**State Performance Plan / Annual Performance Report: Part B**

**for STATE FORMULA GRANT PROGRAMS under the Individuals with Disabilities Education Act**

**For reporting on
FFY 2020**

**North Carolina**



**PART B DUE February 1, 2022**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State’s systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State’s General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

## Intro - Indicator Data

**Executive Summary**

The North Carolina Department of Public Instruction (NCDPI), Exceptional Children Division (ECD) gathered and analyzed data for the development of the State Performance Plan/Annual Performance Report (SPP/APR) including baseline and target setting and selecting improvement strategies to meet targets and improve outcomes for students with disabilities. Throughout the year, Exceptional Children Division staff met weekly to review and analyze progress made toward the development of the SPP/APR. Following discussions, reviews and analyses, staff presented data and requested feedback from stakeholders for the development of the SPP/APR.

The Council on Educational Services for Exceptional Children, which is the State Advisory Panel, serves as the Stakeholder Steering Committee. Exceptional Children Division staff presented data and information, reviewed progress made, and solicited members’ input, as required, toward the development of the SPP/APR, including setting new baseline, targets, and improvement measures on all Indicators. Council members were also provided the opportunity to provide additional input by email for consideration any time prior to the submission of the APR and/or the clarification period. EC Division staff also shared data and information, reviewed progress made, and solicited members’ input toward the development of the SPP/APR at the State Systemic Improvement Plan (SSIP) external stakeholder meetings in 2021.

By June 1, 2021, the NCDPI-EC Division reported to the public on the progress and/or slippage in meeting the measurable and rigorous targets. The SPP/APR was posted on the NCDPI Every Child Accountability and Tracking System (ECATS) web page and distributed directly to the Local Education Agencies (LEAs). In addition, it will be made available to the media. The reports were posted on the Department’s website, sent to the LEAs, and distributed to local and regional media. The SPP/APR and LEA public reports were posted at https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports/2019-20-lea-apr

The FFY 2020 SPP/APR contains information specific to measuring progress against State targets for Indicators 1, 2, 3a-d, 4a-b, 5a-c, 6a-c, 7a-c, 8, 9, 10, 11, 12, 13, 14, 15, 16 and 17. Slippage was not reported for indicators with new baselines and changes to data sources or methodologies. North Carolina uses OSEP-approved sampling plans for Indicators 8 and 14. North Carolina distributed the information to access the electronic surveys through local education agencies involved in the Indicator 8 sample. Each LEA, in the approved Indicator 14 sample, collected and submitted its data electronically to the NCDPI-ECD.

**Additional information related to data collection and reporting**

The 2020-21 school year continued to be impacted by COVID-19. Many districts in North Carolina chose to remain virtual at the beginning of the year and some continued to be virtual the entire year. NCDPI staff worked tirelessly and virtually to provide technical assistance and professional development to assist Local Education Agencies (LEAs) with mitigating the impact of the pandemic on children/students, families, staff, and the provision of education and services.

**Number of Districts in your State/Territory during reporting year**

328

**General Supervision System:**

**The systems that are in place to ensure that IDEA Part B requirements are met, e.g., monitoring, dispute resolution, etc.**

Under its general supervision authority, the NCDPI-EC Division is required to monitor the implementation of all special education programs for all eligible students with disabilities in the state. The federal Office of Special Education Programs (OSEP) monitors the NCDPI-EC Division to ensure that processes and procedures are in place to meet the state’s general supervision requirements. To comply with the requirements of the Individuals with Disabilities Education (IDEA) Act, the NCDPI–EC Division has reviewed the mechanisms for monitoring and developed a comprehensive general supervision system. The system:

- Supports practices that improve educational results and functional outcomes for children and youth with disabilities;
- Uses multiple methods to identify, correct, and verify correction of noncompliance as soon as possible but no later than one year after noncompliance is identified; and
- Utilizes mechanisms to encourage and support improvement and enforce compliance.

COMPONENTS OF NORTH CAROLINA'S GENERAL SUPERVISION SYSTEM
There are eight components of the General Supervision System, including:
1) State Performance Plan (SPP) and Annual Performance Report (APR)
2) Policies, Practices, and Procedures
3) Dispute Resolution System
4) Data Collection
5) Monitoring Activities
6) Improvement, Correction, Incentives, and Sanctions
7) Targeted Technical Assistance
8) Fiscal Management

Each component, while separate in its description, connects to form a comprehensive system. Through the triangulation of these activities the NCDPI–EC Division complies with federal regulations. Descriptions of the components are included in the North Carolina Department of Public Instruction Exceptional Children Division General Supervision Position Paper that is posted on the division website (https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports/2019-20-lea-apr).

**Technical Assistance System:**

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.**

For the purposes of this report, North Carolina has combined the information about its Technical Assistance/Support and Professional Development Systems. The NCDPI-EC Division organized its infrastructure to provide technical assistance/support and professional development to LEAs in various ways through multiple teams, committees, groups, and individuals. Certain technical assistance (e.g. responding with information to requests by phone, monthly EC Directors' webinars or on-site at Regional EC Directors quarterly meetings) and professional development (semi-annual EC Directors' Institutes, Annual Conference on Exceptional Children for more than 3,000 participants, multi-day and weeklong Summer Institutes) and other topical institutes have been consistently provided by the EC Division over the years. 2020-21 quarterly meetings and other training were conducted virtually due to COVID-19.

When the EC Division developed its Strategic Vision, it reviewed its processes for technical assistance and professional development. As a result, some specific needs were identified, including a need for:
- Common processes for TA requests, follow up, and impact assessment
- Refinement of systems to use/align tiered systems of support
- Fidelity measures for all initiatives
- Stronger alignment with curriculum standards
- Additional support for developing and providing Specially Designed Instruction and progress monitoring for training, implementation, fidelity checks and evaluation of effectiveness
- Professional Development aligned to identified curricular or program needs
- Program implementation, including TA, coaching, and program evaluation
- Relationship to State Board of Education Goals and the EC Division Strategic Vision
- Use of LEA-Self Assessment (LEASA) data to drive universal, tailored, and customized support

The EC Division developed its tiered system of technical assistance and professional development by including universal, tailored, and customized support for LEAs. The ECD also created an operational definition of each tier of support. With a clearly articulated and understood definition of universal supports to LEAs, the ECD can effectively leverage the existing support system to the greatest extent possible.

The EC Division, with stakeholder involvement, defined critical features of an LEA’s EC program that were then consolidated into six core elements of an LEA EC Program:
Policy Compliance;
Fiscal Management;
IEP Development and Implementation;
Research-Based Instruction and Practices;
Problem-Solving for Improvement; and
Communication and Collaboration.

The LEA self-assessment process places an emphasis on data-driven decision making, and provides information that is both useful to LEAs in supporting their own growth and providing the EC Division the information needed to provide more customized support. The LEA self-assessment process was built around the six core elements identified and the district’s capacity for engaging in systematic problem solving. This process does not replace required activities under General Supervision around monitoring and compliance. The LEASA is non-punitive by design to create a safe space for LEAs to be transparent in their strengths and needs. More process and fidelity data would help the EC Division understand how LEAs were doing their work. Just knowing what LEAs were doing did not provide the diagnostic information needed to design and provide customized, tiered support. Through the North Carolina Department of Public Instruction’s (NCDPI) partnership with the National Implementation Research Network (NIRN) and the State Implementation and Scaling-up of Evidence-based Practices Center (SISEP), there was an emphasis on ensuring that implementation science informed the work of the entire agency. This included alignment of any new work with existing work and building the knowledge and tools to best support all implementation efforts. To do so, it was critical to define the core components of effective EC programming in a way that was knowable, teachable, and doable.

LEAs submit LEA Self-Assessment (LEASA) updates annually. The LEASA process provides more accessible and actionable data to LEAs; a tool for reviewing and assessing current practice; and a structure for problem identification, priority setting, solution identification and selection, improvement planning, and installation. Completed LEASAs yield data for the ECD that have never been readily accessible before. This information describing how an LEA is working to implement evidence-based practices facilitated the EC Division’s identification of the specific types and levels of support an LEA requires. Information gleaned from EC Division reviews of the LEASA data and improvement activities selected by the LEAs during the beginning of the 2016-17 school year helped drive how the EC Division allocates time and resources to support LEAs through technical assistance and professional development. With the additional process information, the EC Division built a continuum of support for LEAs -- providing universal support to all and tailored and/or customized support to those LEAs in need of such support. Comprehensive professional development (e.g., training and coaching) and technical assistance at the intensity level needed to address the LEAs compliance and/or implementation needs will ultimately improve outcomes for students with disabilities. With the implementation of the LEASA process, the EC Division has used the results to drive customized support for each LEA. This necessitated refining an internal process flow for planning of professional development, coaching, and technical assistance. Given the significant disruption caused by the pandemic, the EC Division worked with stakeholders to modify the LEASA process and tool to decrease burden and increase relevance. EC Division staff conducted enhanced analyses of each LEA's data as part of the modified process to inform more individualized support for local programs.

The EC Division provides customized support through regional staff and team structures. A common process for comprehensive professional development and technical assistance requests, follow up, and impact assessment was necessary and resulted in the development of an electronic professional development catalog that includes all of the professional development offered annually by the EC Division. We expect to refine our systems of monitoring and support to align with and use a tiered system model. The ECD expects system refinements to result in improved provision of services for LEAs, strengthened systems of support for students and families, and improved outcomes for students with disabilities.

**Professional Development System:**

**The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.**

Please see the Technical Assistance System Section for North Carolina's combined information about its technical assistance/support and professional development systems.

**Broad Stakeholder Input:**

**The mechanisms for soliciting broad stakeholder input on the State’s targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 17, the State’s Systemic Improvement Plan (SSIP).**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**Apply stakeholder involvement from introduction to all Part B results indicators (y/n)**

YES

**Number of Parent Members:**

79

**Parent Members Engagement:**

**Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

The NCDPI Exceptional Children Division staff engaged parents from the Council on Educational Services for Exceptional Children, the State Advisory Panel, Exceptional Children Assistance Center (ECAC) by sharing the invitations to monthly stakeholder meetings. The meeting invitations were also sent on the monthly parent listserv from the EC Division parent liaison.

On April 14 and July 21, 2021, the following information was shared in the newsletter through the parent listserv:

Stakeholder Engagement in Selecting SPP/APR New Targets and Improvement Strategies

North Carolina will be starting a new 5-year cycle of our State Performance Plan in February 2022. We want to partner with stakeholders--especially parents of students with disabilities--to set the new indicator targets and write our new plan. Please share this invitation with your networks of parents of students with disabilities, staff, community partners, PTAs, and any other organizations with specific interest in the outcomes of students with disabilities. Questions can be directed to Lauren Holahan, SSIP Coordinator, at Lauren.Holahan@dpi.nc.gov "

On October 16, 2021, information about the parent survey was sent out for parents to be on the look-out for the survey in participating counties.

Family Support representative included information about the SPP/APR Stakeholder meetings in the Parent to Parent Family Support Network of the High Country’s newsletter in our section on “Your voice matters”. We also emailed to our total list Services and added it to our Facebook page and sent out to Family Support Network (FSN) of NC, FSN of Central Carolina, FSN of Eastern NC, Inc., FSN of Greater Forsyth, FSN of Northeastern NC, FSN of Region A, FSN of Southern Piedmont, FSN of the Greater Triangle, FSN of Trusted Parents, FSN of Western NC and FSN/HOPE so that they each could send out to their families.

Parent stakeholders who attended meetings participated in all activities, including reviewing the historical data, considering baselines (where applicable) and targets and providing feedback on improvement strategies. Parents tended to be the more vocal, interested stakeholders and allowed for rich discussion about North Carolina data.

**Activities to Improve Outcomes for Children with Disabilities:**

**The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.**

To engage diverse groups of parents, all meetings offered closed captioning in any language, Spanish speaking translators on every call as well as American Sign Language Interpreters on each web meeting. Staff took time to walk through the explanation and use of each indicator, providing trend data in easy to read charts and recalculated trend data where measurements had changed such as Indicators 1 and 2. This allowed stakeholders to understand the data and see where North Carolina has been and create a strong plan for where we want to go in the future with each target. Time was made available at each meeting to encourage discussion and verbal feedback on outcomes for students with disabilities and parent stakeholders reported in evaluations of the meetings that they felt included and their voices were heard when providing feedback during the sessions.

**Soliciting Public Input:**

**The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

The NC Exceptional Children SSIP Leadership team developed a Qualtrics survey to use in addition to the stakeholder meetings where Indicator data was presented along with options for targets and improvement strategies to meet the targets. Each month the link to the presented materials and a link to engage in feedback was shared and posted on the North Carolina Department of Public Instruction (NCDPI) State Performance Plan/Annual Performance Report 2021-22 website so that stakeholders who could not attend meetings could review materials and submit feedback. The stakeholder meetings were held twice monthly in repeat sessions on the first Tuesday at 10:00 AM EST and the second Thursday at 6:00 PM EST. Feedback tools remained open for stakeholders until the end of each month. All resources, presentation materials and meeting login details were made available on the public website to increase the potential for broad stakeholder engagement.

**Making Results Available to the Public:**

**The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.**

The NCDPI Exceptional Children Division staff created a website in April of 2021 to share all timelines, meeting information, data, improvement strategies and stakeholder feedback results with the public. This website is updated at least monthly with new information as meetings are held and data is gathered. The website can be accessed at (https://sites.google.com/view/ec-division-sppapr-2021-22/home?authuser=0). In addition to the website, EC Division staff created and shared an infographic describing the baselines and targets selected by stakeholders and presented this resource in December 2021. (https://drive.google.com/uc?export=download&id=1bIp3hwKnfxmnyjUZWEjPY\_0JmqEwBExw)

**Reporting to the Public**

**How and where the State reported to the public on the FFY 2019 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2019 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.**

By June 1, 2021, the North Carolina Department of Public Instruction (NCDPI), Exceptional Children Division reported to the public on the progress and/or slippage in meeting the measurable and rigorous targets of its SPP/APR. The SPP/APR was posted on the NCDPI web page(https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports/2019-20-lea-apr) and distributed to the Local Education Agencies (LEAs). In addition, it was made available to the media. The Exceptional Children Division also reported on the performance of each LEA on the targets in the SPP/APR by June 1, 2021. The reports were posted on the Department’s website, and a link to the reports was provided to the LEAs, and distributed to local and regional media.

## Intro - Prior FFY Required Actions

OSEP notes that one or more of the attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

**Response to actions required in FFY 2019 SPP/APR**

North Carolina has updated the General Supervision Paper and included the compliance check on the last page.

## Intro - OSEP Response

OSEP issued a monitoring report to the State on May 14, 2021 and is currently reviewing the State's response submitted on April 11, 2022 and will respond under separate cover.

## Intro - Required Actions

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

**Measurement**

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma in the numerator and the number of all youth with IEPs who exited high school (ages 14-21) in the denominator.

**Instructions**

*Sampling is not allowed.*

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), and compare the results to the target. Provide the actual numbers used in the calculation.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma. If the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma are different, please explain.

## 1 - Indicator Data

**Historical Data[[1]](#footnote-2)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 77.02% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 80.00% | 80.00% | 80.00% | 80.00% | 80.00% |
| Data | 67.30% | 68.90% | 70.32% | 69.06% | 72.51% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 77.02% | 78.27% | 79.52% | 80.77% | 82.02% | 83.27% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

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Agency/Advocacy.......................08%
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PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
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Home..............................................04%

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 9,082 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 464 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 38 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 1,238 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 9,082 | 10,822 | 72.51% | 77.02% | 83.92% | Met target | N/A |

**Graduation Conditions**

**Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma.**

North Carolina's 5-Year Adjusted Cohort Graduation Rate is the ratio of youths with IEPs graduating with a regular diploma in 2018-19 or earlier, to all youths with IEPs entering ninth grade in 2014-15 for the first time. Youths with IEPs entering ninth grade in 2014-15 and graduating with a regular diploma in 2018-19 or earlier ÷ All youths with IEPs entering ninth grade in 2014-15 for the first time X 100 = Percent of youths with IEPs in the state graduating from high school with a regular diploma.
The 5-Year Adjusted Cohort Graduation Rate used for youths with IEPs is the same graduation rate calculation and timeline used for all students in North Carolina as established by the Department under the ESEA.

To graduate from high school/earn a standard high school diploma, students in North Carolina must earn at least 22 credits in the Future-Ready Course of Study or in the Occupational Course of Study. Although the state requires a designated number of courses and credits for students to graduate high school, local school districts and other public school units may require additional courses and credits to graduate. Students in the Future-Ready Course of Study must earn their 22 credits as follows: four sequential English credits, four mathematics credits, three science credits, four social studies credits, one health and physical education credit which includes successful completion of CPR instruction, and six elective credits. Students in the Occupational Course of Study must earn their 22 credits as follows: four sequential English credits, three mathematics credits, two science credits, two social studies credits, one health and physical education credit which includes successful completion of CPR instruction, six occupational preparation education credits, and four career/technical education elective credits.

**Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? (yes/no)**

NO

**Provide additional information about this indicator (optional)**

Due to the change in the measurement table that aligns the graduation rate to the FS009 Exiting data, North Carolina stakeholders chose to set the baseline as FFY2018 due to the significant increase in the data into FFY2019 which is likely attributed to COVID-19. More students were eligible to graduate based on the governors order to shut down schools in March of 2020 and final grades were assigned as of that date and less students dropped out because virtual learning was not mandated at the time.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

OSEP cannot determine whether the State revised its baseline for this indicator. The State reported in its narrative, "…revising baseline to FFY 2018". However, the State reported its baseline year as FFY 2019 in the Historical Data table. OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State’s end targets for FFY 2025 reflect improvement over the State’s baseline data, given the discrepancy in the baseline data, as noted above. The State must ensure that its FFY 2025 targets reflect improvement over the baseline.

## 1 - Required Actions

If the State chooses to revise its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table. Additionally, the State must provide targets through FFY 2025 and ensure that its FFY 2025 target reflects improvement over its baseline data.

# Indicator 2: Drop Out

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with IEPs who exited special education due to dropping out. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

OPTION 1:

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

OPTION 2 (For FFY 2020 ONLY):

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

**Measurement**

OPTION 1:

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

OPTION 2 (For FFY 2020 ONLY):

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

**Instructions**

*Sampling is not allowed.*

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), and compare the results to the target.

With the FFY 2020 SPP/APR, due February 1, 2022, States may use either option 1 or 2. States using Option 2 must provide the actual numbers used in the calculation.

OPTION 1:

**Use 618 exiting data** for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved, but are known to be continuing in an educational program.

OPTION 2:

Use the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data.

If the State has made or proposes to make changes to the data source or measurement under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012, the State should include a justification as to why such changes are warranted.

Options 1 and 2:

Provide a narrative that describes what counts as dropping out for all youth. Please explain if there is a difference between what counts as dropping out for all students and what counts as dropping out for students with IEPs.

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023**, States must report data using Option 1 (i.e., the same data as used for reporting to the Department under section 618 of the IDEA). Option 2 will not be available beginning with the FFY 2021 SPP/APR.

## 2 - Indicator Data

**Historical Data[[2]](#footnote-3)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 18.75% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 4.00% | 3.50% | 3.50% | 3.00% | 3.00% |
| Data | 4.65% | 4.07% | 3.95% | 4.02% | 3.73% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 18.75% | 18.41% | 18.25% | 18.25% | 18.00% | 17.50% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**Please indicate the reporting option used on this indicator**

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 9,082 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 464 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 38 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 1,238 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to dropping out** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,238 | 10,822 | 3.73% | 18.75% | 11.44% | Met target | N/A |

**Provide a narrative that describes what counts as dropping out for all youth**

The definition for dropout in North Carolina is an individual who: 1) was enrolled in school at some time during the previous school year; and 2) was not enrolled at the beginning of the current school year; and 3) has not graduated from high school or completed a State or district-approved educational program; and 4) does not meet any to the following exclusionary conditions: a) transfer to another public school district, private school, or State or district-approved educational program (including correctional or health facility programs); b) temporary absence due to suspension or school-excused illness; or c) death.

**Is there a difference in what counts as dropping out for youth with IEPs? (yes/no)**

NO

**If yes, explain the difference in what counts as dropping out for youth with IEPs.**

**Provide additional information about this indicator (optional)**

Due to the change in the measurement table that aligns the graduation rate to the FS009 Exiting data, North Carolina stakeholders chose to set the baseline as FFY2018 due to the significant decrease in the data into FFY2019 which is likely attributed to COVID-19. Less students were dropping out in FFY2019 based on the governors order to shut down schools in March of 2020 and final grades were assigned as of that date and virtual learning was not mandated at the time.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

OSEP cannot determine whether the State revised its baseline for this indicator. The State reported in its narrative, "…revising baseline to FFY 2018". However, the State reported its baseline year as FFY 2019 in the Historical Data table. OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State’s end targets for FFY 2025 reflect improvement over the State’s baseline data, given the discrepancy in the baseline data, as noted above. The State must ensure that its FFY 2025 targets reflect improvement over the baseline.

## 2 - Required Actions

If the State chooses to revise its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table. Additionally, the State must provide targets through FFY 2025 and ensure that its FFY 2025 target reflects improvement over its baseline data.

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator**: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3A. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS185 and 188.

**Measurement**

A. Participation rate percent = [(# of children with IEPs participating in an assessment) divided by the (total # of children with IEPs enrolled during the testing window)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3A: Provide separate reading/language arts and mathematics participation rates for children with IEPs for each of the following grades: 4, 8, & high school. Account for ALL children with IEPs, in grades 4, 8, and high school, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 99.67% |
| Reading | B | Grade 8 | 2018 | 98.79% |
| Reading | C | Grade HS | 2018 | 96.80% |
| Math | A | Grade 4 | 2018 | 99.58% |
| Math | B | Grade 8 | 2018 | 98.55% |
| Math | C | Grade HS | 2018 | 97.61% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 95.00% | 95.00%  | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | A >= | Grade 4 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
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ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
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Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

03/30/2022

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 15,671 | 15,894 | 13,187 |
| b. Children with IEPs in regular assessment with no accommodations | 5,282 | 4,342 | 3,845 |
| c. Children with IEPs in regular assessment with accommodations | 8,234 | 8,592 | 7,009 |
| d. Children with IEPs in alternate assessment against alternate standards | 1,069 | 1,203 | 868 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

03/30/2022

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 15,665 | 15,866 | 8,740 |
| b. Children with IEPs in regular assessment with no accommodations | 4,484 | 3,736 | 2,249 |
| c. Children with IEPs in regular assessment with accommodations | 9,004 | 9,174 | 6,045 |
| d. Children with IEPs in alternate assessment against alternate standards | 1,066 | 1,204 | 149 |

\*The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the prefilled data in this indicator.

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 14,585 | 15,671 |  | 95.00% | 93.07% | Did not meet target | N/A |
| **B** | Grade 8 | 14,137 | 15,894 |  | 95.00% | 88.95% | Did not meet target | N/A |
| **C** | Grade HS | 11,722 | 13,187 |  | 95.00% | 88.89% | Did not meet target | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 14,554 | 15,665 |  | 95.00% | 92.91% | Did not meet target | N/A |
| **B** | Grade 8 | 14,114 | 15,866 |  | 95.00% | 88.96% | Did not meet target | N/A |
| **C** | Grade HS | 8,443 | 8,740 |  | 95.00% | 96.60% | Met target | N/A |

**Regulatory Information**

**The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]**

**Public Reporting Information**

**Provide links to the page(s) where you provide public reports of assessment results.**

End of Year SWD Assessment Data (https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#end-of-year-reports)
LEA APR Data (https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports/2019-20-lea-apr)

The end of year report and LEA Public reports for the 2020-21 school year have been posted to https://public.tableau.com/views/ECAnnualReport\_IndicatorsDashboard\_LEADeterminations/ReportDashboard?:language=en-US&publish=yes&:display\_count=n&:origin=viz\_share\_link

**Provide additional information about this indicator (optional)**

Due to the changes in the measurement table for Indicator 3A, North Carolina stakeholders chose to set the baseline year as FFY2018. No data was collected in FFY2019 due to COVID-19 and the governors order to shut down schools in March of 2020.

Due to COVID-19 and school closures as well as virtual learning, North Carolina slipped below the 95% participation threshold for the first time in many years. North Carolina expects the participation rates to stabilize as schools return to normal schedules.

## 3A - Prior FFY Required Actions

None

## 3A - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 3A - Required Actions

# Indicator 3B: Proficiency for Children with IEPs (Grade Level Academic Achievement Standards)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator**: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3B. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

**Measurement**

B. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3B: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the regular assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3B - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 13.41% |
| Reading | B | Grade 8 | 2018 | 7.94% |
| Reading | C | Grade HS | 2018 | 9.85% |
| Math | A | Grade 4 | 2018 | 12.56% |
| Math | B | Grade 8 | 2018 | 5.92% |
| Math | C | Grade HS | 2018 | 9.14% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 13.41% | 16.12% | 18.83% | 21.54% | 24.25% | 26.95% |
| Reading | B >= | Grade 8 | 7.94% | 11.13% | 14.32% | 17.51% | 20.70% | 23.89% |
| Reading | C >= | Grade HS | 9.85% | 13.53% | 17.21% | 20.89% | 24.57% | 28.25% |
| Math | A >= | Grade 4 | 12.56% | 14.99% | 17.42% | 19.85% | 22.28% | 24.73% |
| Math | B >= | Grade 8 | 5.92% | 7.25% | 8.58% | 9.91% | 11.24% | 12.57% |
| Math | C >= | Grade HS | 9.14% | 11.50% | 13.86% | 16.22% | 18.58% | 20.94% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 13,516 | 12,934 | 10,854 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,385 | 688 | 735 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 652 | 788 | 901 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 13,488 | 12,910 | 8,294 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,192 | 333 | 463 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 698 | 390 | 825 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 2,037 | 13,516 |  | 13.41% | 15.07% | Met target | N/A |
| **B** | Grade 8 | 1,476 | 12,934 |  | 7.94% | 11.41% | Met target | N/A |
| **C** | Grade HS | 1,636 | 10,854 |  | 9.85% | 15.07% | Met target | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 1,890 | 13,488 |  | 12.56% | 14.01% | Met target | N/A |
| **B** | Grade 8 | 723 | 12,910 |  | 5.92% | 5.60% | Did not meet target | N/A |
| **C** | Grade HS | 1,288 | 8,294 |  | 9.14% | 15.53% | Met target | N/A |

**Regulatory Information**

**The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]**

**Public Reporting Information**

**Provide links to the page(s) where you provide public reports of assessment results.**

End of Year SWD Assessment Data (https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#end-of-year-reports)
LEA APR Data (https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports)
The end of year report and LEA Public reports for the 2020-21 school year have been posted to https://public.tableau.com/views/ECAnnualReport\_IndicatorsDashboard\_LEADeterminations/ReportDashboard?:language=en-US&publish=yes&:display\_count=n&:origin=viz\_share\_link

**Provide additional information about this indicator (optional)**

Due to the changes in the measurement table for Indicator 3B, North Carolina stakeholders chose to set the baseline year as FFY2018. No data was collected in FFY2019 due to COVID-19 and the governors order to shut down schools in March of 2020. Source system for FFY 2018 data was North Carolina's common educational data accountability and reporting system (CEDARS).

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 3B - Required Actions

# Indicator 3C: Proficiency for Children with IEPs (Alternate Academic Achievement Standards)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3C. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

**Measurement**

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the alternate assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the alternate assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time

of testing.

## 3C - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 43.36% |
| Reading | B | Grade 8 | 2018 | 41.87% |
| Reading | C | Grade HS | 2018 | 44.21% |
| Math | A | Grade 4 | 2018 | 6.28% |
| Math | B | Grade 8 | 2018 | 6.94% |
| Math | C | Grade HS | 2018 | 37.11% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 43.36% | 44.50% | 45.50% | 46.50% | 47.50% | 48.50% |
| Reading | B >= | Grade 8 | 41.87% | 42.00% | 43.00% | 44.00% | 45.00% | 46.00% |
| Reading | C >= | Grade HS | 44.21% | 44.21% | 45.25% | 46.25% | 47.25% | 48.25% |
| Math | A >= | Grade 4 | 6.28% | 7.50% | 8.50% | 9.50% | 10.50% | 11.50% |
| Math | B >= | Grade 8 | 6.94% | 7.00% | 8.00% | 9.00% | 10.00% | 11.00% |
| Math | C >= | Grade HS | 37.11% | 38.03% | 38.95% | 39.93% | 40.91% | 41.89% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 1,069 | 1,203 | 868 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 388 | 478 | 323 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 1,066 | 1,204 | 149 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 380 | 404 | 67 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 388 | 1,069 |  | 43.36% | 36.30% | Did not meet target | N/A |
| **B** | Grade 8 | 478 | 1,203 |  | 41.87% | 39.73% | Did not meet target | N/A |
| **C** | Grade HS | 323 | 868 |  | 44.21% | 37.21% | Did not meet target | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 380 | 1,066 |  | 6.28% | 35.65% | Met target | N/A |
| **B** | Grade 8 | 404 | 1,204 |  | 6.94% | 33.55% | Met target | N/A |
| **C** | Grade HS | 67 | 149 |  | 37.11% | 44.97% | Met target | N/A |

**Regulatory Information**

**The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]**

**Public Reporting Information**

**Provide links to the page(s) where you provide public reports of assessment results.**

End of Year SWD Assessment Data (https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#end-of-year-reports)
LEA APR Data (https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports)

The end of year report and LEA Public reports for the 2020-21 school year have been posted to https://public.tableau.com/views/ECAnnualReport\_IndicatorsDashboard\_LEADeterminations/ReportDashboard?:language=en-US&publish=yes&:display\_count=n&:origin=viz\_share\_link

**Provide additional information about this indicator (optional)**

Due to the changes in the measurement table for Indicator 3C, North Carolina stakeholders chose to set the baseline year as FFY2018. No data was collected in FFY2019 due to COVID-19 and the governors order to shut down schools in March of 2020. Source system for FFY 2018 data was North Carolina's common educational data accountability and reporting system (CEDARS) which is also used to report to EdFacts. Based on the significant increase in the FY2020 data for 3C - Math, the EC Division will likely convene stakeholders to review and revise targets for subsequent years.

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 3C - Required Actions

# Indicator 3D: Gap in Proficiency Rates (Grade Level Academic Achievement Standards)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator**: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3D. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

**Measurement**

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2020-2021 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2020-2021 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2020-2021 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2020-2021 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3D - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 30.49 |
| Reading | B | Grade 8 | 2018 | 35.58 |
| Reading | C | Grade HS | 2018 | 40.94 |
| Math | A | Grade 4 | 2018 | 11.03 |
| Math | B | Grade 8 | 2018 | 10.44 |
| Math | C | Grade HS | 2018 | 11.85 |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 30.49 | 27.44  | 24.39 | 21.34 | 18.29 | 15.24 |
| Reading | B <= | Grade 8 | 35.58 | 32.02 | 28.46 | 24.90 | 21.34 | 17.78 |
| Reading | C <= | Grade HS | 40.94 | 36.85 | 32.76 | 28.76 | 24.58 | 20.49 |
| Math | A <= | Grade 4 | 11.03 | 9.93 | 8.83 | 7.73 | 6.63 | 5.53 |
| Math | B <= | Grade 8 | 10.44 | 9.40 | 8.36 | 7.32 | 6.28 | 5.24 |
| Math | C <= | Grade HS | 11.85 | 10.66 | 9.47 | 8.28 | 7.09 | 5.90 |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 106,002 | 112,190 | 103,147 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 13,516 | 12,934 | 10,854 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 46,081 | 52,028 | 58,075 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 1,806 | 2,114 | 2,203 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,385 | 688 | 735 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 652 | 788 | 901 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 105,944 | 109,315 | 80,774 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 13,488 | 12,910 | 8,294 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 38,140 | 34,523 | 43,967 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 1,959 | 1,229 | 1,866 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,192 | 333 | 463 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 698 | 390 | 825 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 15.07% | 45.18% |  | 30.49 | 30.10 | Met target | N/A |
| **B** | Grade 8 | 11.41% | 48.26% |  | 35.58 | 36.85 | Did not meet target | N/A |
| **C** | Grade HS | 15.07% | 58.44% |  | 40.94 | 43.37 | Did not meet target | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 14.01% | 37.85% |  | 11.03 | 23.84 | Did not meet target | N/A |
| **B** | Grade 8 | 5.60% | 32.71% |  | 10.44 | 27.11 | Did not meet target | N/A |
| **C** | Grade HS | 15.53% | 56.74% |  | 11.85 | 41.21 | Did not meet target | N/A |

**Provide additional information about this indicator (optional)**

Due to the changes in the measurement table which added Indicator 3D, North Carolina stakeholders chose to set the baseline year as FFY2018. No data was collected in FFY2019 due to COVID-19 and the governors order to shut down schools in March of 2020. Source system for FFY 2018 data was North Carolina's common educational data accountability and reporting system (CEDARS) which is also used to report to EdFacts.

Using FFY 2018-19 and 2020-21 EdFacts Data, North Carolina calculated the gap between SWD and all students. Baseline was set using the gap between 2018-19 and 2020-21 and targets set with the goal of reducing the gap in each test and grade level by half over the next 6 years as selected by stakeholders. Gap increments were calculated by dividing the gap by 5 and then dividing the result by 2. Reduction of each year was based on the result of that calculation for each grade and assessment type.

Math Gap Calculation:
SWD/ALL/GAP
4th - 3.52% 14.55% 11.03%
8th - 1.35% 11.79% 10.44%
HS - 0.79% 12.64% 11.85%

Reading GAP Calculation:
SWD/ALL/GAP
4th - 13.46% 43.96% 30.49%
8th - 7.96% 43.54% 35.58%
HS - 9.85% 50.79% 40.94%

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

The State has established the baseline for this indicator, using data from FFY 2018, but OSEP cannot accept that baseline because OSEP could not determine if the State calculated the proficiency rate gap, consistent with the Measurement Table, using assessment data from SY 2018-2019. Specifically, the State reported that "It is using FFY 2018-19 and 2020-21 EdFacts Data...Baseline was set using the gap between 2018-19 and 2020-21."

OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State’s end targets for FFY 2025 reflect improvement over the State’s baseline data, given that the State's baseline cannot be accepted, as noted above. The State must ensure its FFY 2025 targets reflect improvement.

## 3D - Required Actions

In its FFY 2021 SPP/APR, the State must report baseline data that has been calculated consistent with the Measurement Table. Additionally, the State must provide through FFY 2025 and ensure that its FFY 2025 target reflects improvement over baseline.

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results Indicator:** Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

**Data Source**

State discipline data, including State’s analysis of State’s Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

**Measurement**

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) that have a significant discrepancy, as defined by the State, in the rates of suspensions and expulsions for more than 10 days during the school year of children with IEPs) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable))] times 100.

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs excluded from the calculation as a result of this requirement.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

--The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

--The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n and/or cell size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 52.17% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 2.50% | 2.50% | 2.50% | 2.50% | 2.00% |
| Data | 0.40% | 0.00% | 0.00% | 0.00% | 0.64% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 52.17% | 47.17% | 42.17% | 37.17% | 32.17% | 27.17% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n/cell-size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.**

254

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell-size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 36 | 69 | 0.64% | 52.17% | 52.17% | N/A | N/A |

**Choose one of the following comparison methodologies to determine whether significant discrepancies are occurring (34 CFR §300.170(a))**

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

**State’s definition of “significant discrepancy” and methodology**

North Carolina met with stakeholders and revised its definition of Significant Discrepancy in FY2020. For indicator 4a, North Carolina's definition of "significant discrepancy" with regard to suspensions/expulsions for students with IEPs is greater than 2.5x the rate of suspensions/expulsions of students without IEPs and a minimum Cell Size of > 5 SWD.

Significant Discrepancy Definition Rate Ratio Method –

Step 1:Calculate % of Students with Disabilities Suspended/Expelled > 10 days by LEA
(Special Ed Students Suspended/Expelled > 10 days/SWD in LEA child count)= LEASWD %

Step 2: Calculate % of Non-Disabled Students Disabilities Suspended/Expelled > 10 Days by LEA
(General Ed Students Suspended > 10 days/General Ed Students in LEA)= LEA Non-SWD %

Step 3: Calculate Rate Ratio by LEA:
(LEA % of SWD Suspended > 10 days /LEA % of Non-SWD Suspended > 10 days) = LEA Rate Ratio

Step 4: Determine Cell Size for 4A & 4B: > 5 SWD Suspended/ Expelled > 10 days

Step 5: Determine Significant Discrepancy: LEAs with Rate Ratio > 2.5 (percent of SWD suspended/Expelled > 10 days is at least 2.5 x greater than the Percent of non-disabled Suspended/Expelled > 10 days

Step 6: Calculate 4a Significant Discrepancy: Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPS
(# of Districts with Rate Ratio > 2.5 the rate of suspensions/expulsions of Non-SWD and a minimum Cell Size of > 5 SWD/# of Districts in the state with a minimum Cell Size of > 5 SWD)

**Provide additional information about this indicator (optional)**

North Carolina met with stakeholders in FY2020 to reset the baseline for Indicator 4 due to the revised definition of significant discrepancy as described above. The new definition was applied to the SY 2019-20 data that is reported in this SPP/APR and is part of the continuing work of revising the review of policies, procedures and practices.

**Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 data)**

**Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.**

For the FY2020 data, if an LEA had a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs greater than 2.5x the rate of suspensions/expulsions of students without IEPs, the EC Division analyzed data for patterns of systemically problematic policies, procedures and practices that contributed to the significant discrepancy.

North Carolina is revising it’s method of review of policies, procedures and practices for Indicator 4a/b. For the FY2020 APR submission, the EC Division will move this review to a collaborative assessment process. The EC Division has conducted an analysis of discipline data and identified LEAs required to complete submission of a guided, collaborative, assessment review that includes coaching and conversations with division staff. Training LEAs in use of the collaborative self-assessment process will occur in the Spring of 2022. EC Division staff will review the assessments, and those LEAs found to have policies, practices and procedures contributing to the significant discrepancy will be notified of their non-compliance and required corrective actions. North Carolina will be working with districts identified as having noncompliance with Part B requirements in FY2020 to support them in updating policies, practices and procedures, the new process will be in place and implemented no later than 7/1/2022.

The review tool includes the following instructions and activities:
Review the district’s written procedures for Discipline. Determine if administrators and teachers are complying with all the components of the Discipline Regulations (i.e. Parent notification, manifestation determinations, change of placement). Determine if students with disabilities of all racial and ethnic groups, and particularly students of the identified group(s), are disciplined equitably.
NC 1504-2 Discipline Procedures
NC 1504-2 Authority of School Personnel
Guidance Manual for Homebound Placement
North Carolina School Discipline Laws and Regulations - March 2021

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 4A - Required Actions

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Compliance Indicator:** Rates of suspension and expulsion:

 A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

**Data Source**

State discipline data, including State’s analysis of State’s Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

**Measurement**

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

--The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

--The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 SPP/APR introduction).

Indicator 4B: Provide the following: (a) the number of LEAs that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of long-term suspensions and expulsions (more than 10 days during the school year) for children with IEPs; and (b) the number of those LEAs in which policies, procedures or practices contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 17.86% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n/cell-size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.**

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy, by race or ethnicity** | **Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of LEAs that met the State's minimum n/cell-size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 34 | 10 | 56 | 0.00% | 0% | 17.86% | N/A | N/A |

**Were all races and ethnicities included in the review?**

YES

**State’s definition of “significant discrepancy” and methodology**

For Indicator 4b, North Carolina's definition of "significant discrepancy" with regard to suspensions/expulsions for students with IEPs is greater than 2.5x the rate of suspensions/expulsions of students without IEPs and a minimum Cell Size of > 5 SWD in each racial ethnic group.
Significant Discrepancy Definition Rate Ratio Method – For Each Racial/Ethnic Group

Step 1:Calculate % of Students with Disabilities Suspended/Expelled > 10 Days by LEA and Race
((RACE)Special Ed Students Suspended/Expelled > 10 days/(RACE)Special Ed Students in LEA)= LEA SWD %

Step 2: Calculate % of Non-Disabled Students Disabilities Suspended/Expelled > 10 Days by LEA
(RACE)General Ed Students Suspended > 10 days/(RACE)General Ed Students in LEA)= LEA Non-SWD %

Step 3: Calculate Rate Ratio by LEA:
(LEA % of (RACE) SWD Suspended > 10 days /LEA % of (RACE) Non-SWD Suspended > 10 days) = LEA Rate Ratio

Step 4: Determine Cell Size for 4B: > 5 SWD Suspended/ Expelled > 10 days

Step 5: Determine Significant Discrepancy: LEAs with Rate Ratio > 2.5 (Percent of SWD Suspended/Expelled > 10 days is at least 2.5 x greater than the Percent of non-disabled Suspended/Expelled > 10 days

Step 6: Calculate 4a Significant Discrepancy: Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs
(# of Districts with Rate Ratio > 2.5 the rate of suspensions/expulsions of Non-SWD/# of Districts in the state with >5 SWD SUSPENDED Expelled by Race)

**Provide additional information about this indicator (optional)**

North Carolina met with stakeholders in FY2020 to reset the baseline for Indicator 4 due to the revised definition of significant discrepancy as described above the new definition was applied to the SY 2019-20 data that is reported in this SPP/APR and is part of the continuing work of revising the review of policies, procedures and practices.

Due to the revisions of review of policies, practices and procedures which included both internal and external stakeholder involvement, development of new tools to gather the data and complete a full analysis, as well as the impact COVID-19 had on staff availability, the completion of this work has been delayed. In addition to delving into this important work to strengthen the review process at the state level, North Carolina had significant changes in staffing at the state level to include a new state SPP/APR coordinator. The new coordinator was focused not only on revising longstanding processes but also intricately involved in presenting data and setting baselines and targets with internal and external stakeholders for the entirety of the FY2020 year. Even with all of the contributing factors that caused the delay, the EC Division is on target to complete a full review of policies, practices and procedures for Indicator 4B by 7/1/2022. The identification of any non-compliance and corrections will be completed within 1 year of identification and the assurance of these corrections will be shared in the FY2021 SPP/APR.

**Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 data)**

**Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.**

North Carolina is revising it’s method of review of policies, procedures and practices for Indicator 4a/b. For the FY2020 APR submission, the EC Division will move this review to a collaborative assessment process. The EC Division has conduct the analysis of discipline data and identified LEAs that are required to complete a submission of a guided, collaborative, assessment review that includes coaching and conversations with division staff. Training LEAs in use of the collaborative self-assessment process will occur in the Spring of 2022. EC Division staff will review the data, self-assessments, and those LEAs found to have policies, practices and procedures contributing to the significant discrepancy will be notified of their non-compliance and required corrective actions. North Carolina will be working with districts identified as having noncompliance with Part B requirements in FY2020 to support them in updating policies, practices and procedures, the new process will be in place and implemented no later than 7/1/2022.

The review tool includes the following instructions and activities:
Review the district’s written procedures for Discipline. Determine if administrators and teachers are complying with all the components of the Discipline Regulations (i.e. Parent notification, manifestation determinations, change of placement). Determine if students with disabilities of all racial and ethnic groups, and particularly students of the identified group(s), are disciplined equitably.
NC 1504-2 Discipline Procedures
NC 1504-2 Authority of School Personnel
Guidance Manual for Homebound Placement
North Carolina School Discipline Laws and Regulations - March 2021

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

## 4B- Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the districts identified with noncompliance in FFY 2020 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 5: Education Environments (children 5 (Kindergarten) - 21)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served:

A. Inside the regular class 80% or more of the day;

B. Inside the regular class less than 40% of the day; and

C. In separate schools, residential facilities, or homebound/hospital placements.

(20 U.S.C. 1416(a)(3)(A))

**Data Source**

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS002.

**Measurement**

 A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

 B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

 C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)]times 100.

**Instructions**

*Sampling from the State’s 618 data is not allowed.*

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA, explain.

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target >= | 65.40% | 65.30% | 65.20% | 65.00% | 65.50% |
| A | 68.70% | Data | 66.78% | 66.80% | 66.85% | 67.51% | 67.81% |
| B | 2020 | Target <= | 15.20% | 15.20% | 15.10% | 15.00% | 14.50% |
| B | 12.03% | Data | 13.87% | 13.98% | 14.02% | 13.94% | 13.27% |
| C | 2020 | Target <= | 2.00% | 2.00% | 2.00% | 2.00% | 2.00% |
| C | 1.68% | Data | 1.89% | 1.83% | 1.81% | 1.78% | 1.73% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 68.70% | 68.75% | 68.80% | 68.85% | 68.90% | 68.95% |
| Target B <= | 12.03% | 12.00% | 12.00% | 11.50% | 11.50% | 11.25% |
| Target C <= | 1.68% | 1.63% | 1.58% | 1.53% | 1.48% | 1.43% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 183,570 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 126,117 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 22,090 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 2,043 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 224 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 809 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**FFY 2020 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 5 (kindergarten) through 21 served** | **Total number of children with IEPs aged 5 (kindergarten) through 21** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 126,117 | 183,570 | 67.81% | 68.70% | 68.70% | N/A | N/A |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 22,090 | 183,570 | 13.27% | 12.03% | 12.03% | N/A | N/A |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 3,076 | 183,570 | 1.73% | 1.68% | 1.68% | N/A | N/A |

**Provide additional information about this indicator (optional)**

North Carolina met with stakeholders and revised the baseline for Indicator 5 in light of OSEP’s changes to the source file to include 5 year olds in Kindergarten per the measurement table.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a:

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

B. Separate special education class, separate school or residential facility.

 C. Receiving special education and related services in the home.

(20 U.S.C. 1416(a)(3)(A))

**Data Source**

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS089.

**Measurement**

 A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

 B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

 C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

**Instructions**

*Sampling from the State’s 618 data is not allowed.*

States must report five-year-old children with disabilities who are enrolled in preschool programs in this indicator. Five-year-old children with disabilities who are enrolled in kindergarten are included in Indicator 5.

States may choose to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age.

For Indicator 6C: States are not required to establish a baseline or targets if the number of children receiving special education and related services in the home is less than 10, regardless of whether the State chooses to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age. In a reporting period during which the number of children receiving special education and related services in the home reaches 10 or greater, States are required to develop baseline and targets and report on them in the corresponding SPP/APR.

For Indicator 6C: States may express their targets in a range (*e.g.*, 75-85%).Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State’s data reported under IDEA section 618, explain.

## 6 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A** | Target >= | 37.00% | 37.30% | 37.60% | 38.00% | 38.00% |
| **A** | Data | 36.91% | 35.86% | 34.93% | 34.64% | 30.59% |
| **B** | Target <= | 21.30% | 20.00% | 19.70% | 19.40% | 19.40% |
| **B** | Data | 21.64% | 21.73% | 21.91% | 21.80% | 23.74% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

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The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
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Prefer not to say........................06%

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Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**Targets**

**Please select if the State wants to set baseline and targets based on individual age ranges (i.e. separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.**

Inclusive Targets

**Please select if the State wants to use target ranges for 6C.**

Target Range not used

Baselines for Inclusive Targets option (A, B, C)

| **Part** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- |
| **A** | 2020 | 29.64% |
| **B** | 2020 | 26.84% |
| **C** | 2020 | 2.42% |

**Inclusive Targets – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 29.64% | 29.60% | 29.70% | 29.80% | 29.90% | 30.00% |
| Target B <= | 26.84% | 26.25% | 26.00% | 25.75% | 25.50% | 25.25% |

**Inclusive Targets – 6C**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C <= | 2.42% | 2.40% | 2.35% | 2.30% | 2.25% | 2.20% |

**Prepopulated Data**

**Data Source:**

SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

**Date:**

07/07/2021

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 2,588 | 5,903 | 1,748 | 10,239 |
| a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 490 | 1,903 | 642 | 3,035 |
| b1. Number of children attending separate special education class | 778 | 1,406 | 356 | 2,540 |
| b2. Number of children attending separate school | 44 | 110 | 50 | 204 |
| b3. Number of children attending residential facility | 1 | 2 | 1 | 4 |
| c1**.** Numberof children receiving special education and related services in the home | 113 | 116 | 19 | 248 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**FFY 2020 SPP/APR Data - Aged 3 through 5**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 3,035 | 10,239 | 30.59% | 29.64% | 29.64% | N/A | N/A |
| B. Separate special education class, separate school or residential facility | 2,748 | 10,239 | 23.74% | 26.84% | 26.84% | N/A | N/A |
| C. Home | 248 | 10,239 |  | 2.42% | 2.42% | N/A | N/A |

**Provide additional information about this indicator (optional)**

North Carolina met with stakeholders and revised the baseline for Indicator 6 in light of OSEP’s changes to the source file to remove 5 year olds in Kindergarten per the measurement table.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

The State has revised the baseline for Indicators 6A and 6B, using data from FFY 2020, and OSEP accepts those revisions.

The State has established a baseline for Indicator 6C, using data from FFY 2020, and OSEP accepts that baseline.

The State provided targets for FFYs 2020 through 2025 for Indicators 6A and 6B, and OSEP accepts those targets.

The State established targets for FFYs 2020 through 2025 for Indicator 6C, and OSEP accepts those targets.

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

State selected data source.

**Measurement**

Outcomes:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.

b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.

d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

**Summary Statements for Each of the Three Outcomes:**

**Summary Statement 1**: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

**Measurement for Summary Statement 1:** Percent = [(# of preschool children reported in progress category (c) plus # of preschool children reported in category (d)) divided by (# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d))] times 100.

**Summary Statement 2:** The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

**Measurement for Summary Statement 2**: Percent = [(# of preschool children reported in progress category (d) plus # of preschool children reported in progress category (e)) divided by (the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

**Instructions**

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 2 for additional instructions on sampling.)

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining “comparable to same-aged peers.” If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining “comparable to same-aged peers” has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

## 7 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A1 | 2013 | Target >= | 82.50% | 82.50% | 82.50% | 82.55% | 83.00% |
| A1 | 82.34% | Data | 85.34% | 84.85% | 84.82% | 84.92% | 84.00% |
| A2 | 2013 | Target >= | 35.20% | 35.20% | 35.20% | 35.40% | 35.50% |
| A2 | 35.08% | Data | 34.53% | 34.73% | 37.90% | 38.72% | 37.76% |
| B1 | 2013 | Target >= | 82.52% | 82.52% | 82.52% | 82.60% | 83.00% |
| B1 | 82.52% | Data | 82.67% | 82.96% | 82.89% | 83.40% | 83.27% |
| B2 | 2013 | Target >= | 34.46% | 34.46% | 34.46% | 34.50% | 35.00% |
| B2 | 34.24% | Data | 33.38% | 34.14% | 37.40% | 36.95% | 38.10% |
| C1 | 2013 | Target >= | 82.00% | 82.00% | 82.00% | 82.20% | 83.00% |
| C1 | 81.81% | Data | 82.94% | 84.01% | 83.55% | 84.02% | 82.11% |
| C2 | 2013 | Target >= | 52.17% | 52.17% | 52.17% | 52.20% | 53.00% |
| C2 | 52.05% | Data | 50.98% | 50.69% | 54.12% | 53.95% | 53.95% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 84.04% | 84.28% | 84.48% | 84.68% | 84.88% | 85.08% |
| Target A2 >= | 38.16% | 38.56% | 38.96% | 39.36% | 39.76% | 40.16% |
| Target B1 >= | 83.67% | 84.07% | 84.47% | 84.87% | 85.27% | 85.67% |
| Target B2 >= | 38.50% | 38.90% | 39.30% | 39.70% | 40.10% | 40.50% |
| Target C1 >= | 82.51% | 82.91% | 83.31% | 83.71% | 84.11% | 84.51% |
| Target C2 >= | 54.35% | 54.75% | 55.11% | 55.55% | 55.95% | 56.35% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**FFY 2020 SPP/APR Data**

**Number of preschool children aged 3 through 5 with IEPs assessed**

5,613

**Outcome A: Positive social-emotional skills (including social relationships)**

| **Outcome A Progress Category** | **Number of children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 53 | 0.94% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 743 | 13.24% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,683 | 47.80% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,747 | 31.12% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 387 | 6.89% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 4,430 | 5,226 | 84.00% | 84.04% | 84.77% | Met target | No Slippage |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,134 | 5,613 | 37.76% | 38.16% | 38.02% | Did not meet target | No Slippage |

**Outcome B: Acquisition and use of knowledge and skills (including early language/communication)**

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 61 | 1.09% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 804 | 14.32% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,619 | 46.66% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,803 | 32.12% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 326 | 5.81% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 4,422 | 5,287 | 83.27% | 83.67% | 83.64% | Did not meet target | No Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,129 | 5,613 | 38.10% | 38.50% | 37.93% | Did not meet target | No Slippage |

**Outcome C: Use of appropriate behaviors to meet their needs**

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 69 | 1.23% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 741 | 13.20% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,811 | 32.26% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,142 | 38.16% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 850 | 15.14% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.*Calculation:(c+d)/(a+b+c+d)*  | 3,953 | 4,763 | 82.11% | 82.51% | 82.99% | Met target | No Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,992 | 5,613 | 53.95% | 54.35% | 53.30% | Did not meet target | No Slippage |

**Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? (yes/no)**

YES

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |

**Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)**

YES

**List the instruments and procedures used to gather data for this indicator.**

Local Education Agencies (LEAs) used the Child Outcomes Summary Form (COSF) to collect "entry" and "exit" data regarding outcomes for preschool children aged 3 through 5 with IEPs. LEAs then submitted their data using the Every Child Accountability and Tracking System (ECATS), the State's new accountability/reporting system that includes a required module for reporting for students with disabilities. All data was populated to the ECO COSF form to further validate the data and allow follow-up, if needed, with LEAs.

**Provide additional information about this indicator (optional)**

For the current APR, data submissions were submitted via Every Child Accountability and Tracking System (ECATS), the State's new accountability/reporting system. There were several anomalies experienced with this new process and the impact of COVID-19, resulting in some resubmissions. COVID-19 also impacted the capability to provide the in-depth regional training the EC Division would normally provide for the introduction of a new data collection system. To mitigate the anomalies experienced and the impact of COVID-19, NCDPI put corrective measures in place as well as a State-provided Indicator 7 spreadsheet as an alternative data collection tool in the event issues were not resolved in a timely effective manner. Helpdesk accessibility, instructions on running the report and correcting errors as well as training videos were provided to support LEAs in this process. Additionally, the EC Division designated monthly, virtual office hours to provide additional support to districts with Federal Reporting questions around Indicator 7.

North Carolina has measures in place for improving outcomes for all children. Extensive training to understand the outcomes is ongoing. Training is regularly provided throughout the year, formalized and through self-paced modules. One of the most widely used tools by LEAs to evaluate student progress is the Teaching Strategies Gold, a system for assessing children from birth through kindergarten. Our cross-sector partners at the Department of Health and Human Services (DHHS) Division of Child Development and Early Education (DCDEE), along with the Office of Early Learning at the NC Department of Public Instruction have been in collaboration to coordinate efforts to bring Teaching Strategies Gold to all preschools classrooms. To further support preschool children with disabilities and their families, NCDPI also partners with the North Carolina Early Learning Network (ELN), providing early learning communities with professional development and technical assistance based on guiding principles and values, aligned with and reported in the State Performance Plan/Annual Performance Report. ELN promotes the development and successful participation of North Carolina’s preschool-age exceptional children in a broad range of activities and contexts. Preschool coordinators have access to multi-tiered levels of support and facilitated cross-sector professional development. Program support focuses on expanding skills and increased family participation to improve the performance and success of preschool children in North Carolina. Additionally, NC is receiving TA support from CASEL and ECTA/DaSy Centers. CASEL is providing targeted TA to NC to align MTSS efforts with school wide SEL efforts. NC is also currently in a cross-state cohort focusing on improving local Child Outcomes data use. Through the TA support, NC is identifying opportunities for improving communication and support between the state and local preschool programs to facilitate local Child Outcomes data use. The TA from ECTA/DaSy Centers will align with the NCPMI intensive TA since NC PPM practices affect and support positive child outcomes. Also, aligning communication about NC PPM implementation with the communication and support focused on improving Child Outcomes data supports NC’s focus on PPM implementation and scale-up efforts as a strategy for supporting Child Outcomes for children enrolled in preschool programs.

For Indicator C1, stakeholders felt this was a more appropriate target based on a review of the data, even though it was lower than FFY2019 target.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

(20 U.S.C. 1416(a)(3)(A))

**Data Source**

State selected data source.

**Measurement**

Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100.

**Instructions**

*Sampling****of parents from whom response is requested****is allowed.* *When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 2 for additional instructions on sampling.)*

Describe the results of the calculations and compare the results to the target.

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of parents to whom the surveys were distributed and the number of respondent parents. The survey response rate is automatically calculated using the submitted data.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

Include in the State’s analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

If the analysis shows that the demographics of the children for whom parents responding are not representative of the demographics of children receiving special education services in the State, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to parents (e.g., by mail, by e-mail, on-line, by telephone, in-person through school personnel), and how responses were collected.

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023,** when reporting the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services, States must include race/ethnicity in their analysis. In addition, the State’s analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

States are encouraged to work in collaboration with their OSEP-funded parent centers in collecting data.

## 8 - Indicator Data

| **Question** | **Yes / No**  |
| --- | --- |
| Do you use a separate data collection methodology for preschool children?  | NO |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

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Prefer not to say........................06%

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ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
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LEA PSU Staff............................07%
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PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
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Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 45.17% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 50.00% | 50.00% | 50.00% | 50.00% | 50.00% |
| Data | 46.22% | 43.43% | 44.24% | 43.98% | 49.36% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 45.17% | 49.36% | 50.00% | 51.00% | 52.00% | 53.00% |

**FFY 2020 SPP/APR Data**

| **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,832 | 4,056 | 49.36% | 45.17% | 45.17% | N/A | N/A |

**Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.**

The North Carolina Department of Public Instruction (NCDPI) used a 17-item survey with a Likert scale for responses. The 17 items were previously developed and validated by the National Center for Special Education Accountability (NCSEAM) as part of a 25-item survey for parents of children ages 5-21. For parents of preschool children, NCDPI used a corresponding 17-item survey with a Likert scale for responses. The 17 items were previously developed and validated by the National Center for Special Education Accountability (NCSEAM) as part of a 25-item survey for parents of preschool children. Each family selected to participate in the annual sample is sent a letter explaining the importance of the survey and guaranteeing the confidentiality of the parent’s responses. The letter includes a web-based link to be used to complete the survey. Parents also have the option of receiving a printed copy of the survey to complete and return. The items on each survey were fully equated so that they have the same meaning, the same standard applies, and measures from the two surveys can be and were aggregated by NCDPI.
When analyzing and reporting the data, North Carolina used a percentage calculation of parents' responses of "strongly agree" and "very strongly agree" for a simple majority of survey items indicating their perception that schools facilitated their involvement. The calculation was similar to the standard used in previous years for the 25-item survey and yielded similar results.

**The number of parents to whom the surveys were distributed.**

87,181

**Percentage of respondent parents**

4.65%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 20.94% | 4.65% |

**Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.**

In FY2020 the districts in the sample sent letters with links to the survey instrument to their entire special ed student population on the December child count to illicit a wider range of responses from parents. This also means that the total number of survey distributed increased significantly (17,634 in FY2019 to 87181 in FY2020) which impacted our response rate from year to year greatly. Going forward, the EC division will hold webinars in the Spring with the districts in the sample preparing them for the letters and assisting in methods of sending out the information. The letters will include QR codes for easy access to the survey instrument either in English or Spanish. The SSIP Stakeholder and Family Engagement workgroup is analyzing the FY 2019 and FY 2020 Indicator 8 survey data and report to engage families and districts in use of the data.

In addition, the EC Division is collaborating with parent advocacy groups across the state to include notices of the surveys and instructions on how to complete the survey for parents.

**Describe the analysis** **of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.**

In FY2020 the districts in the sample sent letters with links to the survey instrument to their entire special ed student population on the December child count to illicit a wider range of responses from parents. This also means that the total number of survey distributed increased significantly (17,634 in FY2019 to 87181 in FY2020) which impacted our response rate from year to year greatly. Going forward, the EC division will hold webinars with the districts in the sample preparing them for the letters and assisting in methods of sending out the information. The letters will include QR codes for easy access to the survey instrument either in English or Spanish. The SSIP Stakeholder and Family Engagement workgroup is analyzing the FY 2019 and FY 2020 Indicator 8 survey data and report to engage families and districts in use of the data.

The NC SSIP Stakeholder and Family engagement workgroup has developed resources and tools to share with families to reduce bias and promote response from a broad cross section of parents of children with disabilities. These resources include an infographic explaining Indicator 8 data, how it is used for improvement and why parents should submit a response. Information about Indicator 8 is being shared through Parent newsletters from the department and from district and school level list serves. In the Spring of 2022, the EC Division also held training webinars for districts with tips and practices to increase parent engagement, including various communication methods, use of district staff and local school meetings to encourage responses to the survey.

**Include in the State’s analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.**

A total of 87181 parent surveys (school-age and preschool) were distributed among LEAs in the sample. A total of 4056 surveys were completed and returned for a response rate of 4.65% which was lower than the previous year.

a) Distribution by Race
Surveys...........................Distributed................Returned.............Difference
African-American............... 36% ......................... 22% ..................... - 14
White...................................36% ......................... 66% ..................... +30
Hispanic...............................20% ......................... 10% ..................... -10
Other .................................. 08% ......................... 02% ........................-6
The FFY 2020 data suggest that African-American students were under-represented (22.0%) as in previous years.

b) Distribution by Grade
Surveys...........................Distributed................Returned.............Difference
Preschool............................ 06% ......................... 04% ...................... -2
School-Age.......................... 94% ......................... 96% .....................+6

 In FFY 2020, preschool children were under-represented (4%), while students in grades K-12 were over-represented (96%) as compared to surveys distributed. This gap was the same as the previous year.

c) Distribution by Disability
Surveys..................................Distributed................Returned.............Difference\*
Autism........................................... 13% ......................... 25% .................... +12
Developmental Delay....................08% .......................... 11% .....................+3
Intellectual Disability......................07% ...........................09% ....................+2
Other Health Impairment..............18% ........................... 09% ....................- 9
Specific Learning Disability...........35% ...........................17% ................... - 18
Speech-Language Impairment......13% ...........................15% .....................+2
Other..............................................06% ........................... 11% ......................+5

In FFY 2020, students with autism (25%) were over-represented while students with other health impairments (9%), and specific learning disabilities (17%) were under-represented. Also students in other disability categories were slightly over-represented and it should be noted that there was a higher percentage of parents who selected multiple disabilities as the category of disability.

\*Difference (percentage points) between the percentage of surveys distributed and the percentage of responders in the sample who completed the survey. The acceptable range of over/under-representation is typically +/-3 percentage points and was used to determine representativeness. Some percentages may not add to 100 due to rounding.

**The demographics of the parents responding are representative of the demographics of children receiving special education services. (yes/no)**

NO

**If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.**

A comparison of the respondents in the annual sample to the representative survey distribution, suggests that certain response groups, as noted in the section about the State's analyses, did not match the representative sample surveyed. However, these percentages were impacted by the fact that parents selected the race/ethnicity and disability category of their children rather than tracking surveys to identified students/children. Thus, survey responses may not directly correspond to the race/ethnicity or disability category of the children and also account for missing information when a parent chose not to respond to the questions about race/ethnicity or disability category. For future surveys, the State will consider the possibility of tracking surveys to identified students/children in the sample.
For FFY 2020, as a result of feedback from parent organizations and other stakeholders, LEAs in the sample, sent the notices, that included access to the survey link via email, to parents. This change resulted in an increase in the number of surveys received for FFY2019. The EC Division also sought input from stakeholders regarding changes to the system, streamlining the survey used, as many parents indicated a 25-item survey was burdensome. Through our EC Division Parent Listserv, Council on Educational Services for Exceptional Children, The Exceptional Children Assistance Center (ECAC), local EC Directors, and others, we solicited input regarding a review of the current survey instrument used and a ranking of the questions most important to them for consideration, and as a result revised the survey used to include 17 of the 25 original questions.

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).**

\*Difference (percentage points) between the percentage of surveys distributed and the percentage of responders in the sample who completed the survey. The acceptable range of over/under-representation is typically +/-3 percentage points and was used to determine representativeness. Some percentages may not add to 100 due to rounding.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | YES |
| If yes, has your previously approved sampling plan changed? | YES |
| If yes, provide sampling plan. | Indicator-8-sampling-plan |

**Describe the sampling methodology outlining how the design will yield valid and reliable estimates.**

The North Carolina Department of Public Instruction (NCDPI) used a 17-item survey with a Likert scale. For parents of children ages 5-21, NCDPI used a corresponding 17-item survey, with the same Likert scale, that addresses family involvement. Five (5) Local Education Agencies (LEAs) with an average enrollment of 50,000 students or more are included in the annual sampling plan. Additionally, approximately one-fifth of the remaining districts balanced by size and location with consideration for race/ethnicity, grade level and disability category are included in the sample each year.

The Indicator 8 Sampling plan for NC can be access at: https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/reporting

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used?  | YES |
| If yes, is it a new or revised survey? | NO |
| If yes, provide a copy of the survey. |  |

**Provide additional information about this indicator (optional)**

Due to the change in how the state/LEAs sent out surveys in FFY 2020 change in how the state/LEAs sent out surveys (much larger group was sent surveys than in previous years) in FFY 2020, data from prior to this year may not be as comparable, thus necessitating the need to change the baseline to FFY 2020.

## 8 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

**Response to actions required in FFY 2019 SPP/APR**

In FY2020 the districts in the sample sent letters with links to the survey instrument to their entire special ed student population on the December child count to illicit a wider range of responses from parents. This also means that the total number of survey distributed increased significantly (17,634 in FY2019 to 87181 in FY2020) which impacted our response rate from year to year greatly. Going forward, the EC division will hold webinars in the Spring with the districts in the sample preparing them for the letters and assisting in methods of sending out the information. The letters will include QR codes for easy access to the survey instrument either in English or Spanish. The SSIP Stakeholder and Family Engagement workgroup is analyzing the FY 2019 and FY 2020 Indicator 8 survey data and report to engage families and districts in use of the data.

## 8 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

## 8 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

In the FFY 2021 SPP/APR, the State must analyze the response rate to identify potential non-response bias and identify steps taken to reduce any identified bias to promote response from a broad cross section of parents of children with disabilities, as required by the Measurement Table.

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

**Compliance indicator**: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

**Data Source**

State’s analysis, based on State’s Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.

**Measurement**

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State’s definition of “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2020 reporting period (i.e., after June 30, 2021).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in special education and related services and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 9 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n and/or cell size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.**

7

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 5 | 0 | 321 | 0.00% | 0% | 0.00% | N/A | N/A |

**Were all races and ethnicities included in the review?**

YES

**Define “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).**

In North Carolina, disproportionate representation of racial and ethnic groups in special education is defined as a risk ratio of => 3.0\*.

To determine the number of LEAs with disproportionate representation that is the result of inappropriate identification, the North Carolina Department of Public Instruction:

1. Identifies LEAs with disproportionate representation of racial and ethnic groups in special education and related services in using the current academic year (1 year of data), using the First Month Race and Gender Enrollment data and the December 1 Periodic Child Count data in Westat’s Disproportionality Excel Spreadsheet Application;
5 LEAs had disproportionate representation in , which is determined by a risk ratio of => 3.0\*.

For the LEAs determined to have disproportionate representation in FY2020, the NCDPI/the LEAs completed steps 2 and 3. Steps 2 and 3 are described in the section: Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

\* Risk ratios are computed for LEAs with a minimum of 30 students of the particular race/ethnicity identified in an LEAs total enrollment and a minimum cell size of 10 students with disabilities.

**Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.**

For FY2020 year inappropriate identification findings were based on the number of years the districts had been on the warning list and or identified as having significant disproportionality. Of the 5 districts with disproportionate representation, 0 districts met the state criteria for inappropriate identification and further investigation is pending.

**Provide additional information about this indicator (optional)**

NC has changed it's baseline with the FFY 2020 APR submission, as all States are now required to provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories.

North Carolina is implementing a change in process at the state level to get a more in depth view of how districts are identifying students with disabilities and moving away from the LEA Self-assessment as a means for districts to submit information around this indicator. Going forward, beginning with FY2021 data, all LEAs with disproportionate representation will be required to participate in the collaborative self assessment process.

Due to the revisions of review of policies, practices and procedures which included both internal and external stakeholder involvement, development of new tools to gather the data and complete a full analysis, as well as the impact COVID-19 had on staff availability, the completion of this work has been delayed. In addition to delving into this important work to strengthen the review process, North Carolina had significant changes in staffing at the state level to include a new state SPP/APR coordinator. The new coordinator was focused not only on revising longstanding processes but also intricately involved in presenting data and setting baselines and targets with internal and external stakeholders for the entirety of the FY2020 year.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

**Compliance indicator**: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

 (20 U.S.C. 1416(a)(3)(C))

**Data Source**

State’s analysis, based on State’s Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

**Measurement**

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State’s definition of “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for FFY 2020, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2020 reporting period (i.e., after June 30, 2021).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA. Provide these data at a minimum for children in the following six disability categories: intellectual disability, specific learning disabilities, emotional disturbance, speech or language impairments, other health impairments, and autism. If a State has identified disproportionate representation of racial and ethnic groups in specific disability categories other than these six disability categories, the State must include these data and report on whether the State determined that the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in specific disability categories and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 10 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n and/or cell size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.**

18

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 55 | 9 | 310 | 0.00% | 0% | 2.90% | N/A | N/A |

**Were all races and ethnicities included in the review?**

YES

**Define “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).**

In North Carolina, disproportionate representation of racial and ethnic groups in specific disability categories is defined as a risk ratio of = 3.0.

To determine the number of districts with disproportionate representation that is the result of inappropriate identification, the North Carolina Department of Public Instruction:

1. Identifies districts with disproportionate representation of racial and ethnic groups in specific disability categories using the current academic year (1 year of data), by using the First Month Race and Gender Enrollment data and the December 1 Periodic Child Count data in Westat’s Disproportionality Excel Spreadsheet Application;

55 LEAs had disproportionate representation of racial and ethnic groups in specific disability categories in FY2020 which is determined by a risk ratio of = 3.0\* of a racial/ethnic group in a specific disability category.

\* Risk ratios are computed for LEAs with a minimum of 30 students of the particular race/ethnicity identified in the LEA's total enrollment and minimum cell size of 10 of a particular race/ethnicity in a specific disability category.

**Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.**

For FY2020 year inappropriate identification findings were based on the number of years the districts had been on the warning list and and/or identified as having significant disproportionality. Of the fifty-five (55) districts with disproportionate representation, nine (9) met the criteria for inappropriate identification and further investigation is pending. All nine (9) districts will go through the in-depth review with NCDPI staff and will allow the Exceptional Children division to notify all districts in the state of the changes to the review of policies, procedures and practices.

**Provide additional information about this indicator (optional)**

NC has changed it's baseline with the FFY 2020 APR submission, as States are now required to provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories.

North Carolina is implementing a change in process at the state level to get a more in depth view of how districts are identifying students with disabilities and moving away from the LEA Self-assessment as a means for districts to submit information around this indicator. Going forward, beginning with FY2021 data, all LEAs with disproportionate representation will be required to participate in the collaborative self assessment process.

Due to the revisions of review of policies, practices and procedures which included both internal and external stakeholder involvement, development of new tools to gather the data and complete a full analysis, as well as the impact COVID-19 had on staff availability, the completion of this work has been delayed. In addition to delving into this important work to strengthen the review process at the state level, North Carolina had significant changes in staffing at the state level to include a new state SPP/APR coordinator. The new coordinator was focused not only on revising longstanding processes but also intricately involved in presenting data and setting baselines and targets with internal and external stakeholders for the entirety of the FY2020 year. Even with all of the contributing factors that caused the delay, the EC Division is on target to complete a full review of policies, practices and procedures for Indicator 10 by 7/1/2022. The identification of any non-compliance and corrections will be completed within 1 year of identification and the assurance of these corrections will be shared in the FY2021 SPP/APR.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

## 10 - Required Actions

Because the State reported less than 100% compliance for FFY 2020 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the nine districts identified in FFY 2020 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 11: Child Find

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Child Find

**Compliance indicator**: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

(20 U.S.C. 1416(a)(3)(B))

**Data Source**

Data to be taken from State monitoring or State data system and must be based on actual, not an average, number of days. Indicate if the State has established a timeline and, if so, what is the State’s timeline for initial evaluations.

**Measurement**

a. # of children for whom parental consent to evaluate was received.

b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

Percent = [(b) divided by (a)] times 100.

**Instructions**

*If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.*

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Note that under 34 CFR §300.301(d), the timeframe set for initial evaluation does not apply to a public agency if: (1) the parent of a child repeatedly fails or refuses to produce the child for the evaluation; or (2) a child enrolls in a school of another public agency after the timeframe for initial evaluations has begun, and prior to a determination by the child’s previous public agency as to whether the child is a child with a disability. States should not report these exceptions in either the numerator (b) or denominator (a). If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in b.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 84.62% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 91.55% | 91.98% | 90.22% | 88.99% | 84.13% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

| **(a) Number of children for whom parental consent to evaluate was received** | **(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 31,963 | 18,892 | 84.13% | 100% | 59.11% | Did not meet target | Slippage |

**Provide reasons for slippage**

EC Division staff analyzed data to determine the reason(s) for slippage from the previous year. Reasons for slippage included a lack of needed personnel to complete evaluations, which was exacerbated by COVID-19 and a change to North Carolina's process for collecting the data in the new accountability/reporting system, Every Child Accountability and Tracking System (ECATS).

**Number of children included in (a) but not included in (b)**

13,071

**Account for children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.**

1-5 days - 1059
6-15 days - 1229
16-25 days - 811
26-35 days - 720
36-45 days - 620
46 days or more - 8620
Total - 13059

Reasons for delays/referrals that went beyond the 90 day timeline -
Referral paperwork not processed in a timely manner - 2752
Excessive student absences - 171
Weather delays - 9
Delay in getting parent consent for evaluation - 1602
Other - 1834
COVID-19 - 6691
Total - 13059

**Indicate the evaluation timeline used:**

The State established a timeline within which the evaluation must be conducted

**What is the State’s timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).**

North Carolina has an established timeline (90 calendar days) from receipt of the referral to the placement determination. The 90-day timeline/receipt of the referral begins before parental consent to evaluate and includes the time the evaluation must be conducted, eligibility determined and a decision about placement made.

**What is the source of the data provided for this indicator?**

State database that includes data for the entire reporting year

**Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data.**

The 2020-21 data were collected for all LEAs through the Every Child Accountability and Tracking System (ECATS), North Carolina's accountability system for collecting data for students with IEPs. Allowable exceptions, that were removed from the number of referrals received, were included in ECATS as follows: children who transferred in or out of the LEA, dropped out, or died within 90 days of receipt of referral; children who transferred into the LEA after the 90 day timeline expired and children whose parent(s) repeatedly failed or refused to produce them for the evaluation.

**Provide additional information about this indicator (optional)**

COVID-19 significantly impacted data collection for Indicator 11. Children could not be produced for evaluations due to local closings, individual student quarantines combined with state-wide remote instruction. COVID-19 also impacted the number of staff available to conduct evaluations. As a result, the number of children for whom the state's referral to placement timeline was implemented decreased significantly from the previous year. Because many meetings were handled remotely, the districts’ ability to obtain the written parental consent(s) were delayed.
Initially, LEAs were understaffed and overwhelmed with priorities including:
- arranging to continue to provide meals normally provided by the schools to students;
- purchasing and/or arranging for laptops or iPads for student use at home;
- arranging internet access for students who didn’t have such access at home;
- coordinating contingency plans for absences of students and staff;
- reviewing and revising IEPs to address unique needs during remote learning; and
- participating and implementing technical assistance/professional development for providing services during remote learning.

To mitigate the impact of COVID-19 on data collection, the State took the following steps:
- Provided technical assistance and professional development for conducting evaluations virtually during remote learning.
- Established a reporting code for COVID-19 to identify delays attributed solely to COVID-19 in order to track and resolve when safe to do so.
 - Held Monthly Office Hour WebEx Meetings to provide technical assistance for Indicator 7, 11, 12, and Child Count collections.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 111 | 75 | 0 | 36 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

**Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements***

The 111 LEAs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the EC Division to review new data/student records to verify that each LEA with non-compliance was correctly implementing the regulatory requirements. Any LEA whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner, and was required to submit data/evidence to NCDPI's EC Division of any changes made to improve processes as part of correcting non-compliance prior to the EC Division reviewing additional new records in a subsequent quarterly review as required by the 09-02 memo. During this time, the EC Division provided additional technical assistance, prior to the review of new data/student records, to LEAs that had low compliance rates. Upon review of the new data/student records for the 111 LEAs with findings of non-compliance, the EC Division verified that 75 LEAs were correctly implementing the regulatory requirements within one year of identification.

**Describe how the State verified that each *individual case* of noncompliance was corrected**

The 111 LEAs with non-compliant findings had 3679 child-specific findings of non-compliance in 2019-20. At the time of the initial determination of compliance for Indicator 11, the EC Division verified that the LEAs with non-compliance also submitted/updated data/evidence through the Every Child Accountability and Tracking System (ECATS) that 3615 child-specific instances of non-compliance had been corrected. LEAs were also required to submit data/evidence through ECATS to the NCDPI, as soon as possible and no later than one year from notification of the non-compliant findings, that the remaining 64 child-specific instances of non-compliance had been corrected.

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

DATA NOTE = NC notified its LEAs of noncompliance with Indicator 11 for the FFY2019 in September 2021. Therefore, the 36 findings of noncompliance subsequently corrected is considered pending as the LEAs are still within their one year of correction.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) 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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

**Response to actions required in FFY 2019 SPP/APR**

The 111 LEAs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the EC Division to review new data/student records to verify that each LEA with non-compliance was correctly implementing the regulatory requirements. Any LEA whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner. Then, LEAs were required to submit data/evidence to NCDPI's EC Division of any changes made to improve processes as part of correcting non-compliance prior to the next EC Division quarterly review of additional new records to verify noncompliance was not ongoing as required by the 09-02 memo. Technical assistance, including individualized data analysis and problem-solving with EC Division monitoring consultants and LEAs was provided between correction, verification and subsequent correction. Upon review of the new data/student records for the 111 LEAs with findings of non-compliance, the EC Division verified that 75 LEAs were correctly implementing the regulatory requirements and 36 LEAs were subsequently, correctly implementing the regulatory requirements.

## 11 - OSEP Response

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 36 uncorrected findings of noncompliance identified in FFY 2019 were corrected.
When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019 : (1) 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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priorit**y: Effective General Supervision Part B / Effective Transition

**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))

**Data Source**

Data to be taken from State monitoring or State data system.

**Measurement**

 a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.

 b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.

 c. # of those found eligible who have an IEP developed and implemented by their third birthdays.

 d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.

 e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.

 f. # of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

**Instructions**

*If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.*

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child’s third birthday under 34 CFR §303.211 or a similar State option.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 12 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 48.40% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.74% | 96.48% | 86.03% | 89.60% | 70.42% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.  | 4,420 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.  | 388 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.  | 1,406 |
| d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.  | 925 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays.  | 81 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 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. | 1,406 | 3,026 | 70.42% | 100% | 46.46% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

In the 2019-20 School Year, 93 districts slipped in their percentage rates while in the 2020-21 school year 73 slipped. In the 2020-21 school year, North Carolina schools were almost 100% virtual. Districts reported COVID-19 as the top reason for delays in evaluations for students referred from Part C. Districts struggled to obtain the needed training equipment and tools to hold virtual evaluation and meetings. Districts also reported staffing issues and the availability of school psychologists to complete evaluations. Parents in North Carolina also chose in many cases, not to proceed with evaluations due to concerns about COVID-19.

Other known causes of North Carolina’s lower compliance rates for the last two years were most likely due to:
1) Local leadership not increasing the number of personnel when there is a subsequent increase in the number of notifications and referrals from one year to the next.
2)Local leadership restricting funding for summer evaluations when the number of notifications and referrals warrant sustained efforts during the summer.
3) Lack of staff/personnel to complete the evaluations.

**Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f**

1,620

**Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.**

1 to 5 days .................. 55
6 to15 days ................. 74
16 to 25 days .............. 66
26 to 35 days .............. 99
36 to 45 days .............. 99
46 days or more ......... 1227
TOTAL .........................1620

a. Family Circumstance (e.g. illness/death in family, change in custody)...............................................................................................47
b. Child Circumstance (e.g. child was sick)................................................................................................................................................11
c. Part B Circumstance (e.g. delays completing evaluations, timely meetings, arranging transportation, enrollment, etc.)..................61
d. Part C Circumstance (e.g. delays in notifying or issuing transition planning meeting invitation)........................................................28
COVID Delay...........................................................................................................................................................................................1473
TOTAL.....................................................................................................................................................................................................1620

**Attach PDF table (optional)**

**What is the source of the data provided for this indicator?**

State database that includes data for the entire reporting year

**Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data.**

The data used to report on this indicator includes statewide data that are inclusive of every school district in the state that provides special education and related services to the preschool-age population. Data were not obtained by sampling. The Department created Excel spreadsheets with the required data collection fields which automatically calculated the percentage of timely transitions. Each LEA was required to have its Exceptional Children Director sign an assurance as to the accuracy of the data. Spreadsheets were submitted electronically to the Department. The Department also created an optional spreadsheet to assist LEAs in tracking the referral and placement dates for each student. The Part C system begins notifying Part B of children starting at 2 years, 3 months of age. The transition process is outlined in a Guiding Practices Document and local interagency plans; and additional technical assistance is provided by numerous supporting documents (http://nceln.fpg.unc.edu/node/315).

**Provide additional information about this indicator (optional)**

COVID-19 significantly impacted data collection for Indicator 12. Children could not be produced for evaluations due to local closings, individual student quarantines combined with state-wide remote instruction. COVID-19 also impacted the number of staff available to conduct evaluations. As a result, the number of children for whom the state's referral to placement timeline was implemented decreased significantly from the previous year. Because many meetings were handled remotely, the districts’ ability to obtain the written parental consent(s) were delayed.

Initially, LEAs were understaffed and overwhelmed with priorities including:
- arranging to continue to provide meals normally provided by the schools to students;
- purchasing and/or arranging for laptops or iPads for student use at home;
- arranging internet access for students who didn’t have such access at home;
- coordinating contingency plans for absences of students and staff;
- reviewing and revising IEPs to address unique needs during remote learning; and
- participating and implementing technical assistance/professional development for providing services during remote learning.

To mitigate the impact of COVID-19 on data collection, the State took the following steps:
- Provided technical assistance and professional development for conducting evaluations virtually during remote learning.
- Established a reporting code for COVID-19 to identify delays attributed solely to COVID-19 in order to track and resolve when safe to do so.
 - Held Monthly Office Hour WebEx Meetings to provide technical assistance for Indicator 7, 11, 12, and Child Count collections.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 99 | 96 | 0 | 3 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

**Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements***

The 99 LEAs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the EC Division to review new data/student records to verify that each LEA with non-compliance was correctly implementing the regulatory requirements. Any LEA whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner, and was required to submit data/evidence to NCDPI's EC Division of any changes made to improve processes as part of correcting non-compliance prior to the EC Division reviewing additional new records in a subsequent quarterly review as required by the 09-02 memo. During this time, the EC Division provided additional technical assistance, prior to the review of new data/student records, to LEAs that had low compliance rates. Upon review of the new data/student records for the 99 LEAs with findings of non-compliance, the EC Division verified that 96 LEAs were correctly implementing the regulatory requirements.

**Describe how the State verified that each *individual case* of noncompliance was corrected**

The 99 LEAs with non-compliant findings had 1039 child-specific findings of non-compliance in 2019-20. At the time of the initial determination of compliance for Indicator 12, the EC Division verified that the LEAs with non-compliance also submitted/updated data/evidence through the Every Child Accountability and Tracking System (ECATS) that 1028 child-specific instances of non-compliance had been corrected. LEAs were also required to submit data/evidence through ECATS to the NCDPI, as soon as possible and no later than one year from notification of the non-compliant findings, that the remaining 11 child-specific instances of non-compliance had been corrected. EC Division staff continues to review the submitted data/evidence through ECATS and verified that the required corrections had been completed for all child-specific instances.

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

DATA NOTE = NC notified its LEAs of noncompliance with Indicator 12 for the FFY2019 in September 2021. Therefore, the 3 findings of noncompliance subsequently corrected is considered pending as the LEAs are still within their one year of correction. LEAs were also required to submit data/evidence through ECATS to the NCDPI, as soon as possible and no later than one year from notification of the non-compliant findings, that the remaining 11 child-specific instances of non-compliance had been corrected. EC Division staff will review the submitted data/evidence through ECATS and verified that the required corrections had been completed for all child-specific instances within one year of notification.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) 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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

**Response to actions required in FFY 2019 SPP/APR**

The 99 LEAs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the EC Division to review new data/student records to verify that each LEA with non-compliance was correctly implementing the regulatory requirements. Any LEA whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner., Then, LEAs were required to submit data/evidence to NCDPI's EC Division of any changes made to improve processes as part of correcting non-compliance prior to the next EC Division quarterly review of additional new records to verify noncompliance was not ongoing as required by the 09-02 memo. Technical assistance, including individualized data analysis and problem-solving with EC Division monitoring consultants and LEAs was provided between correction, verification and subsequent correction. Upon review of the new data/student records for the 99 LEAs with findings of non-compliance, the EC Division verified that 96 LEAs were correctly implementing the regulatory requirements and 3 LEAs were subsequently, correctly implementing the regulatory requirements.

## 12 - OSEP Response

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 12 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 3 uncorrected findings of noncompliance identified in FFY 2019 were corrected.
When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) 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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 13: Secondary Transition

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Compliance indicator**: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

 (20 U.S.C. 1416(a)(3)(B))

**Data Source**

Data to be taken from State monitoring or State data system.

**Measurement**

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

**Instructions**

*If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.*

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 94.70% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 88.14% | 85.35% | 85.45% | 80.84% | 56.42% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

| **Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition** | **Number of youth with IEPs aged 16 and above** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 297 | 489 | 56.42% | 100% | 60.74% | Did not meet target | No Slippage |

**What is the source of the data provided for this indicator?**

State monitoring

**Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data.**

During the 2020-21 school year, data for this indicator were gathered through remote Program Compliance Reviews conducted in forty-two (42) LEAs, including thirteen (13) traditional LEAs and twenty-nine (29) charter schools. Of the twenty-nine (29) charter schools, twelve (12) of the charter schools in which a Program Compliance Review was completed had students age 16 or older and a transition review was conducted. Monitoring consultants and other EC Division staff members conducted the Program Compliance Reviews. When reviewing records to determine compliance with Indicator 13, staff used the EC Division's Special Education Student Record Review Protocol with compliance items based on The Indicator 13 Checklist, developed by the National Secondary Transition and Technical Assistance Center (NSTTAC).

| **Question** | **Yes / No** |
| --- | --- |
| Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16?  | NO |

**Provide additional information about this indicator (optional)**

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 25 | 14 | 11 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

**Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements***

Twenty-five (25) LEAs with Program Compliance Reviews and students with disabilities, ages 16 and older, had non-compliant findings in one or more student records. NCDPI staff reviewed additional (new) student records for each of the twenty-five (25) LEAs where non-compliance was identified and verified, as required, that all of the non-compliance had been systemically corrected in each LEA. NCDPI reviewed the new student records electronically through the Every Child Accountability and Tracking System (ECATS).

**Describe how the State verified that each *individual case* of noncompliance was corrected**

Twenty-five (25) LEAs with Program Compliance Reviews and students with disabilities, ages 16 and older, had findings of non-compliance in one or more student records. The LEAs that had identified non-compliance were required to submit a copy of each student's IEP that documented the correction of student specific noncompliance (192 individual student records) for NCDPI review and verification. If an IEP(s) could be accessed electronically through ECATS, the NCDPI Monitoring Consultants verified correction using the electronic submission/version of the IEP(s). NCDPI verified the correction of the 192 IEPs that had non-compliant findings related to the transition requirements.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) 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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

**Response to actions required in FFY 2019 SPP/APR**

NCDPI staff reviewed records to ensure corrections were completed as required and pulled an additional sample as part of Prong 2 activities to ensure that any systemic noncompliance had been identified, corrected and verified as not ongoing. Twenty-five (25) LEAs with Program Compliance Reviews and students with disabilities, ages 16 and older, had non-compliant findings in one or more student records.

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) 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 (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Results indicator:** Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

 A. Enrolled in higher education within one year of leaving high school.

 B. Enrolled in higher education or competitively employed within one year of leaving high school.

C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.

(20 U.S.C. 1416(a)(3)(B))

**Data Source**

State selected data source.

**Measurement**

A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

**Instructions**

*Sampling****of youth who had IEPs and are no longer in secondary school****is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See General Instructions on page 2 for additional instructions on sampling.)*

Collect data by September 2021 on students who left school during 2019-2020, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2019-2020 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

**I. *Definitions***

*Enrolled in higher education* as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

*Competitive employment* as used in measures B and C: States have two options to report data under “competitive employment”:

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Option 2: States report in alignment with the term “competitive integrated employment” and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a “part-time basis” under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

*Enrolled in other postsecondary education or training* as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

*Some other employment* as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services, etc.).

**II. *Data Reporting***

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of “leavers” who are:

 1. Enrolled in higher education within one year of leaving high school;

 2. Competitively employed within one year of leaving high school (but not enrolled in higher education);

3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);

4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).

“Leavers” should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, “leavers” who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

**III. *Reporting on the Measures/Indicators***

Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school must be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States should consider categories such as race/ethnicity, disability category, and geographic location in the State.

If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

**Beginning with the FFY 2021 SPP/APR, due Feb. 1, 2023,** when reporting the extent to which the demographics of respondents are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, States must include race/ethnicity in its analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2009 | Target >= | 39.50% | 39.50% | 39.75% | 40.00% | 40.00% |
| A | 39.00% | Data | 38.39% | 27.27% | 27.01% | 29.48% | 28.51% |
| B | 2009 | Target >= | 62.50% | 62.50% | 62.75% | 63.00% | 63.00% |
| B | 62.00% | Data | 71.73% | 62.51% | 62.83% | 63.07% | 69.99% |
| C | 2009 | Target >= | 73.50% | 73.50% | 73.75% | 74.00% | 76.00% |
| C | 73.00% | Data | 77.98% | 78.14% | 77.70% | 79.05% | 80.76% |

**FFY 2020 Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 40.51% | 41.51% | 42.50% | 43.00% | 43.50% | 44.00% |
| Target B >= | 71.00% | 73.00% | 75.00% | 77.00% | 79.00% | 81.00% |
| Target C >= | 81.76% | 83.75% | 85.75% | 87.75% | 89.75% | 91.75% |

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 3,276 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 1,385 |
| Response Rate | 42.28% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school  | 272 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school  | 433 |
| 3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed) | 26 |
| 4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed). | 72 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 272 | 1,385 | 28.51% | 40.51% | 19.64% | Did not meet target | Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 705 | 1,385 | 69.99% | 71.00% | 50.90% | Did not meet target | Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 803 | 1,385 | 80.76% | 81.76% | 57.98% | Did not meet target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A** | FFY 2020 Exiters were impacted by COVID-19 in North Carolina due to Colleges and Universities cancelling classes and closing campuses. Percentage rates also slipped due to the increase in the number of respondents to our survey (1385 respondents in FFY 2020 compared to 733 in FFY 2019). North Carolina had 71.84% percent of Exiters who did not respond to the survey and 42.02% of the respondents were unengaged at the time of the survey data collection. This is an increase of 19.72% in the percent of unengaged students from FFY 2019. |
| **B** | FFY 2020 Exiters were impacted by COVID-19 in North Carolina due to Colleges and Universities cancelling classes and closing campuses. Also, many of North Carolina Exceptional Children graduates work in the food industry and jobs were extremely impacted by COVID-19. Percentage rates also slipped due to the increase in the number of respondents to our survey (1385 respondents in FFY 2020 compared to 733 in FFY 2019). North Carolina had 71.84% percent of Exiters who did not respond to the survey and 42.02% of the respondents were unengaged at the time of the survey data collection. This is an increase of 19.72% in the percent of unengaged students from FFY 2019. |
| **C** | FFY 2020 Exiters were impacted by COVID-19 in North Carolina due to Colleges and Universities cancelling classes and closing campuses. Also, many of North Carolina Exceptional Children graduates work in the food industry and jobs were extremely impacted by COVID-19. Percentage rates also slipped due to the increase in the number of respondents to our survey (1385 respondents in FFY 2020 compared to 733 in FFY 2019). North Carolina had 71.84% percent of Exiters who did not respond to the survey and 42.02% of the respondents were unengaged at the time of the survey data collection. This is an increase of 19.72% in the percent of unengaged students from FFY 2019. |

**Please select the reporting option your State is using:**

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 28.71% | 42.28% |

**Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.**

North Carolina trains districts in the sampling plan annually in the Spring prior to the data collection period. The training includes an overview of the Indicator 14 data collection and the calculation, where and how to access the exiting data for the students included in the collection, access to the survey collection tool, and training and instruction for how to ask questions and glean information from students and family. The training materials are posted on the EC Division website so that districts can train staff. North Carolina has seen significant improvement in response rate by utilizing district staff over third-party contractors.

**Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.**

North Carolina used NTACT's calculator on representativeness and entered the non-response data compared to the overall sample data to get the difference between target responders and non-responders.

Category Target Leaver Representation Non-Respondent Representation Difference
LD....................47.46%...............................................45.76%.......................................-1.7%
ED......................3.62%.................................................4.72%.........................................1.1%
ID........................9.83%................................................9.86%.........................................0.0%
AO.....................39.09%..............................................39.66%.........................................0.6%
Female..............34.54%...............................................35.10%........................................0.6%
Minority.............42.99%...............................................44.50%.......................................1.5%
ELL ....................10.24%...............................................10.11% .....................................-0.1%
Dropout ............10.63%...............................................13.33%.......................................2.7%

\*Difference between the percentage of school Exiters and the percentage of Exiters in the sample that did not complete the survey. The acceptable range of over/under-representation is typically +/- 3 percentage points. North Carolina did not find an area where non-response bias was identified.

**Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.**

The response data are representative for gender, race, disability categories, and type of exit.
To examine potential nonresponse bias, a comparison of the known characteristics of all 2019-20 Exiters to the characteristics of those who completed the survey was conducted and noted in the following table.
School Leaver Characteristics..........Total School Exiters (%)..........Completed Survey (%)..........Difference\* (percentage points)
GENDER
Female........................................................ 34% ............................................... 35% ....................................... +1
Male............................................................ 66% ............................................... 65% ........................................ -1
RACE
African American....................................... 35% ............................................... 33% ....................................... -2
Hispanic...................................................... 14% ............................................... 12% ....................................... -2
White........................................................... 45% ............................................... 47% ...................................... +2
Other Races................................................. 6% ................................................. 8% ....................................... +2
DISABILITY
Autism.......................................................... 8% ................................................. 9% ....................................... +1
Intellectual Disability................................. 12% ............................................... 10% ...................................... -2
Other Health Impaired.............................. 21% ............................................... 23% ..................................... +2
Serious Emotional Disability...................... 5% ................................................. 4% ...................................... -1
Specific Learning Disability........................ 50% ............................................... 48% ..................................... -2
Other Disabilities.......................................... 4% ................................................. 5% ...................................... +1
TYPE OF EXIT
Graduated..................................................... 78% .............................................. 80% ................................... +2
Certificate...................................................... 4% ................................................ 6% ..................................... +2
Dropped Out................................................. 16% ............................................. 13% .................................... - 3
Reached Maximum Age............................... 1% ............................................... 1% ..................................... +/-0
\*Difference between the percentage of school Exiters and the percentage of Exiters in the sample that completed the survey. The acceptable range of over/under-representation is typically +/- 3 percentage points. Some percentages may not add up to 100 due to rounding.

**The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)**

YES

**If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.**

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).**

Difference between the percentage of school Exiters and the percentage of Exiters in the sample that completed the survey. The acceptable range of over/under-representation is typically +/- 3 percentage points. Some percentages may not add up to 100 due to rounding.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | YES |
| If yes, has your previously approved sampling plan changed? | YES |
| If yes, provide sampling plan. |  |

**Describe the sampling methodology outlining how the design will yield valid and reliable estimates.**

North Carolina conducts a sampling of local education agencies (LEAs), charter schools and State-Operated Programs (SOPs). A sampling calculator developed by the National Post-school Outcomes Center was used to establish representative samples through fiscal year 2025-26. District level information was entered into the Sampling Calculator and a sampling of districts, based on a multi-way cluster model, was produced. Samples were equivalent for size of district, percentage of males and females, students with disabilities, and minority race. All LEAs are sampled at least once every five years. The five LEAs with an Average Daily Membership (ADM) of 50,000 or more are sampled each year. Students in the sample include all students with IEPs who graduated with a regular diploma, aged out, received a certificate, or dropped out.

The Indicator 14 Sampling Plan can be accessed at the following link: https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/reporting

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used?  | YES |
| If yes, is it a new or revised survey? | NO |

**Provide additional information about this indicator (optional)**

FFY 2020 Exiters were impacted by COVID-19 in North Carolina due to Colleges and Universities cancelling classes and closing campuses. Also, many of North Carolina Exceptional Children graduates work in the food industry and jobs were extremely impacted by COVID-19.

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

## 14 - Required Actions

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / General Supervision

**Results Indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

 (20 U.S.C. 1416(a)(3)(B))

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (3.1(a) divided by 3.1) times 100.

**Instructions**

*Sampling is not allowed.*

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s data under IDEA section 618, explain.

States are not required to report data at the LEA level.

## 15 - Indicator Data

Select yes to use target ranges

Target Range is used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1 Number of resolution sessions | 16 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1(a) Number resolution sessions resolved through settlement agreements | 2 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 86.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 75.00% - 85.00% | 75.00% - 85.00% | 75.00% - 85.00% | 75.00% - 85.00% | 75.00%-85.00% |
| Data | 48.84% | 38.46% | 47.37% | 34.21% | 21.05% |

**Targets**

| **FFY** | **2020 (low)** | **2020 (high)** | **2021 (low)** | **2021 (high)** | **2022 (low)** | **2022 (high)** | **2023 (low)** | **2023 (high)** | **2024 (low)** | **2024 (high)** | **2025 (low)** | **2025 (high)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target >= | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% |

**FFY 2020 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2019 Data** | **FFY 2020 Target (low)** | **FFY 2020 Target (high)** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 2 | 16 | 21.05% | 75.00% | 85.00% | 12.50% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Dispute resolution trends in North Carolina demonstrate that parties in dispute are either choosing to waive the opportunity for a resolution meeting in favor of going to mediation or utilizing dispute resolution mechanisms outside of those provided by the state. While 67 due process petitions were filed in FY20, only 9 due process petitions were fully adjudicated, two were resolved through resolution agreements and 18 by mediation agreements. Fifty due process complaints were withdrawn or dismissed, including resolved without a hearing. These data suggest that parties in dispute are likely resolving their differences outside of dispute resolution mechanisms provided by the state (resolution, mediation or facilitated IEP meetings) and is believed to be the root cause of the data slippage.

**Provide additional information about this indicator (optional)**

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

The State provided targets for this indicator, and OSEP accepts those targets.

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / General Supervision

**Results indicator:** Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3(B))

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by 2.1) times 100.

**Instructions**

*Sampling is not allowed.*

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s data under IDEA section 618, explain.

States are not required to report data at the LEA level.

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range is used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1 Mediations held | 63 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.a.i Mediations agreements related to due process complaints | 18 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.b.i Mediations agreements not related to due process complaints | 11 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**Targets: Description of Stakeholder Input**

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

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Prefer not to say........................06%

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All Other......................................10%

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Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 71.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 75.00% - 85.00% | 75.00% - 85.00% | 75.00% - 85.00% | 75.00% - 85.00% | 75.00%-85.00% |
| Data | 61.54% | 78.95% | 54.55% | 62.50% | 64.47% |

**Targets**

| **FFY** | **2020 (low)** | **2020 (high)** | **2021 (low)** | **2021 (high)** | **2022 (low)** | **2022 (high)** | **2023 (low)** | **2023 (high)** | **2024 (low)** | **2024 (high)** | **2025 (low)** | **2025 (high)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target >= | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% | 75.00% | 85.00% |

**FFY 2020 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2019 Data** | **FFY 2020 Target (low)** | **FFY 2020 Target (high)** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 18 | 11 | 63 | 64.47% | 75.00% | 85.00% | 46.03% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

State provided dispute resolution mechanisms (due process, mediation, resolution) all had a documented decline in requests during FY20. However, there was an increase in the number of state complaints filed and requests for facilitated IEP Team meetings (NC’s voluntary dispute resolution mechanism). NC’s hypothesis for the slippage in these data are: (1) the complexity of disputes generally lead to the use of multiple dispute resolution strategies – meaning one mechanism may not fully resolve disputes; (2) mediations may resolve the issues in dispute but cannot be counted as successful due to stalled negotiations for attorneys fees; and (3) participation in mediation is used to document a party’s participation in dispute resolution to exhaust all mechanisms should further litigation lead to appeals.

**Provide additional information about this indicator (optional)**

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State provided targets for this indicator, and OSEP accepts those targets.

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

**Measurement**

The State’s SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for children with disabilities. The SSIP includes each of the components described below.

**Instructions**

**Baseline Data*:*** The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Children with Disabilities.

**Targets*:*** In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

**Updated Data:** In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2, 2022, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State’s targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

*Phase I: Analysis:*

- Data Analysis;

- Analysis of State Infrastructure to Support Improvement and Build Capacity;

- State-identified Measurable Result(s) for Children with Disabilities;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

*Phase II: Plan* (which, is in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;

- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and

- Evaluation.

*Phase III: Implementation and Evaluation* (which, is in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

**Specific Content of Each Phase of the SSIP**

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

***Phase III: Implementation and Evaluation***

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result(s) for Children with Disabilities (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., Feb 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 17 - Indicator Data

**Section A: Data Analysis**

**What is the State-identified Measurable Result (SiMR)?**

North Carolina will increase the 5-year adjusted cohort graduation rate (5YCGR) for students with disabilities (SWD), such that the gap is reduced between graduation rates for all students and students with disabilities. The data in the table reflects the 5YCGR for SWD, not the gap.

**Has the SiMR changed since the last SSIP submission? (yes/no)**

NO

**Is the State using a subset of the population from the indicator (*e.g.*, a sample, cohort model)? (yes/no)**

NO

**Is the State’s theory of action new or revised since the previous submission? (yes/no)**

NO

**Please provide a link to the current theory of action.**

Link to NC Theory of Action: https://docs.google.com/document/d/1gW7pkigX6lJQ5\_d4rjooFpw9cIhGP-2p-Bwznh2\_jYo/edit?usp=sharing

**Does the State intend to continue implementing the SSIP without modifications? (yes/no)**

NO

**If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or** **justification for the changes.**

NC will be changing its SiMR in the FFY 2021 submission and will not continue implementing the original, graduation-focused SiMR in 2022. We have already started engaging stakeholders (see Section C: Stakeholder Engagement below) on selection of a new SiMR, data analysis, and root cause analysis for a new SiMR.

Over the course of implementing NC’s first State Systemic Improvement Plan (SSIP), beginning in 2015, the North Carolina Department of Public Instruction (NCDPI) Exceptional Children EC Division and its partners have learned multiple lessons and encountered significant cultural, environmental, and organizational shifts. As a result of these lessons and shifts, including the significant, ongoing, adverse impact of the COVID-19 pandemic on students with disabilities (SWD), the advent of the new six-year SSIP cycle (beginning February 1, 2022) represents a ripe opportunity to reconsider our State-identified Measurable Result (SiMR; see below for historical review of original SiMR). The compelling factors for investigating a different SiMR are multi-faceted and wide-ranging; these factors can be summarized under matters related to data, changes within NCDPI, and regulatory opportunities.

DATA:
Two key data comparisons have been sources of persistent and increasing concern for the EC Division and its partners. First, as the LEA Self-Assessment process entered its third year of implementation in 2018-19, statewide data for Core Element 3: IEP Development and Implementation, revealed systemic dissonance in key student performance outcomes. Specifically, LEAs were reporting strengths in SWD meeting IEP goals but not meeting state proficiency standards (see summary of Indicator 3 data at https://docs.google.com/presentation/d/1fBPmlxGTG4HKLzV2xqkWCZZRoQEIsanT/edit?usp=sharing&ouid=114466409737524691690&rtpof=true&sd=true) . NCDPI responded with a statewide capacity-building effort related to standards-aligned IEP development in the 2019-20 school year until the pandemic disruption began in March, 2020. Second, while graduation data for SWD (first SiMR focus) stayed very close to targets over the six-year plan, proficiency data for SWD was flat or, more recently, moving away from targets. Internal and external stakeholders alike are increasingly concerned about the possibility of SWDs graduating without being proficient in reading and math.

AGENCY CHANGES:
NCDPI has experienced significant leadership transitions since our first SSIP was developed in 2015. We have had three agency superintendents and significant changes in the state board of education composition, strategic vision, and priorities. The state board has designed a strategic plan around the frameworks of equity and whole-child to ensure closure of opportunity gaps by 2025. Following that, the current superintendent has identified literacy as top priority for NC schools and worked with the NC legislature to enact capacity-building for improving reading outcomes for all students, especially in early elementary grades. The EC Division and its partners are eager to align with and contribute to these organizational drivers on behalf of students with disabilities, their families, and local EC programs; a SiMR with coherent connections to educational equity and reading proficiency is a logical, powerful entry point.

REGULATORY OPPORTUNITIES:
The transition to NC SSIP 2.0 also makes way for a long-held agency desire to more closely align EC improvement efforts with NCDPI’s Every Student Succeeds Act Consolidated State Plan (last amended 2020). Through shared vision with stakeholders, data, targets, improvement strategies, and measurement methodologies with general education partners at the state and local level, we are confident collective, positive impact for all students will mean collective, positive impact for students with disabilities. A SiMR with connections to NC’s ESSA priorities for low-performing LEAs will require and strengthen robust collaboration between general and special education improvement efforts. Finally, as NCDPI continues to evolve in its response to the requirements following the Leandro vs. State case (see summary of recommendations at; https://www.ncforum.org/wp-content/uploads/2019/12/WestEd-Summary.pdf ) , the EC Division has a timely opportunity to support several key features of the current action plan, including working toward:

•Well prepared, high quality, and supported teachers in every classroom and administrators in every school
•An assessment and accountability system that reliably assesses multiple measures of student performance
•An assistance and turnaround function that provides necessary support to low-performing schools and districts

**Progress toward the SiMR**

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages)*.***

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 67.82% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 77.90% | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SWD Graduated with a Regular High School Diploma** | **SWD in the 5 Year Cohort** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| \*[[3]](#footnote-4)1 | 15,090 | 73.10% | 77.90% | 74.50%2 | Did not meet target | No Slippage |

**Provide the data source for the FFY 2020 data.**

NC PowerSchool Student Information System is the authoritative source for the Graduation Data. http://accrpt.tops.ncsu.edu/app/2021/cgrext/

**Please describe how data are collected and analyzed for the SiMR**.

Since 2014, annual 5YCGR data for SWD and all students has been retrieved from PowerSchool; the percentage point gap between the SWD and the all-student rate is calculated. Longitudinal analysis of SWD 5YCGR compared to both SiMR targets and non-SWD 5YCGR is tracked.
LEA or school accountability directors/test coordinators and the respective superintendents are required to verify the evidence/documentation and affirm the accuracy by signing and dating the End of Year Data Collection Sign Off. The Division of Accountability Services calculates the cohort graduation rate and monitors the auditing process. Schools are expected to organize documentation collected for students who have been removed from the cohort and submitted to the district/charter school accountability director/test coordinator for validation and entry.

We have been in communication with our OSEP state lead re: our plan to change the SiMR and report new baselines and targets in the FY 2021 submission; this plan was endorsed and, as such, we are reporting targets here as “0” due to requirements of the EMAPS template. These targets have not yet been set.

**Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* that demonstrates progress toward the SiMR? (yes/no)**

YES

**Describe any additional data collected by the State to assess progress toward the SiMR.**

SPP/APR indicators – longitudinal analysis of 1, 2, 3, 4a & b, 5, 8, 9, 10, 11, 13, & 14

LEA Self-Assessment (LEASA): Again, due to COVID-19 impacts, a modified version of the LEASA was administered in FFY 2020. LEAs were given the option to maintain their FFY 2019 improvement plan or revise; 55% opted to revise. Analyses of LEASA and review data were conducted to inform NCDPI support to LEAs. 85% of improvement plans outcomes are focused on academics, 9% on SEL/behavioral needs, and 6% on transition. In terms of programming, 41% of plans are targeting implementation of research-informed practices, 30% target problem solving for improvement, 15% target IEP development and implementation, and 14% target a variety of other aspects of programs/processes. 79% of LEAs indicated need for general/universal support, while others indicated more tailored (12%) or customized needs (9%). Return rate was 96%.

EC Division staff reviewed all 307 LEASA submissions to determine regional support for the year ahead, including: need to build local capacity in root cause analysis, using timelines for continuous improvement cycles, and implementing fidelity measures/analyzing fidelity data. The top three areas identified for support are: math performance of SWD, reading performance of SWD, and SEL for SWD and staff.
NC 2020-21 Preschool Pyramid Model (PPM) - 36 LEAs participate, 2 LEAs are in readiness phase, and 3 Head Start offices serve 11 counties. The continued inclusion of 3 Head Start offices represents an opportunity to leverage Federal dollars and expand the program beyond LEA classrooms. With children learning remotely at the end of the 2019-2020 school year, none of these classrooms were able to be evaluated for fidelity. In 2019-2020, 365 classrooms implemented, a 7% increase in the number of classrooms participating. Although the number of participating LEAs contracted, the ongoing technical assistance provided to remaining LEAs allowed them to expand the project beyond its scope by a significant amount. View the NC Preschool Pyramid Model 2019-20 Annual report at: http://bit.ly/NCELN2020Rpt

NC Project AWARE - Year 3 Annual Report can be viewed at https://drive.google.com/file/d/12GEhbebPDEMRqP7bAtEjE72eCoN0OK6r/view ; this is a key coherent improvement strategy for supporting/scaling up student social emotional learning and mental health, both essential elements for both graduation and post-school outcomes for SWD. Short-term outcomes for Goal 3 (Reduction in school dropout, rate of attempted suicide, and substance use in the number of at-risk students receiving supplemental and intensive mental health and substance use supports within a MTSS) include changes in average student-level measures for each district based on screenings for students at risk for substance use or suicide. Long-term outcome measures include district-level change in school dropout rates, chronic absences, rates of attempted suicide, and substance use. Year 3, 86% of students who were referred for supplemental or intensive services received services.

New SiMR Data Analysis – In Spring/Summer 2021, the EC Division completed a 6-month comprehensive data analysis with stakeholders across SPP/APR student outcome indicators to investigate direction for a new SiMR. Multiple factors and subgroup data were analyzed to determine if we would maintain the current graduation-focused SiMR or shift to another SWD outcome. The decision to change SiMR to a SWD 4th grade reading focus has been confirmed and EC Division will report on new SiMR in FFY 2021 SPP/APR, per guidance from OSEP State Lead. See Infrastructure next steps below.

New SiMR Infrastructure Analysis - In Spring/Summer 2021, the EC Division completed a 6-month comprehensive infrastructure analysis to determine how well current system is aligned to new SiMR focus and to set priorities for realignment where needed. The output from this process will be compared to pending root cause analysis to ensure state and regional support structures are agile and equipped to address local improvement efforts.

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

NO

**Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)**

YES

**If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.**

The COVID-19 pandemic significantly impacted LEA Self-Assessment data collection, analysis, and reporting, as evidenced by preference for continuing with unmet goals from prior year and the number of late submissions. LEAs were/are overwhelmed and significant staffing shortages at the local level (https://spectrumlocalnews.com/nc/triad/news/2021/10/16/north-carolina-teacher-shortage) have made completion of the modified LEASA submission challenging for many small/rural LEAs and charter schools.

As such, our SSIP-related mitigation strategies this year included:

•Maintained the later October 31 due date for submission

•Required submission of only the improvement plan portion of the original LEASA; this included an option for LEAs to maintain their 2020 plan as written provided they give a data-informed rationale for why the previous plan is still relevant

•Provided frequent virtual opportunities for technical assistance and professional development to assist LEAs with mitigating the impact of the pandemic on children/students, families, staff, and the provision of education and services.

•Continued to enhance multiple web-based resource repositories

**Section B: Implementation, Analysis and Evaluation**

**Please provide a link to the State’s current evaluation plan.**

No revision; link to evaluation plan is: https://docs.google.com/document/d/1gBFSZamrjcIEXUX8DCeZvHIQrImE\_kB9z2tFw1wYcRg/edit?usp=sharing
We plan a complete revision of the evaluation plan when we begin our new SiMR (to be reported in the FY 2021 APR)

**Is the State’s evaluation plan new or revised since the previous submission? (yes/no)**

NO

**Provide a summary of each infrastructure improvement strategy implemented in the reporting period:**

Professional Learning (PL) Library - https://www.smore.com/st83m; was enhanced to support local awareness/access to all tiers of EC Division-sponsored PL; the courses are organized by intensity level and LEASA Core Elements to allow local EC leaders to select course that best match needs identified in their improvement plans.

LEA Self-Assessment (LEASA) & Review cycle - LEASA was modified/ flexibility added to improvement plan to decrease burden on LEAs; review tool aligned to LEASA changes and new items support finer analysis; EC Division staff analyzed LEA data by region (statewide assessments, LEA report cards, disproportionality data, discipline data, SPDG engagement, county demographics, funding, staffing, etc.) prior to conducting LEASA reviews this year. This gave reviewers a deeper knowledge of the LEA and they were better equipped to engage in follow-up coaching conversations as a result.

EC Regional Data Teams (RDT) - EC Division staff are assigned to 1 of these 4 teams, which are primary implementing unit of SSIP; RDTs analyze regional- and LEA-level root cause of SWD performance across indicators; implement/support universal SSIP outputs; provide tailored and customized data-based support, problem-solving, and coaching; provide forum for LEAs to collaborate through regional EC Director meetings and new director cohorts

SSIP Work Groups - Data Literacy, Stakeholder & Family Engagement, Research-informed Practices, and Systems Coherence groups produce deliverables in alignment with SSIP priorities identified by stakeholders. External stakeholders, including parents of students with disabilities, are key participants in work groups.

Every Child Accountability and Tracking System (ECATS) – this central data support in NC’s infrastructure for special education is in its 2nd year of operation and enhancements continue; MTSS module and early warning system now live; accessed by over 219,000 unique users and has captured over 335,000 IEP meetings, 129,000 eligibility meetings, and 4700 manifestation determination meetings; online professional learning series supporting use of ECATS for meaningful IEP processes launched this year.

NC State Improvement Project (SIP) - addresses achievement gaps for SWD, with a particular focus on low-wealth/low performing districts, through OSEP State Personnel Development Grants; developed evidence-based courses and coaching addressing literacy and math instruction for NC educators and partnered with IHEs to embed course content in teacher prep programs.

School Health Assessment and Performance Evaluation System (SHAPE)/PRC 29 - special budget provision for services for students with significant behavioral and emotional needs; competitive grant is add-on funding for direct service staff salaries. Completion of

SHAPE Quality Assessment is required component of application.

NC SEL Implementation Team - key outcomes in FFY 2020: Cohort II of SEL & Equity partnership; project evaluation plan adopted; alignment of SEL as core instruction/curriculum/environment within state board school mental health policy

Facilitated Assessment of MTSS-District Level (FAM-D) - FAM-D measures district-level progress towards full implementation of a MTSS. FAM-D data helps school and district-level personnel prioritize implementation steps.

**Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.**

Professional Learning (PL) Library – PROFESSIONAL DEVELOPMENT; completed Phase II of site development and increased accessibility per stakeholder feedback; professional development part of our system which connects LEAs with resources to build local capacity for improving graduation rate for SWD (old SiMR) and other SWD outcomes

LEA Self-Assessment (LEASA) & Review cycle – QUALITY STANDARDS; LEASA was modified/ flexibility added to improvement plan to decrease burden on LEAs; ECD staff analyzed LEA data by region (statewide assessments, LEA report cards, disproportionality data, discipline data, SPDG engagement, county demographics, funding, staffing, etc.) prior to conducting LEASA reviews this year. Submission rate decreased from 98% to 96%.
Governance and quality standards arm of our system; will need a comprehensive revision to align with new SiMR on FFY 2021.

EC Regional Data Teams (RDT) – DATA/TECHNICAL ASSISTANCE; As part of our TA and Data framework, RDTs analyze regional- and LEA-level root cause of SWD performance across indicators; implement/support universal SSIP outputs; provide tailored and customized data-based support, problem-solving, and coaching; provide forum for LEAs to collaborate through regional EC Director meetings and new director cohorts. We may need to analyze the RDT HR allocations based on size and need differences across regions with adoption of new SiMR in FFY 2021.

SSIP Work Groups – GOVERNANCE/DATA/PROFESSIONAL DEVELOPMENT /TECHNICAL ASSISTANCE; Also part of our TA and Data framework, Data Literacy, Stakeholder & Family Engagement, Research-informed Practices, and Systems Coherence groups produce deliverables in alignment with
SSIP SiMR and priorities identified by stakeholders. External stakeholders, including parents of students with disabilities, are key participants in work groups.

Every Child Accountability and Tracking System (ECATS) – GOVERNANCE/DATA/ACCOUNTABILITY/MONITORING; data/accountability/monitoring system in 2nd year of operation and enhancements continue; MTSS module and early warning system now live; User satisfaction with ECATS has grown to 94% and utilization of the required IEP module is robust. System repairs are conducted in a timely manner and feedback cycles from field to DPI and back support system maintenance/currency with policy and practice changes.

NC State Improvement Project (SIP) – PROFESSIONAL DEVELOPMENT /TECHNICAL ASSISTANCE; PD and TA branch of our systems framework addressing achievement gaps for SWD to promote graduation; FFY 2020 outcomes include: Blended Courses Introduced for Reading Research to Classroom Practice AND Foundations of Math and(RRtCP and FoM);; Virtual Presentations provided; Changes to regional assignments for Program Improvement & Professional Development (PIPD)consultants; New SPDG grant awarded for 2021-2026; Data reporting system changed to CCIP

**Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)**

YES

**Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved*.***

NC SPP/APR Stakeholder website – https://sites.google.com/view/ec-division-sppapr-2021-22/home; this resource adds to our infrastructure supporting stakeholders and houses meeting information, provides input on baselines, targets, and improvement strategies, and connects with EC Division staff. Monthly stakeholder meeting materials/recordings are archived on the site for on-demand access.

Assistive Technology Consultant - position that will work with a multidisciplinary team to support districts across the state in matters related to assistive technology (AT). Assistive Technology devices and services are integral components of IDEA, and each public agency must ensure that one or both are made available if required as a part of a student’s IEP both academically and functionally.

**Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.**

NC State Improvement Project (SIP) – Provision of 1 blended and 1 traditional delivery of RRtCP and FoM for every region per semester; New Grant: Priority 3 focus on low wealth/low performing districts; Grant partnership selection based on need and need to build capacity; Development of more OPL courses: Co-Teaching, All Leaders

Professional Learning (PL) Library – Reorganize PL offerings after revision of LEA Self-Assessment

LEA Self-Assessment (LEASA) & Review cycle – Revise LEA Self-assessment to align with new SiMR

EC Regional Data Teams (RDT) – Organize intensity of RDT support around new SiMR-support LEAs; review allocation of personnel to match needs across state and region

SSIP Work Groups – Set new priorities for each work group based on new SiMR

Every Child Accountability and Tracking System (ECATS) – leverage Advanced Reporting to monitor progress on new SiMR from student to state level

NC SEL Implementation Team – develop online SEL resource clearinghouse; develop personnel infrastructure

NC SPP/APR Stakeholder website – add pages for new SSIP/SiMR activities (e.g., root cause analysis, improvement strategy selection, etc.)

**List the selected evidence-based practices implement in the reporting period:**

Foundations of Math and Reading Research to Classroom Practice (RRtCP)
All Leaders
Specially Designed Instruction within an MTSS
NC Social Emotional Learning (SEL) & Equity Project
Project AWARE (Advancing Wellness and Resiliency in Education)
Preschool Pyramid Model

**Provide a summary of each evidence-based practices.**

Foundations of Math and Reading Research to Classroom Practice (RRtCP) – As part of the EC Division (ECD) continued SPDG funding (new award for 2021-26), these courses provide educators and administrators with foundational knowledge needed to support students with persistent challenges in reading and mathematics, including dyscalculia and dyslexia. Course utilizes evidence-based strategies along with a comprehensive assessment system to guide instructional planning and delivery. Total of 391 educators completed training and 29 new trainers were certified in FFY 2020. Both of these courses were accredited by the International Dyslexia Association (IDA) in FY 2020.

All Leaders - supports district and building leadership teams to use Implementation Science for coordinating academic initiatives, including building readiness, implementation stages, implementation teams, and implementation drivers. Participants gain skills to develop, implement, and evaluate district and school plans that support the improvement of core content instruction and achievement of students with disabilities. 12 LEA EC leaders completed this course in FFY 2020.

Specially Designed Instruction within an MTSS - 3-part EBP course (designed around High-Leverage Practices in Special Education) provides LEA leaders and staff resources to establish common language and beliefs concerning specially designed instruction within a Multi-Tier System of Support, define the role of specially designed instruction in overall school improvement, provide adaptive and technical leadership that removes barriers to general and special education collaboration, conduct diagnostic assessment processes, design and deliver SDI via standards-aligned IEPs, and monitor student progress. Improved capacity to support SWD mastery of general education curriculum will improve multiple SWD outcomes. This year, access to courses shifted from an LEA cohort model to on-demand/self-paced online learning. 558 participants are either enrolled or have completed the course to date.

NC SEL & Equity Project – The purpose of this project is to share and collaborate with other LEAs as participants adapt to COVID-19 and build, implement, and/or refine their Core SEL supports while utilizing an educational equity lens. In this project, LEAs are asked to participate in a 2-hour, virtual professional development in which teams will process and reflect on the application of the learning objectives found in the Core SEL Practices online course. In addition, an LEA representative will participate in a 1-hour, virtual Community of Practice (CoP) in which LEAs will have opportunities to share with and learn from one another. Two cohorts totaling 79 LEAs have completed or are engaged in this EBP suite.

Project AWARE – NCDPI was awarded a second, concurrent 5-year grant in FFY 2020 and is adding 3 demonstration sites for a total of 6 funded sites; see Cohort 1/Year 3 annual report at: https://drive.google.com/file/d/12GEhbebPDEMRqP7bAtEjE72eCoN0OK6r/view

Preschool Pyramid Model - This project is designed to help improve child outcomes for preschool children with disabilities and to increase opportunities for instruction in the least restrictive environment (LRE). Based on the preschool pyramid model, developed by the Center on the Social and Emotional Foundations for Early Learning, this tiered framework of evidence-based practices promotes healthy social-emotional development for ALL children birth through 5 years of age. The Preschool Pyramid Model (PPM) promotes strategies to help teaching staff build positive relationships with and among children by creating supportive learning environments, teaching children to understand and express their emotions, and use problem solving skills. The PPM aligns with school-age Positive Behavior Intervention and Supports (PBIS). 36 school districts in North Carolina operating 1,048 preschool classrooms led by 360 teachers were implementing the PPM in FFY 2020; 4 expert coaches were also added to cohort this year. Tier III of the PPM was developed with stakeholders in FFY 2020, the Pk annual data collection was heavily revised, a new state leadership teams was launched, and 3 new professional learning offerings were released.

In addition, the ECD engaged in Targeted TA with The National Center for Pyramid Model Innovations (NCPMI): Implementation Coaching to Advance Equity in Pyramid - Model programs TA partnership for state program coaches and program-wide Pyramid Model implementation sites to focus on the advancement of equity and the promotion of anti-bias practices in the program. This TA will assist in establishing demonstration sites for advancing equity and addressing bias and will provide resources for addressing equity within state Pyramid Model implementation and scale-up. The ECD also participated in Intensive TA with NCPMI: Implementation and Scale-up of the Pyramid Model within Preschool Programs. Provide training, technical assistance, and ongoing support for the implementation and scale-up of the Pyramid Model. Activities include: Guiding a cross-sector state leadership team; Establishing a professional development network of program coaches; Training local implementation programs; and Guiding the use of data decision-making by state and local programs.

**Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.**

The EBPs listed below positively impact SWD graduation rate as follows:
Foundations of Math and Reading Research to Classroom Practice (RRtCP) – improved instructional efficacy in reading and math which leads greater SWD engagement, success, and credit accrual

All Leaders – improved implementation of EBPs at the local level which leads to improved SWD outcomes, including graduation rate

Specially Designed Instruction within an MTSS – improved SWD access and mastery of general education curriculum

NC SEL & Equity Project – more equitable access to culturally responsive curriculum, instruction, and environments leads to greater SWD engagement and academic outcomes

Project AWARE – positive mental health promotion and prevention, more agile/effective mental health interventions leads to reduction of risk factors for SWD failure and dropout

Preschool Pyramid Model - promotes healthy social-emotional development for ALL children birth through 5 years of age which leads to long-term impact on school engagement and academic success

**Describe the data collected to monitor fidelity of implementation and to assess practice change.**

Foundations of Math and Reading Research to Classroom Practice (RRtCP) – Family Engagement Quality Indicators, FoM Fidelity Observations, RRtCP Fidelity Observations; 2019-20 Annual report at: https://drive.google.com/file/d/1nBcIrhqcShaLWJeqTtNOEAseQwKa83HB/view?usp=sharing

Specially Designed Instruction within an MTSS – SDI walkthrough tool is recommended for local data collection; NCDPI does not require use or track these data

Project AWARE - See data sources in the Project ACTIVATE Performance Assessment Plan at https://docs.google.com/document/d/1vKwGM-nZr5vMO9PsGjhhVyZyPEreK5qgBovWDKh-Hm4/edit?usp=sharing

Preschool Pyramid Model - 255 (70.8%) of those implementing met fidelity on the Teaching Pyramid Observation Tool (TPOT); 120 trained PPM coaches

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

Foundations of Math and Reading Research to Classroom Practice (RRtCP) – reading and math performance of SWD taught by FoM/RRtCP trained staff

NC SEL & Equity Project – Evaluation Plan: https://docs.google.com/document/d/1Zf0SF7iKSCs7cu3OJk1mdSOlF2wA9-TIz270Ve0gKP0/edit?usp=sharing

**Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.**

Foundations of Math and Reading Research to Classroom Practice (RRtCP) - Provision of 1 blended and 1 traditional delivery of RRtCP and FoM for every region per semester; New Grant: Priority 3 focus on low wealth/low performing schools; grant LEA partnership selection based on need and need to build capacity; development of more online courses: Co-Teaching, All Leaders

Specially Designed Instruction within an MTSS - Continue to promote the Implementation Guide, Leadership Repository, & self-paced courses.

NC SEL & Equity Project - Leverage NC MTSS for SEL & SMH; conduct NCDPI internal SEL training; grow workforce SEL capacity; grow SEL-ready educator pipeline

Project AWARE - look further at longer-term outcomes associated with improved supplemental and intensive supports, including high school dropout rate, and community rates of substance use and attempted suicide.

Preschool Pyramid Model – System-level equity analysis re: access to project, engagement in project, funding model; Practice- level equity analysis via disaggregated TPOT data to see who’s benefiting, who’s attending coach trainings, culturally responsive practices within PPM, family engagement, etc.; Continue to scale up PPM implementation (across LEAs and within LEAs); Expanding Expert Coach certification; develop Equity in Coaching PD; Continue with National Technical Assistance cohorts (NCPMI, ECTA, DaSy, etc)

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

North Carolina began the planning process around engaging stakeholders in setting baselines, targets and selecting improvement strategies in January of 2021. The SPP/APR/SSIP Leadership team outlined the plan for stakeholder engagement around the new SPP/APR measurement table using IDC resources and technical assistance including a timeline of tasks with roles and responsibilities and identified stakeholders. The SPP/APR/SSIP Leadership team developed a Qualtrics survey to gather stakeholder feedback and demographics. The same survey was used during and following the stakeholder meetings to present Indicator data, options for targets, and improvement strategies to meet the targets. To further expand stakeholder access to the information and feedback opportunities, the team also developed a webpage (https://sites.google.com/view/ec-division-sppapr-2021-22/home) to house all meeting recordings/transcripts (in Spanish and English), resources, and data presented so that stakeholders who could not attend live meetings could engage in the work at any time.

Beginning in March 2021, invitations were sent to stakeholders across North Carolina, including The external SSIP team, The Council on Educational Services for Exceptional Children, LEA EC Directors, Coordinators and administrators and Parent Advocacy groups. During each Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members’ input, including proposing changes to baseline data for Indicators in which the calculations had changed per the FY 2020 Measurement Table. This information was also shared during State Systemic Improvement Plan (SSIP) stakeholder meetings held monthly. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

The first target setting meetings were held in April of 2021. Each month the virtual meetings were repeated with options in the morning and in the evening to allow for more parent stakeholders to engage. Over the course of the meetings, stakeholders overwhelmingly chose targets that would increase or decrease incrementally from the baseline until the end of fiscal year 2025. For baseline year changes, stakeholders provided feedback that 2018-19 data was the most stable year of data due to the effect the pandemic had on schools in North Carolina. Many Indicators had a significant COVID-19 impact in 2019-20 and will most likely continue through the 2021-22 school year. The following information is a summary of the participation of stakeholders in the meetings held monthly between April and October 2021.
Throughout the course of the collaborative sessions, more than 340 internal and external stakeholders participated in one or more meetings.

More than 50% of the counties in NC were represented by at least one stakeholder in the collaborative meetings The data provided describes the distribution of roles of the involved stakeholders.

Stakeholder Characteristics------Total Stakeholders (%)

GENDER
Female......................................84%
Male..........................................10%
Prefer not to say........................06%

RACE
African American........................14%
Hispanic......................................04%
White..........................................71%
Other Races...............................11%

ROLE
Parents.......................................22%
Agency/Advocacy.......................08%
DPI Staff.....................................53%
LEA PSU Staff............................07%
Other...........................................10%

PARENTS OF STUDENTS W DISABILITY BY DISABILITY- 21% of Total Stakeholders
Autism.........................................27%
Intellectual Disability...................25%
Other Health Impaired................15%
Multiple Disabilities.....................10%
Specific Learning Disability.........06%
Developmental Delay..................07%
All Other......................................10%

PARENTS OF STUDENTS W DISABILITY BY GRADE SPAN
Preschool.....................................06%
Kindergarten - Fifth Grade...........20%
Sixth - Eighth Grade....................17%
Ninth - Twelfth Grade..................32%
Beyond High School....................25%

PARENTS OF STUDENTS W DISABILITY BY SCHOOL TYPE
Traditional......................................67%
Charter...........................................10%
Not Enrolled...................................11%
Private............................................09%
Home..............................................04%

 **Describe the specific strategies implemented to engage stakeholders in key improvement efforts.**

In addition to the stakeholder engagement strategies described in the introduction, SSIP work groups membership includes multiple internal and external stakeholders, including parents of SWD, parent TA center representatives, LEA staff, and advocacy organizations. Along with RDTs, these work groups design and implement SSIP priorities. Notably, one of the work groups is focused on Stakeholder and Family Engagement; this group has conducted surveys with parents and created educational resources re: the IEP process, discipline for SWD, etc.

External stakeholders are the intended audience for NCDPI SPP/APR website, as well, which provides current information about the SSIP and all other indicators.

Ongoing EC Director communications in the form of monthly webinars, weekly emails, Directors Advisory Council, and quarterly regional EC Director meetings keep local EC leaders engaged in SSIP implementation (e.g., LEA Self-assessment process) throughout the year.

Council on Educational Services for Exceptional Children - advises the NC State Board of Education on unmet needs of SWD and in development/implementation of policies related to coordination of services for SWD. The Council also advises the SBOE on developing evaluations, reporting on data, and developing corrective action plans to address findings in federal monitoring reports. Currently consists of 25 members - 20 appointees and 5 ex-officio. Members are appointed for 4 -year terms by the Governor, President Pro Tem of the Senate, Speaker of the House, and the SBOE. Appointees represent SWD from the ranks of parents, teachers, higher education, public and private schools, business/vocational community, and charter schools. A majority of representatives are persons with disabilities or parents of children with disabilities

Parent Liaison - employed by EC Division and also a parent of a student with a disability; collaborates with community partners; develops/posts a parent newsletter 2x/mo; shares announcements from partner agencies; hosted Family Engagement 5-part webinar series to build local capacity for engaging families, specifically through parent liaison positions and special education advisory councils.

**Were there any concerns expressed by stakeholders during engagement activities? (yes/no)**

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

Following our first round of conversations with stakeholders re: data analysis for considering a new SiMR (May-June), stakeholders reported concerns about not have the right/enough data and background information to provide the feedback we were requesting. As a result, we shifted the subsequent stakeholder meetings to a monthly schedule and agenda to provide a more detailed view of the analysis, make more time for questions and reflections, and ensure stakeholders had what they needed to participate with confidence and trust.

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

With full stakeholder engagement:
1. Finalize new SiMR, baseline, and targets through FY 2025.
2. Conduct root cause analysis of SiMR focus.
3. Select state and regional coherent improvement strategies to build capacity in SiMR-support cohort of LEAs.
4. Design new evaluation plan (with external evaluator at UNC-Charlotte) aligned to new SiMR and improvement strategies.
5. Realign EC Division infrastructure, including RDTs, to meet intensity of need in each region.
6. Revise LEA Self-Assessment tool/process and Professional Learning Library to align with new SiMR.

**Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.**

1. Finalize new SiMR, baseline, and targets through FY 2025 – Jan, 2022; data collection/measures will be described in evaluation plan; outcomes = meet new SiMR targets through FY2025

2. Conduct root cause analysis of SiMR focus – Feb/Mar, 2022; data collection/measures include online survey, live interviews, live focus groups; outcomes = identification of 2-3 root causes for SWD 4th grade reading disparities for each region

3. Select state and regional coherent improvement strategies to build capacity in SiMR-support cohort of LEAs – Apr/May, 2022; data collection/measures include state and regional resource mapping of supports for PK-4 grade literacy, literature review; outcomes = identification of 4-5 state and regional level improvement strategies

4. Design new evaluation plan (with external evaluator at UNC-Charlotte) aligned to new SiMR and improvement strategies – Apr-June, 2022; data collection/measures TBD; outcomes = methodology to monitor local, regional, and state-level annual progress toward SiMR

5. Realign EC Division infrastructure, including RDTs, to meet intensity of need in each region – May/June, 2022; data collection/measures include data analysis yielding SiMR, infrastructure analysis, and coherent improvement strategies; outcomes = ECD infrastructure supportive of general supervision required to meet SiMR targets

6. Revise LEA Self-Assessment tool/process and Professional Learning Library to align with new SiMR – Apr-June, 2022; data collection/measures include data analysis yielding SiMR, infrastructure analysis, and coherent improvement strategies; outcomes = LEAs continuously improving literacy instruction, curriculum, and environments such that 4th grade reading opportunity gaps for SWD are closed

**Describe any newly identified barriers and include steps to address these barriers.**

Two main barriers, while not newly identified, continue to disrupt effective implementation of state and local continuous improvement cycles in NC special education:

1. Staffing shortages – NC was already experiencing a shortage of special education teachers and related service providers (RSP) prior to the March, 2020, onset of the COVID-19 pandemic (https://drive.google.com/file/d/1rim8CQdoUjAXTq-JVzjO1Bc5jLlF6tSM/view?usp=sharing). Since then, early retirements, decreased enrollment in university training programs for special education, COVID-19 deaths, and attrition have further reduced our special education corps. Teacher retention and recruitment is an agency-wide priority (https://www.dpi.nc.gov/districts-schools/district-operations/school-business-systems-modernization/supporting-teacher-recruitment) and multiple teacher/RSP incentive programs have been initiated with American Rescue Plan Act funds.

2. Opportunities to Learn (OTL) – this is somewhat related to the staffing barrier above; both external and internal stakeholders have identified access to high-quality specially designed instruction and related services as a barrier to achieving expected outcomes for SWD. Reasons for these opportunity gaps are myriad (https://www.nciea.org/sites/default/files/inline-files/CFA-Marion.OTL\_.Indicators.pdf ); those specific to 4th grade reading outcomes for SWD will be outlined in our FY 2021 SSIP root cause analysis and adoption of coherent improvement strategies.

**Provide additional information about this indicator (optional).**

Data and Infrastructure analyses for new SiMR were completed in Spring, 2021, with broad stakeholder engagement.

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 17 - Required Actions

# Certification

**Instructions**

**Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.**

**Certify**

**I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.**

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.**

**Name:**

Kelley Blas

**Title:**

IDEA Technical Analyst

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984-236-2595

**Submitted on:**

04/27/22 5:49:04 PM

# ED Attachments

 

1. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-2)
2. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-3)
3. [↑](#footnote-ref-4)