Genetic or congenital disorders
- Severe sensory impairments
- Inborn errors of metabolism
- Disorders reflecting disturbance of the development of the nervous system
- Congenital infections
- Disorders secondary to exposure to toxic substances, including fetal alcohol syndrome
- Severe attachment disorders
- Autism Spectrum Disorder

The State of Hawai'i is committed to providing early intervention services to infants and toddlers with special needs and their families in accordance with Part C of IDEA. The following principles guide the provision of EI:

• The spirit of our island community embraces and values every child, woman, and man and is continually enriched by the diversity of its members.

- The community recognizes that families are the most important influence in their child's life.
- The development of infants and toddlers is best applied within the context of the family environment. Infants and toddlers with special needs and their families have inherent strengths and challenges and will be treated with respect and kindness.
- Families are viewed holistically and must be empowered to use their strengths to access resources for their children across agencies and disciplines. These resources must be nurturing, value cultural diversity, and aimed at improvement outcomes that involve developmental growth, safety, health, education, and economic security.
- All early intervention efforts are collaborative and work towards outcomes based on the changing priorities and needs of children with special health needs and their families.

The combined EI efforts and individual accountability across public and private agencies and providers help make this vision a reality.

Data Results

The Part C Lead Agency must submit a State Performance Plan/Annual Performance Report to the United States Department of Education, Office of Special Education Program (OSEP). OSEP identified 11 indicators that the LA must report on to ensure the Part C LA meets the requirements of Part C of the IDEA, including correction within one year of written notification of noncompliance. The Part C LA monitored all 18 El programs across the state and reported on FFY 2022 (07/01/2022 – 06/30/2023) data in the report submitted to OSEP on 02/01/2024.

Of the 11 applicable indicators, not including the sub-indicators for Child and Family Outcomes (Indicators 3 and 4, respectively):

- The target was met for four indicators with no slippage from the previous year's performance.
- The target was not met for seven indicators with:
 - four of seven indicators not having slippage from the previous year's performance
 - \circ three of seven indicators having slippage from the previous year's performance

Staff vacancies had a major impact on all the indicators that did not meet the target and/or experienced slippage.

Indicator	FFY 2021 Data	Target	FFY 2022 Data	Status	Slippage
1	73.89%	100%	74.50%	Target Not Met	No Slippage
2	99.93%	95.00%	99.93%	Target Met	No Slippage
3A.1	43.23%	47.45%	45.58%	Target Not Met	No Slippage
3A.2	64.64%	65.03%	61.82%	Target Not Met	Slippage
3B.1	55.59%	57.41%	57.64%	Target Met	No Slippage
3B.2	41.84%	42.72%	40.33%	Target Not Met	Slippage

Indicator	FFY 2021 Data	Target	FFY 2022 Data	Status	Slippage
3C.1	56.97%	59.34%	53.30%	Target Not Met	Slippage
3C.2	69.69%	67.58%	63.88%	Target Not Met	Slippage
4A	86.19%	88.08%	88.75%	Target Met	No Slippage
4B	87.94%	89.00%	88.84%	Target Not Met	No Slippage
4C	84.21%	85.00%	84.71%	Target Not Met	No Slippage
5	0.93%	0.98%	1.03%	Target Met	No Slippage
6	3.04%	3.22%	3.28%	Target Met	No Slippage
7	94.31%	100%	82.63%	Target Not Met	Slippage
8A	97.91%	100%	92.12%	Target Not Met	Slippage
8B	89.30%	100%	91.65%	Target Not Met	No Slippage
8C	83.81%	100%	88.12%	Target Not Met	No Slippage

Indicator 1: Timely Provision of Services.

Requirement: Early intervention services identified a child's Individualized Family Support Plan (IFSP), which must be initiated in a timely manner. The Hawai'i definition of timely services is consistent with OSEP's direction as included in the Frequently Asked Questions (FAQ) document of 10/13/06. Timely services are defined as: "within 30 days from when the parent provides consent for the IFSP service."

Data Source: On-site monitoring utilizing the Self-Assessment Monitoring tool.

Of the records reviewed, 74.50% of children received timely services. While the State did not meet the target of 100%, there was no slippage from the previous year's performance of 73.89%. The two predominant program reasons that impacted the provision of timely services were no documentation and staff vacancies.

Indicator 2: Services in Natural Environments

Requirement: Children primarily receive EI services in the home or community-based settings.

This indicator data is through the Hawai'i Early Intervention Data System. The December 1 Child Count data shows that 99.93% of children primarily received early intervention services in natural environments. Hawai'i exceeded the target of 95%, and there was no slippage from the previous year's performance of 99.93%.

Indicator 3: Early Childhood Outcomes

Requirement: Children who receive El services for at least six months 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.

Each outcome is measured in two categories:

- 1. Substantially increased rate of growth by the time they turn three years of age or exited the EI system.
- 2. Functioning within age expectations in each outcome by the time they turn three years of age or exited the EI system.

Data Source: Hawai'i Early Intervention Data System.

Of the children who exited during FFY 2022:

Outcome A: Positive Social-Emotional Skills (including social relationships)

1. Of the children who entered or exited EI below age expectations in Outcome A, 45.58% substantially increased their rate of growth by the time they turned three years of age or exited the EI system.

While the target of 47.45% was not met, there was no slippage from the previous year's performance of 43.23%.

2. Of the children who entered EI, 61.82% were functioning within age expectations in Outcome A by the time they turned three years of age or exited the EI system.

The target of 65.03% was not met, and there was slippage from the previous year's performance of 64.64%. Based on the meaningful difference calculator developed by the Early Childhood Technical Assistance Center, the slippage is not statistically significant.

Outcome B: Acquisition and Use of Knowledge and Skills (including early language/ communication)

1. Of the children who entered or exited EI below age expectations in Outcome B, 57.64% substantially increased their rate of growth by the time they turned three years of age or exited the EI system.

The target of 57.41% was exceeded, and there was an increase from the previous year's performance of 55.59%.

2. Of the children who entered EI, 40.33% were functioning within age expectations in Outcome B by the time they turned three years of age or exited the EI system. The target of 42.72% was not met, and there was slippage from the previous year's performance of 41.84%. Based on the meaningful difference calculator developed by the Early Childhood Technical Assistance Center, the slippage is not statistically significant.

Outcome C: Use of Appropriate Behaviors to Meet Their Needs

1. Of the children who entered or exited EI below age expectations in Outcome C, 53.30% substantially increased their rate of growth by the time they turned three years of age or exited the EI system.

The target of 59.34% was not met, and there was slippage from the previous year's performance of 56.97%.

2. Of the children who entered the EI, 63.88% were functioning within age expectations in Outcome C by the time they turned three years of age or exited the EI system.

The target of 67.58% was not met, and there was slippage from the previous year's performance of 69.69%.

For all Outcomes (A2, B2, C1, and C2) where there was slippage, the children that exited in FFY 2022 may have been negatively impacted by the COVID-19 pandemic and the stress it put on families such as being socially isolated, economic stressors, etc. The children likely entered the system prior to the COVID-19 pandemic and then exited after, which may account for the slippage in positive social-emotional skills. Hawai'i has also experienced staff shortages and turnovers that may have contributed to the slippage.

Indicator 4: Family Involvement

Requirement: Percent of families participating in Part C who report that EI services helped the family:

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

Data Source: National validated Family Outcomes Survey (FOS) developed by the Early Childhood Outcomes Center

All families participating in Early Intervention were provided an FOS from April to May 2023. There was a 51.82% survey response rate, an increase from the previous year's return rate of 47.74%. The demographics of the parents responding were not representative of the demographics of the children receiving EI services.

Based on the survey results, there was no slippage for all three outcomes; however, only Outcome A (88.75%) exceeded the target of 88.08%, while Outcome B (88.84%) and C (84.71%) did not meet the target of 89.00% and 85% respectively.

Indicator 5: Child Find (Birth to One)

Requirement: Report on percent of children birth to one with IFSPs.

Data Source: HEIDS and Census (for the denominator)

In FFY 2022, Part C served 1.03% of the population, which exceeded the target of 0.98% and increased from the previous year's performance of 0.93%.

Indicator 6: Child Find (Birth to Three)

Requirement: Report on percent of children birth to three with IFSPs.

Data Source: HEIDS and Census (for the denominator)

In FFY 2022, Part C served 3.28% of the population, which exceeded the target of 3.22% and increased from the previous year's performance by 3.04%.

Indicator 7: 45-Day Timeline

Requirement: An initial evaluation, initial assessment, and an initial IFSP must be conducted within Part C's 45-day timeline (within 45 days from the Part C referral date).

Data Source: HEIDS

In FFY 2022, 82.63% of eligible children received an initial evaluation and assessment, and an initial IFSP meeting was conducted within Part C's 45-day timeline. The target of 100% was not met, and there was slippage from the previous year's performance of 94.31%.

The increase in children referred and the long-term staff vacancies impacted the program's ability to complete initial IFSPs within the 45-day timeline.

Indicator 8: Early Childhood Transition

Requirement: Children that exited EI with timely transition planning that:

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 child's third birthday.

Hawai'i develops a transition plan, including transition steps outlined in IDEA, at the initial IFSP and reviewed at each subsequent IFSP.

B. Notified the State Educational Agency (SEA) and the Local Educational Agency (LEA) where the child resides at least 90 days prior to the child's third birthday, and at the discretion of all parties, not more than nine months prior to the child's third birthday.

Hawai'i has an opt-out plan developed with the Department of Education (DOE) and is on file with OSEP. Hawai'i DOE has a unitary system; however, the EI programs submit the Transition Notice to both the SEA and the home school unless the parent/legal guardian exercises the opt-out policy.

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

All children receiving EI services are considered potentially eligible for Part B preschool services.

Data Source: HEIDS

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Indicator	FFY 2021 Data	Target	FFY 2022 Data	Status	Slippage
8A	97.91%	100%	92.12%	Target Not Met	Slippage

All transition targets were not met, and there was slippage for 8A.

8B	89.30%	100%	91.65%	Target Not Met	No Slippage
8C	83.81%	100%	88.12%	Target Not Met	No Slippage

Indicator 9 & 10: not applicable

Indicator 11: State Systemic Improvement Plan

Requirement: Hawai'i SiMR for Demonstration Sites is Child Outcomes, Summary Statement 1: "Eligible infants and toddlers with disabilities will make greater than expected growth in socialemotional skills (including social relationships) by the time they exit early intervention."

Data Source: HEIDS for the three demonstration sites identified.

Of the children who entered or exited EI below age expectations for social-emotional skills in the three demonstration sites, 48.17% substantially increased their rate of growth by the time they turned three years of age or exited the EI system. This exceeded the target of 45.95%, and there was no slippage from the previous year's performance of 30.48%.

Correction of Noncompliance

Indicator	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	15	8	1	6
7	15	11	0	*3
8A	15	14	0	1
8B	16	9	3	4
8C	15	8	0	*6

Correction of Identified Noncompliance Identified in FFY 2021

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Indicator	Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
1	FFY 2020	2	0	*1
7	FFY 2019	1	0	1
8A	FFY 2020	1	1	0

Indicator	Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
8B	FFY 2020	1	0	*0
8C	FFY 2020	1	1	0
8C	FFY 2019	1	0	1

*One of the programs is no longer providing early intervention services as their contract was terminated effective January 01, 2024. The program currently serving the children will ensure the EI activity is implemented unless the child no longer resides in their jurisdiction.

For the programs that still have findings not yet verified as corrected, the respective programs' agencies were required to submit an agency plan on how they will support the respective programs in demonstrating compliance. The respective Program Managers were also required to complete the local contributing factor tool developed by the national ECTA Center and fill out a noncompliance worksheet for the respective indicator to identify strategies to address root causes.

The respective Program Managers also received technical assistance from the assigned Part C LA Quality Assurance Specialist.