Honorable Al Gobeille  
Secretary  
Vermont Agency of Human Services  
280 State Drive  
Waterbury, Vermont 05671  

Dear Secretary Gobeille:

The purpose of this letter is to provide a summary of the results of the differentiated monitoring and support (DMS) activities conducted by the U. S. Department of Education’s Office of Special Education Programs (OSEP) during an on-site visit to the Vermont Agency of Human Services (AHS) on April 29, 2019 to May 1, 2019. OSEP’s visit focused on specific aspects of AHS’s implementation of the early intervention program for infants and toddlers with disabilities and their families under Part C of the Individuals with Disabilities Education Act (IDEA).

Participants during the visit included staff from Vermont Agency of Human Services, Vermont’s Early Intervention Service Providers (EIS), Vermont’s Agency of Education, the National Center for Systemic Improvement, the Early Childhood Personnel Center, and the Early Childhood Technical Assistance Center.

As part of the DMS process, OSEP conducts an organizational assessment (OA) of factors to identify States’ progress in meeting performance standards and complying with the requirements of Part C of the IDEA and its implementing regulations, the Education Department General Administrative Regulations and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. OSEP uses the information from the OA and an Engagement Decision Tree to make decisions about how it will engage with States over the Federal fiscal year (FFY). The FFY 2018 DMS areas were: 1) Results; 2) Compliance; 3) State Systemic Improvement Plan (SSIP); and 4) Fiscal.

On October 26, 2018, OSEP sent the Vermont Agency of Human Services’ DMS notice to Danielle Howes, Vermont’s Part C Coordinator. OSEP’s notice provided a level of engagement of universal, targeted, or intensive for each of the four areas OSEP identified for DMS. The DMS notice represents a snapshot of the most recently available data in each of the four DMS areas. The notice also identified the monitoring and support activities that would be carried out to address the factors contributing to the elevated need for monitoring and support in each of the areas that were identified for intensive engagement. We have attached a copy of the DMS notice for your convenience.

The enclosure describes the: 1) Background; 2) Monitoring\(^1\) and Technical Assistance Activity for each DMS area; 3) Summary; and 4) OSEP’s conclusion, including Next Steps and Required Actions. If OSEP issued findings of noncompliance with the IDEA requirements, you would find

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\(^1\) Monitoring is broadly defined as including activities examining both compliance and performance issues and encompasses traditional monitoring reviews and technical assistance activities.

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The Department of Education’s mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.
specific details about the finding of noncompliance, along with the respective citations, and the corrective action required to address the identified finding of noncompliance.

We appreciate your efforts to improve results for infants and toddlers with disabilities. If you have any questions, please contact Curtis J. Kinnard, your OSEP State Lead, at 202-245-7472.

Sincerely,

Laurie VanderPloeg
Director
Office of Special Education Programs

cc: Danielle Howes, Part C Coordinator
Enclosure
DMS Notice
Background

OSEP has a Differentiated Monitoring and Support (DMS) system as a component of Results Driven Accountability to improve results for children with disabilities under the Individuals with Disabilities Education Act (IDEA). DMS is designed to help the Department identify potential grantee risk and to assist OSEP in effectively using its resources to monitor State grantees as they implement the IDEA in their States. DMS addresses State-specific and Entity²-specific needs in the areas of results, compliance, State Systemic Improvement Plan (SSIP), and fiscal by differentiating levels and types of monitoring and support based on each State’s and Entity’s unique strengths, progress, and challenges in each area.

During the 2019 DMS visit to Vermont OSEP examined the State’s compliance system with a focus on the implementation of the IDEA Part C requirements related to timely service provision to infants and toddlers with disabilities and their families, early childhood transition notification and early childhood transition conference³. In reviewing Vermont’s systems for compliance, OSEP:

- Reviewed the State’s systems for collecting and reporting data submitted for selected indicators in the State’s Federal fiscal year (FFY) 2016 Annual Performance Report (APR)/State Performance Plan (SPP)

- Reviewed the following:
  - Previous years’ IDEA Part C APRs, including the SSIPs,
  - The State’s FFY 2018 IDEA Part C Application,
  - The State’s Part C to B Interagency Agreement,
  - The State’s Web site for its IDEA Part C Early Intervention Program, and
  - Other pertinent information related to the State’s efforts to improve results for children with disabilities.

² States include each of the 50 States, the District of Columbia, and the Commonwealth of Puerto Rico and Entities include freely associated States, outlying areas, and the Bureau of Indian Education.

³ Early childhood transition and early childhood transition conference in this enclosure specifically refer to IDEA regulation 34 C.F.R. § 303.209 Transition to preschool and other programs. (b)(1) Notify the local educational agency for the area in which the child resides that the child will shortly reach the age of eligibility for preschool services under Part B of the Act, as determined in accordance with State law; (c)(1) In the case of a child who may be eligible for preschool services under Part B of the Act, with the approval of the family of the child, convene a conference among the lead agency, the family, and the local educational agency at least 90 days, and at the discretion of the parties, up to 6 months, before the child is eligible for the preschool services, to discuss any services that the child may receive under Part B of the Act.
• Gathered additional information through surveys, focus groups, or interviews with:
  o Danielle Howes, Vermont’s Part C Coordinator
  o State personnel responsible for implementing compliance systems including:
    ▪ Morgan Cole, CIS Director,
    ▪ Samantha Higgins-Parrales, Interim CIS Data Manager,
    ▪ Mira Anniballi, CIS Data Clerk, and
    ▪ Kati Ringer, CIS Personnel Development Coordinator.

During the visit, OSEP did not examine the areas of results, SSIP, or fiscal requirements because Vermont’s level of engagement in each of these areas was universal. However, OSEP will continue to work with the State on these areas during regularly scheduled phone calls and provide universal technical assistance (TA) through National TA calls, webinars, and documents posted on our Web sites.

Vermont Annual Performance Report Determinations

The U.S. Department of Education’s (Department), FFY 2015 through 2019 determinations for Vermont under Part C of the IDEA under Sections 616 and 642 of the IDEA, was needs assistance. In FFY 2019 (based on FFY 2017 data), the State’s determination score was 71.88%. In FFY 2018 (based on FFY 2016 data), Vermont’s determination score was 73.21%, which increased from 70.54% in FFY 2017 (based on FFY 2015 data); consequently, Vermont’s determination was needs assistance (see Sections 616 and 642 of IDEA). The table below highlights the indicator data that is the basis for Vermont’s targeted score for assistance.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Indicator 8B: TIMELY Transition notification</th>
<th>Indicator 8C: TIMELY transition conference</th>
<th>Additional Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY 2016 APR</td>
<td>88.08%</td>
<td>90.58%</td>
<td>Longstanding noncompliance: Uncorrected unidentified noncompliance 2 to 4 years</td>
</tr>
<tr>
<td>FFY 2017 APR</td>
<td>89.51%</td>
<td>84.80%</td>
<td>89.80%</td>
</tr>
</tbody>
</table>

Vermont Service and Monitoring Structure

Vermont’s IDEA Part C early intervention services (EIS) are part of Vermont’s statewide Children’s Integrated Services (CIS) Program. Vermont’s Agency of Human Services (AHS) administers CIS. The Vermont Agency of Education is Vermont’s co-lead for IDEA Part C services. An Interagency Agreement between AHS and the Vermont Agency of Education governs this relationship. AHS contracts with 12 regional non-profit, community-based organizations to deliver CIS services. Regionally based parent-child centers most often provide
EIS under those contracts. Vermont CIS early intervention provides some form of assistance to approximately 2,100 children annually (up from 1,600 in FFY 2013).

Based on the summary included in Vermont’s FFY 2016 APR, CIS conducts contract monitoring on three regions annually. Contract monitoring in each region occurs at least once every four years. Vermont’s monitoring includes client file reviews for adherence to contractual requirements. A client file review consists of the following areas: timeliness of service delivery and transition processes; the provision of services in the natural environment(s) identified by the child’s family; parent/guardian’s participation in their child’s individualized family service plan (IFSP) team and the development of their child’s IFSP, including outcomes that address the family’s hopes and priorities. As part of its monitoring process, Vermont provides each region a summary of the region’s monitoring visit, including any identified areas of strength or areas in need of improvement. Based on the Vermont monitoring report, each Region is required to submit a Quality Improvement Plan to address any areas the State identifies that need improvement.

Compliance

General Supervision

Under IDEA Section 635(a)(10) and 34 C.F.R. § 303.120 (Lead agency role in supervision, monitoring, funding, interagency coordination, and other responsibilities), the State lead agency must have a general supervision system that identifies and corrects noncompliance in a timely manner. Each system must include a single line of responsibility in a lead agency designated or established by the Governor that is responsible for the following:

1. the general administration and supervision of programs and activities administered by agencies, institutions, organizations, and EIS providers receiving assistance under Part C of the Act;

2. the monitoring of programs and activities used by the State to carry out Part C of the Act (whether or not the programs or activities are administered by agencies, institutions, organizations, and EIS providers that are receiving assistance under Part C of the Act), to ensure that the State complies with Part C of the Act, including—

   • Monitoring agencies, institutions, organizations, and EIS providers used by the State to carry out Part C of the Act;

   • Enforcing and obligations imposed on those agencies, institutions, organizations, and EIS providers under Part C of the Act and these regulations;

   • Providing technical assistance, if necessary, to those agencies, institutions, organizations, and EIS providers;

   • Correcting any noncompliance identified through monitoring as soon as possible and in no case later than one year after the lead agency’s identification of the noncompliance.
Reporting on Correction of Noncompliance in the APR required under Sections 616 and 642 of the IDEA, OSEP Memorandum 09-02 (OSEP Memo 09-02), dated, October 17, 2008, states that in order to verify that previously identified noncompliance has been corrected, the State must verify that the EIS program and/or EIS provider:

1. has corrected noncompliance for each child, unless the child is no longer within the jurisdiction of the EIS program and/or provider;

2. 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

3. if needed, change, or require each EIS program or EIS provider to change, policies, procedures and/or practices that contributed to or resulted in noncompliance.

In addition, the State must verify that its EIS programs and EIS providers have corrected noncompliance consistent with OSEP Memo 09-02 by:

- Accounting for all instances of noncompliance, including noncompliance identified: (a) through the State’s on-site monitoring system or other monitoring procedures such as self-assessment; (b) through the review of data collected by the State, including compliance data collected through a State data system; and (c) by the Department;

- Identifying where (EIS programs) noncompliance occurred, the percentage level of noncompliance in each of those sites, and the root cause(s) of the noncompliance.

A vital component of the monitoring visit with Vermont was a discussion of the State’s monitoring system and how the State’s monitoring fits into the overall system of general supervision that the State implements including how the State addresses identification and correction of noncompliance (under OSEP Memo 09-02). Based on OSEP’s overview of the OSEP Memo 09-02 requirements during the visit, Vermont staff acknowledged that they did not understand Prong 1 and 2 requirements, notably the allowable exceptions under Identification and Correction of Noncompliance, and that has resulted in some instances of long-standing noncompliance in the State’s APR remaining open rather than being closed. Specifically, Vermont staff stated that in the APR data, it reported for Indicator 1 and Indicator 8, the State included data on Part C children who left the CIS system or jurisdiction.

As part of the on-site discussion concerning identification and correction of noncompliance, Vermont staff outlined monitoring concerns from some regional CIS EIS providers. The concerns highlighted that some practitioners were late in developing timely local educational agency (LEA) notifications for toddlers exiting Part C services with a disability who were found to be potentially eligible for Part B services per IDEA requirements. In the instances where Vermont identified concerns at the local level, the late notifications also delayed regional scheduling of transition conferences. To systemically correct this issue, Vermont stated that they had provided training, technical assistance, and written guidance around the transition process.

During the discussion of identification and correction of noncompliance, Vermont staff stated that it was not Vermont’s current practice to issue formal written findings of noncompliance through its monitoring or data collection procedures. Vermont staff indicated that currently, the
State monitors regional data monthly and holds technical assistance calls with each region to address any areas that need improvement. While Vermont provides verbal notification of concerns and issues a written summary of technical assistance, Vermont does not issue a formal finding of noncompliance with a one-year timeline for correction. Also, OSEP met with representatives from each of Vermont's regional service centers. During those discussions, regional service providers indicated that it would be helpful if Vermont clarified the roles and responsibilities required in the transition process especially since in many areas of the State there are insufficient numbers of physical, speech, and occupational therapists to meet the demand.

Vermont reviewed monitoring data with OSEP that highlighted that the regions of the State serving the highest numbers of eligible children are experiencing the highest level of noncompliance. To systemically address this issue, Vermont staff highlighted the State’s work in completing a new transition memorandum between Part C and Part B that has been approved by OSEP. Vermont underscored that the State CIS Data Manager conducts calls monthly with all regional service providers. Vermont staff stated that it expects that these two interventions will improve the understanding and implementation of roles and responsibilities of providers and school staff for Part C and Part B.

**Central Directory**

Under, IDEA Section 635(a)(7) at 20 U.S.C. 1437(a)(7) and 34 C.F.R. § 303.117 (Central Directory). The central directory must include accurate, up-to-date information about —

1. Public and private EIS, resources, and experts available in the State;
2. Professional and other groups including parent support, and training and information centers, that provide assistance to infants and toddlers with disabilities and their families; and
3. Research and demonstration projects being conducted in the State relating to infants and toddlers with disabilities.

As part of each State’s child find and public awareness efforts to identify children in need of services at the earliest opportunity and make resources available to parents, IDEA requires each State to maintain a central directory that is accessible to the general public through the State lead agency’s Web site and other appropriate means.

Vermont stated that community-based organizations provide Vermont's CIS services with qualified and supervised professionals including nurses, early interventionists, and child development specialists. CIS professionals work with families to develop a plan to meet their goals. Service providers provide services at home, in a childcare program, or another location where families are comfortable. CIS fiscal agents or their subcontractors employ developmental educators, home visitors (nurses and social workers), and service coordinators. Physical, speech, and occupational therapists, as well as hearing, vision, and autism consultants, are individuals that are either self-employed or working within a non-profit organization, designated health/mental health agency, hospital or other clinic-based settings. CIS early intervention practitioners have, at a minimum, a bachelor’s degree in early childhood special education, social
work, or another related human services field. CIS early intervention providers performing assessments maintain a CIS Early Intervention Certificate.

As part of the discussion concerning Vermont’s EIS providers, Vermont staff stated that Vermont’s IDEA Part C program does not have a statewide central directory that lists providers as required by IDEA Section 635(a)(7) and 34 C.F.R. §§ 303.117. Vermont acknowledged that it understands that the State must include a statewide central directory that is accessible to the general public through the lead agency’s Web site. It must also include accurate, up-to-date information about public and private EIS, resources, and experts available in the State (https://dfc.vermont.gov/child-development/cis).

**FFY 2016 Indicator 1 — Timely Services Provision: 88.08%**

Based on discussion with Vermont staff during the on-site visit and prior TA calls, staff indicated that the State has concerns with providing timely service provision to infants and toddlers with disabilities and their families. During the on-site visit, Vermont provided an update of its improvement strategies and a progress report. Although Vermont provided improvement strategies, the State is in the process of assessing the outcome of those strategies based on the following issues:

- An increase in medical diagnoses. EIS providers reported an increase in the complexity of the needs and services of infants and toddlers in the child protection system. Documentation from the FFY 2016 APR indicated that children taken into State custody might experience several moves in foster care placements, which delayed CIS EIS from starting or interrupts the delivery of services.

- The need for increased professional development for EIS providers.

- Lack of personnel, and recruitment difficulty of professional EIS providers.
  - Vermont has difficulty finding private therapists to serve children under the age of three in their natural environments. The State data review indicated services not delivered timely were due to the lack of availability of private therapists and early intervention practitioners.
  - A review of the data for Indicator 1 found that 66% of the services that were not delivered timely was due to the unavailability of private therapists, while 29% was due to the unavailability of early intervention practitioners (predominantly specialized instruction).

Vermont’s definition of timely services provision is when all services are provided to an infant or toddler enrolled in the early intervention program within 30 days of the parent/caregiver’s signed consent. In discussion with OSEP, Vermont staff stated that contractors agreed that if services started any time after 30 days from formal consent, the contractor is determined by the State to be out of compliance. For services planned to begin later than 30 days, the State also reviewed to determine that those services were delivered as planned and consented to by the family. The timeliness of these services is also a factor in determining compliance within this
indicator. During an on-site discussion about Vermont’s data system, the State reported that each region submits monthly data to the State. The State then imports these data into the State’s database. As part of Vermont’s internal data review, the State recognized that there was inconsistency in the data submitted by regions. To correct the problem of data inconsistency, Vermont conducts monthly audits of all regions to ensure that the data submitted is complete, valid, and reliable. Vermont stated that the State data team identifies any trends in the data and provides guidance and training to all required staff for any regional provider when there are instances of noncompliance. As part of Vermont’s ongoing efforts to improve Indicator 1 data, the State indicated that it is:

- Collaborating with the Early Childhood Personnel Center Leadership Institute to assist the CIS staff in learning strategies for leading systems change;

- Improving family survey data by working with the IDEA Data Center;

- Working with the National Center for Systemic Improvement to improve family outcomes

- Working with the Vermont Learning Collaborative to learn strategies for implementing systems change; and

- Providing intensive technical assistance to all regions, especially those regions with longstanding noncompliance.

**FFY 2017 Indicator 1 — Timely Services Provision: 89.51%**

Vermont’s FFY 2017 APR data showed that there was 1.43% increase in compliance with the timely services provision requirements of Indicator 1 from the State’s FFY 2016 data.

Based on discussion with Vermont staff and the review of FFY 2018 APR data, many findings were due to circumstances where EIS providers failed to meet timelines due to the following:

- A lack of providers’ capacity (EIS and pediatric therapy providers).

- Delays occurred with early intervention development educators and speech language pathologists.

Vermont’s annual Recruitment and Retention Survey conducted by the State, showed that Vermont experienced a high degree of turnover of development educators. Vermont’s small population of infants and toddlers enrolled in Part C services impacted the retention of therapy providers. Vermont staff stated that there are too few Part C children to make up full-time caseloads for therapists, which resulted in the inability to prioritize their caseload. According to staff this action presented challenges for the Part C Coordinator because many therapists enter into contracts with public schools or had clinic-based or adult caseloads, which resulted in lack of services for infants and toddlers. Vermont staff also stated that many speech, physical, and occupational therapist are in private practices. Other areas worth mentioning are difficulties in
billing insurance, and the lower caseloads associated with providing home-based services because of the long travel time from one location to the next.

Based on discussions with on-site staff, as of a result of continued noncompliance with one large regional early intervention program, the State began providing intensive technical assistance to that program. Data analysis showed that much of the noncompliance was due to development educators employed by the program.

**FFY 2016 Indicator 8B — Transition Notification: 90.58%**

During the monitoring visit Vermont Part C staff along with the Vermont Interagency Coordinating Committee, and CIS early intervention providers reviewed the data for Indicator 8B and determined that the root cause for noncompliance was related to CIS early intervention practitioners failing to correctly calculate the tolling of days. Vermont staff stated that in many cases timelines were missed by between one to five days because regional EIS coordinators were counting by months (a counting system that assigns the same number of days to every month) rather than actual calendar days. To address this issue the State has required practitioners to use date calculators rather than calendars and Vermont has implemented the use of a Microsoft Excel reporting form, which enables regional CIS early intervention programs to see their degree of compliance upon submission of their data. Vermont reported that, based on the use of date calculators, many regions showed improvement in meeting the Federally required timelines for Indicator 8B. In addition to implementing the use of date calendars among CIS coordinators, Vermont staff stated to OSEP that the State had provided regions with training, technical assistance, and written guidance around Indicator 8B to ensure all practitioners understand and comply with the Federal requirements. Vermont monitors regional data monthly ensuring that service providers send all LEA notifications, even if late, and hold technical assistance calls with each region to address any areas of noncompliance. Vermont staff said that their root cause analysis of Indicator 8B data indicated:

- Substantial increases in the number of eligible children being served (54% increase since 2014);

- Level funding for staffing needs of service coordinators and developmental educators since 2014 despite an increase in the number of eligible children that has resulted in a staffing shortage; and,

- A high rate of turnover among EIS providers.

**FFY 2017 Indicator 8B — Transition Notification: 84.80%**

Vermont’s FFY 2017 APR data showed that there was a 5.78% decrease in compliance with the Transition Notification requirement from the State’s FFY 2016 data.

Based on on-site-visit conversations and conference calls with the State, Vermont staff stated that the root cause for the decline was due to regional early intervention practitioners not correctly implementing the regulatory requirements for developing timely LEA notifications for

The State in its conversation with OSEP, stated that training, technical assistance, and written guidance has been provided to regions to ensure all practitioners understand and comply with Federal requirements. State staff also monitor regional data monthly to ensure that regions make timely corrections, that all LEA notifications are sent, and that technical assistance calls are conducted with regions to address any noncompliance issues.

In addition to the above, Vermont’s staff, stated that regions were required to identify root causes for the noncompliance and to submit implementation strategies and action plans for the State to review and approve. To support regions, the State provided a date calculator within the data submission template to ensure compliance with IDEA requirements.

**FFY 2016 Indicator 8C — Transition Conferences: 87.94%**

During conversations with Vermont staff and upon reviewing information submitted in Vermont’s FFY 2016 APR, OSEP learned that the State met with the State’s Interagency Coordinating Committee and stakeholders from each of the 12 regions of the State to review data and consider root causes. This analysis indicated that 12 of 56 instances of noncompliance were related to problems in planning, scheduling, or executing timely transition planning with school staff. Another 12 instances of noncompliance resulted from providers who did not complete their child determinations of potential Part B eligibility on time. Service Coordinators also cited the time required to pursue evaluations as well as administrative reasons as the primary causes of noncompliance related to conducting timely transition conferences. Vermont staff indicated to OSEP that the State expects that the use of electronic date calculators will help significantly in meeting the timelines for this IDEA requirement. Vermont staff also highlighted the new State Interagency Agreement between Part C and Part B that clarified the roles and responsibilities of schools, EIS coordinators, and EIS providers in the provision of timely transition conferences.

**FFY 2017 Indicator 8C — Transition Conferences: 89.80%**

Vermont’s FFY 2017 APR data showed that there was a 1.86% increase in compliance with the Transition Conference requirements from the State’s FFY 2016 data.

Based on OSEP’s conversation with the State, Indicator 8C and 8B had similar issues. For example, the State determined that some regional early intervention practitioners were not correctly implementing the regulatory requirements for developing timely LEA notifications for toddler exiting Part C services, who were potentially eligible for Part B services in accordance with State special education rules. The results of not properly implementing regulatory requirements caused a delay in scheduling of transition conferences. According to Vermont’s staff, the State provided training, technical assistance, and written guidance concerning the transition process. In addition, to monitoring regional data the State conducted monthly desk audits of the State’s database and held technical assistance calls with each region to address noncompliance issues. Like Indicator 8B, regions with noncompliance were required to identify root causes for the noncompliance and submit implementation strategies and action plans for the
State to review and approve. The State provided to regions date calculators within the date submission template for submitting data to the State and to improve accuracy.

OSEP Conclusion

Finding 1: The State does not have a central directory.

Based on the review of documents, analysis of data, and interviews with Vermont personnel, as described above, OSEP concludes that Vermont does not have a central directory that is accessible to the general public per the IDEA requirements in IDEA Section 635(a)(7) at 20 U.S.C. 1437(a)(7) and 34 C.F.R. § 303.117.

To verify that the EIS program and/or provider are following IDEA requirements, Vermont must ensure that there is a central directory that is accessible to the general public through the State lead agency’s Web site and other appropriate means and includes accurate, up-to-date information about—

4. Public and private EIS, resources, and experts available in the State;

5. Professional and other groups including parent support, and training and information centers, that provide assistance to infants and toddlers with disabilities and their families; and

6. Research and demonstration projects being conducted in the State relating to infants and toddlers with disabilities.

Required Actions/Next Steps

1. Within 90 days from the date of this letter, the AHS must provide documentation that it has established and is maintaining a central directory that lists EIS providers statewide as required by 34 C.F.R. §§ 303.117.

2. Within 90 days from the date of this letter, AHS must provide a link to, its Web site that includes a central directory that is accessible to the general public and meets IDEA requirements under Part C Section 635(a)(7) at 20 U.S.C. 1437(a)(7) and 34 C.F.R. § 303.117.

Finding 2: Vermont does not have formal written policies and procedures to issue findings of noncompliance when Vermont identifies noncompliance through State monitoring or data collection procedures.

Based on the review of documents, analysis, and interviews with staff responsible for implementation of Vermont’s monitoring system for data collection and reporting for SPP/APR Indicators 1, 8B, and 8C in Vermont for FY 2016 SPP/APR, OSEP determined that Vermont does not have written policies and procedures in place to issue formal written findings of noncompliance when Vermont identifies noncompliance through its monitoring or data collection procedures.
Under IDEA Section 635(a)(10) and 34 C.F.R. § 303.120, the State must have a general supervision system that corrects noncompliance in a timely manner. In addition, the State must ensure that it verifies correction of noncompliance consistently with OSEP Memo 09-02.

When reviewing data from a database, Vermont must make a finding of noncompliance if data in a database demonstrates noncompliance. The State must review data from its database at least once each SPP/APR reporting period to identify noncompliance. The State may identify specific time(s) during each reporting period when it will review compliance data in the database and identify noncompliance. Vermont may review data in the database at other times as well, for purposes such as targeting resources, guidance, or other technical assistance.

The actions that Vermont must take if it collects or receives information indicating noncompliance include:

1. Make a finding of noncompliance;

2. Verify whether data demonstrate noncompliance, and then issue findings if data do demonstrate noncompliance; and

3. Verify the EIS Program has corrected noncompliance.

If the EIS Program corrects any identified noncompliance before Vermont issues a written finding of noncompliance, Vermont may choose to exercise its ability to determine pre-finding correction as outlined in OSEP Memo 09-02.

**Required Actions/Next Steps**

1. Within 90 days from the date of this letter, AHS must provide documentation of the proposed corrective action plan, including actions and timeline to adopt final written policies and procedures to:
   - Identify noncompliance based on monitoring and/or a database to include corrective actions for corrections of noncompliance as required by OSEP Memo 09-02 and 34 C.F.R. § 303.700(e).
     - In exercising its monitoring responsibilities under 34 C.F.R. § 303.700(d) of this section, the State must ensure that when it identifies noncompliance with the requirements of this part by EIS programs and providers that the noncompliance is corrected as soon as possible and in no case later than one year after the State's identification of the noncompliance.
   - Enforcement procedures for noncompliance.
   - Identify a specific time during the State’s fiscal year for APR reporting purposes when it will review compliance data in the database and identify noncompliance.
   - Identify appropriate technical assistance support from OSEP-funded TA centers, to include OSEP when applicable.
   - Include procedures to ensure that all EIS providers are trained and aware of their responsibilities based on IDEA requirements.
2. The State must report, in its FFY 2018 SPP/APR (due on February 3, 2020) under the introduction in the general supervision discussion, on its progress and procedures for determining noncompliance, corrective actions, and the State’s verification process and enforcement procedures when noncompliance issues have been identified with regional EIS providers and subcontractors.

3. The State’s updates under its corrective action plan and its FFY 2018 SPP/APR submission on general supervision must continue to reflect the IDEA general supervision and monitoring requirements. Under IDEA Section 635(a)(10) and 34 C.F.R. § 303.120 (Lead agency role in supervision, monitoring, funding, interagency coordination, and other responsibilities), the State lead agency must have a general supervision system that identifies and corrects noncompliance in a timely manner. Each system must include a single line of responsibility in a lead agency designated or established by the Governor that is responsible for the following: (1) the general administration and supervision of programs and activities administered by agencies, institutions, organizations, and EIS providers receiving assistance under Part C of the Act; (2) the monitoring of programs and activities used by the State to carry out Part C of the Act (whether or not the programs or activities are administered by agencies, institutions, organizations, and EIS providers that are receiving assistance under Part C of the Act), to ensure that the State complies with Part C of the Act, including—

- Monitoring agencies, institutions, organizations, and EIS providers used by the State to carry out Part C of the Act;

- Enforcing and obligations imposed on those agencies, institutions, organizations, and EIS providers under Part C of the Act and these regulations;

- Providing technical assistance, if necessary, to those agencies, institutions, organizations, and EIS providers;

- Correcting any noncompliance identified through monitoring as soon as possible and in no case later than one year after the lead agency’s identification of the noncompliance.

OSEP Memo 09-02 states that in order to verify that previously identified noncompliance has been corrected, the State must verify that the EIS program and/or EIS provider:

1. has corrected noncompliance for each child, unless the child is no longer within the jurisdiction of the EIS program and/or provider;

2. 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

3. if needed, change, or require each EIS program or EIS provider to change, policies, procedures and/or practices that contributed to or resulted in noncompliance.
In addition, the State must verify that its EIS programs and EIS providers have corrected noncompliance consistent with OSEP Memo 09-02 by:

- Accounting for all instances of noncompliance, including noncompliance identified: (a) through the State’s on-site monitoring system or other monitoring procedures such as self-assessment; (b) through the review of data collected by the State, including compliance data collected through a State data system; and (c) by the Department;

- Identifying where (EIS programs) noncompliance occurred, the percentage level of noncompliance in each of those sites, and the root cause(s) of the noncompliance.

**Update on Actions and Data Since OSEP’s Visit**

Once OSEP has received evidence that the State has completed required actions for identifying and correcting noncompliance through State monitoring or data collection procedures for Indicators 1, 8B and 8C. OSEP will continue to monitor the State’s progress using the State’s FFY 2018 SPP/APR and subsequent annual data submissions.
Differentiated Monitoring and Support Engagement Decisions:

Vermont
2018–2019

This year we have selected four States for on-site visits as part of OSEP’s Differentiated Monitoring and Support (DMS) system. These selections were based on the relative number of intensive and targeted Levels of Engagement (LOEs) across all states. Your State has been selected for an on-site visit.

OSEP’s Differentiated Monitoring and Support (DMS) system is a component of Results Driven Accountability. DMS is designed to identify potential grantee risk to the Department and to assist OSEP in effectively using its resources to monitor grantees. DMS addresses State-specific needs in the areas of results, compliance, State Systemic Improvement Plan (SSIP), and fiscal by differentiating levels and types of monitoring and support based on each State’s unique strengths, progress, and challenges in each area.

DMS is a multi-tiered model for monitoring and providing support based on the principle that supports are first provided at a core or universal level to address the needs of all States effectively. Targeted monitoring and support are generally based on OSEP’s identification of common needs among multiple States. Intensive monitoring and support are reserved for those States with the most intense or complex challenges to implementation.

OSEP has assessed States’ and Entities’ progress in meeting performance standards and compliance with the legal requirements of the Individuals with Disabilities Education Act, the Education Department General Administrative Regulations and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. This information was used to help OSEP make decisions about a State’s or Entity’s levels of engagement for monitoring and support.

The charts below specify your State’s level of engagement in each area — results, compliance, fiscal, and SSIP.
**Results | Level of Engagement: Universal**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Existing/Current Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Factors are only listed when the level of engagement is targeted or intensive.</td>
<td>OSEP continues to make information and technical assistance (TA) resources available and provide universal support to all States.</td>
</tr>
</tbody>
</table>

**New Engagement**

OSEP will provide universal support to improve data quality and child performance outcomes related to positive social relationships, skills and knowledge.

**Fiscal | Level of Engagement: Universal**

<table>
<thead>
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</tr>
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<tbody>
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<td>• Factors are only listed when the level of engagement is targeted or intensive.</td>
<td>OSEP continues to make information and TA resources available and provide universal support to all States.</td>
</tr>
</tbody>
</table>

**New Engagement**

OSEP will provide the State with universal support related to Part C fiscal requirements.

**Compliance | Level of Engagement: Intensive**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Existing/Current Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Indicator 1: Timely service provision: 88.08%</td>
<td>OSEP continues to make information and TA resources available and provide universal support to all States.</td>
</tr>
<tr>
<td>• Indicator 8B: Transition notification: 90.58%</td>
<td></td>
</tr>
<tr>
<td>• Indicator 8C: Timely transition conference: 87.94%</td>
<td></td>
</tr>
<tr>
<td>• Longstanding noncompliance: Uncorrected identified noncompliance 2 to 4 years</td>
<td></td>
</tr>
</tbody>
</table>

**New Engagement**

OSEP will gather additional information to determine the scope of engagement necessary to assist the State in improving IDEA compliance. This may include working collaboratively with the State and OSEP-funded technical assistance centers, working with the State to conduct a root cause analysis of the factors that contributed to low compliance, and additional OSEP monitoring.

**SSIP | Level of Engagement: Universal**

<table>
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<tbody>
<tr>
<td>• Factors are only listed when the level of engagement is targeted or intensive.</td>
<td>OSEP continues to make information and TA resources available and provide universal support to all States.</td>
</tr>
</tbody>
</table>

**New Engagement**

OSEP will provide universal support related to the State’s SSIP.