**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**

**South 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 South Carolina Department of Education’s (SCDE) strategic vision includes that all students graduate prepared for success in college, careers, and citizenship. By 2022 districts will have available a system of personalized and digital learning that supports students in a safe learning environment to meet the Profile of the South Carolina Graduate. Defined core priorities include supporting the social-emotional learning, health, and safety needs of students through a whole-child approach; strengthening standards, curriculum, instruction, and assessment alignment within schools and districts; enhancing infrastructures, resources, data, and technology of the State's public educational systems; addressing the equity needs of districts and schools through differentiated supports and school transformation; and promoting educator and school leadership development.

The Office of Special Education Services (OSES) worked with the National Center for Systemic Improvement (NCSI) to develop a shared vision aligned to that of the SCDE. The vision statement describes the grounding assumptions, purpose, and goals for the office and reads: “If the OSES provides consistent, collaborative, proactive direction and support focused in the areas of academics, social-emotional learning, early childhood development, and post-secondary transition by using data-based decision making, quality instruction (evidence-based practices), family and community engagement, and fidelity in implementation then local education agencies will have the infrastructure, capacity, and sustainability to provide students with disabilities equitable access and opportunity to meet the profile of the South Carolina graduate (world-class knowledge, world-class skills, and life and career characteristics).”

When our activities and initiatives are aligned to our priorities, we will see improvements in student-level outcomes including:
• Increased involvement with non-disabled peers as shown in our least restrictive environment data;
• Increased graduation rates for students with disabilities;
• Increased post-secondary employment for credential completers;
• Decreased drop-out rates for students with disabilities;
• Decreased suspension and expulsion rates for students with disabilities; and
• Improved achievement on statewide assessments.

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

Once again during the FY20 reporting period, data collection was impacted significantly by COVID, particularly data for Indicators 1, 2, 3, 4, 11, and 12. Because data for Indicators 1, 2, and 4 are lag year data, the early effects of school/local education agency/state agency building closures were seen in the last quarter of the 2019-20 school year. Although some local education agencies (LEAs) opened the 2020-21 school year in a face-to-face format, others opened in a hybrid format, and still, others opened in a virtual-only format. Throughout the school year, LEAs were often forced to switch from face-to-face to virtual at some grade levels in some schools, at schools, or across the entire LEA. These switches occurred as COVID rates rose and fell within communities. The SCDE provided guidance in conjunction with the South Carolina Department of Health and Environmental Control (DHEC), the Centers for Disease Control (CDC), and the United States Education Department (USED). Despite heroic efforts by students, their families, teachers, and staff at all levels, COVID has continued to be a major disruption in education.

The following effects of the pandemic impacted the collection, reporting, and analysis of valid and reliable data:
Continued disparity in access to the infrastructure for essential technology
Widening of pre-existing gaps in achievement
Toll on student and staff well-being and mental health
Challenges to providing essential physical and mental health services in the school setting to both students and staff
Increased risks of family-related challenges due to financial and health (physical and mental) stressors
New barriers for students with disabilities entering the post-secondary world with the continued reduction of access to college and career avenues

Perhaps the most significant impact of all for the 2020-21 school year has been the inability of staff to provide continuous, uninterrupted instruction. As rates of spread have increased, absentee rates for students, teachers, and staff have increased proportionally. Schools have struggled to find qualified substitutes, or any substitutes at all for that matter, when staff is ill or quarantined. School and LEA administrators as well as other teachers in the school were often called into to provide coverage for classrooms to ensure adult supervision. Students missed large chunks of time due to their illness, family illness, and quarantine.

The SCDE issued guidance surrounding both grading and attendance during the last quarter of the 2019-20 school year that significantly impacted Indicators 1, 2, and 4. No students were to be marked absent for that quarter and no student who entered that quarter with a passing grade could be failed for the year. As a result, the graduation rate for all students, including students with disabilities, increased higher than the trend line predicted and the drop-out rate decreased lower than the trend line predicted. As the more traditional routines for grading and attendance have been re-instituted and as revisions are made based on the LEAs’ format for instruction (hybrid and/or all virtual), expectations are that the data may align more closely to the original trend line. In some instances, the OSES has determined targets will be based on the trend line excluding the 2020 data in order to most appropriately reflect what targets will be reasonable. For Indicator 3, SCDE was issued the federally approved waiver for statewide assessment.

March 2020, all South Carolina public school buildings and state offices were temporarily closed. The SCDE announced the waiver requests of the USED for all flexibilities offered by waivers for the state accountability system, assessments, and federal funding and programs. Guidance was provided stating that evidence of participation should not be reflected in attendance; rather it should be reflected in the quality of work and the feedback generated by that work. All students were counted as present. The assessment accountability waiver was approved. The SCDE announced that final grade calculations were to be revised. Based on stakeholder feedback, the SCDE reframed the structure of the second semester so that only one final semester grade would be reported. The semester grade would reflect work completed and mastery demonstrated during the third and fourth quarters combined, but would not be reported as two separate grades. The semester grade would be composed of all third-quarter grades, as well as those grades deemed appropriate by the LEA to assure competency or provide remediation.

Guidance was provided relating specifically to seniors with Individualized Education Programs (IEPs): For a student whose eligibility under special education terminated due to graduation with a regular diploma, or due to exceeding the age of eligibility, the LEA had to provide the student with a summary of the student’s academic achievement and functional performance (SOP), which included recommendations on how to assist the student in meeting his/her postsecondary goals. If a student was failing (prior to the school closure), he/she would be given the same opportunity provided to all similarly-situated students. If the student would be able to graduate, an SOP would be provided. If the student would not meet graduation requirements even with the additional options provided in forthcoming guidance, the IEP team would conduct the annual review, when appropriate, and continue providing services as per the IEP.

April 2020, the SCDE issued guidance about differences in how LEAs were able to deliver instruction during the closure either through eLearning, pencil/paper packets, or a blended approach. The SCDE recommended an estimated number of instructional minutes for each grade level as a guide.

In May 2020, another Executive Order provided the opportunity for LEAs and parents to consider face-to-face activities, if safe; this included opportunities to complete face-to-face evaluations for Child Find.

The SCDE continued to issue guidance during 2020-21. Guidance was based on recommendations from the USED, the CDC, and the DHEC. An additional area of concern/contention rose during this year with the question of mask mandates. The OSES continued monthly calls with LEA directors and family/student advocacy groups to provide the latest guidance and resources related to students with disabilities.

In acknowledgment of the importance of face-to-face instruction, in April 2021, a joint resolution was issued for both the 2020-21 and 2021-22 school years. Specifically, the legislation required that for the current school year, every school district must offer five-day, in-person classroom instruction to students and families who have chosen this mode of instruction no later than April 26, 2021. There is no provision in the law that prohibited a school district from continuing to offer virtual instruction to those students and their families who have chosen it this school year.

The SCDE continued to provide guidance and resources related to the use and expenditure of the various Elementary and Secondary School Emergency Relief Funds (ESSER).

During the 2020-21 school year and even into the 2021-22 school year, LEAs continue to struggle to provide quality instruction to all students. The challenges focused on the following continue to be exacerbated by the inability to collect valid and reliable data upon which to make sound decisions:
Ability to ensure resource comparability across schools and LEAs to ensure equitable access and opportunity for all students
Addressing the mental and physical health issues affecting school discipline
Ensuring inclusion to meet the individual needs of students with disabilities
Making the necessary academic and instructional adjustments and modifications needed to provide instruction during this “new now”

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

86

**General Supervision System:**

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

The SCDE has a system of general supervision in place to ensure that the IDEA requirements are met and to ensure that students with disabilities receive a free, appropriate public education (FAPE). This general supervision system includes the State’s Performance Plan; policies, procedures, and effective practices; effective dispute resolution; data on processes and results; integrated monitoring activities; targeted technical assistance (TA) and professional development (PD); corrections and sustaining of improvement; and fiscal management and accountability. Descriptions of the components of the SCDE’s general supervision system are set forth below. The focus of the elements of the system is on improving outcomes for students with disabilities and ensuring these students have equitable access and opportunity to meet the Profile of the South Carolina Graduate as described above. The OSES has made this results-based accountability the primary focus of all activities within the office. With the assistance of the NCSI, the OSES will continue to refine its general supervision system to focus on the requirements and activities that are most closely related to improving outcomes for students with disabilities and their families. Based on stakeholder input, the OSES has defined 4 focus areas - Early Childhood (EC), Academics (ACA), Social-Emotional (SEL), and Post-Secondary Outcomes (PSO). The OSES is using the Monitoring Protocols developed by the OSEP to continue the work on improving all components of the State’s system of general supervision.

Fiscal - The State’s system of general supervision includes mechanisms to provide oversight in the distribution and use of funds according to federal and state requirements. The OSES utilizes a three-tier model to ensure that LEAs are appropriately allocating and expending funds and resources received under the grant provisions of the IDEA with the purpose of improving outcomes. Monitoring is conducted annually using a self-assessment. These results are then included in a risk assessment that guides additional, more targeted and intensive monitoring activities such as desk audits and file reviews. Data from the fiscal monitoring process is integrated with data from the other components of the system in the LEA Determinations. The Fiscal and Grants Management (FGM) Team utilizes a risk-based tiered model to ensure LEAs are appropriately allocating and expending the funds and resources they receive under the grant provisions. The tiered monitoring system includes increasing levels of scrutiny of processes and documentation through a tiered progression.

Data – The OSES has a data system that ensures that the data collected and reported are valid and reliable and that information is reported to the OSEP and public in a timely manner. The data system informs and focuses on improvement activities as well as verifying that the data collected and reported reflect actual practice and performance. The Data Manager heads a team that uses the Data Collection Protocols developed by the IDEA Data Center (IDC) to ensure data are valid, reliable, and collected in a timely manner. The team also works to analyze and effectively communicate data to various stakeholder groups. The OSES ensures relevant data are collected, analyzed, and reported in a meaningful manner that drives decisions. One means of reporting data may be found in the LEA Determinations. The system utilizes a point system with 13 factors - 4 compliance factors and 9 performance factors. Determination levels for LEAs are based on the total points (51 points maximum) that are calculated by adding the points from the 13 factors. These determination levels are then used to place districts in a System of Tiered Assistance (SoTA) to determine the type, nature, and intensity of technical assistance that the SCDE provides. Total Points Determination and levels: 38.25-51.00: Meets Requirements; 25.5-38.24: Needs Assistance; 12.75-24.99: Needs Intervention; 0-12.74: Needs Substantial Intervention.

Integrated Monitoring – Effective monitoring strategies are integrated across all components of the system. Multiple data sources and methods are used to monitor every LEA every year. Selected, more targeted and intensive monitoring activities are based on the continuous examination of compliance and results data. This includes on-site and off-site activities. The system includes statewide data systems, the dispute resolution processes (formal and informal), and SPP outcome and compliance data to identify noncompliance and improve results/outcomes. Data are collected through annual monitoring activities including self-assessments as well as targeted monitoring activities such as desk audits and on-site file reviews. The system identifies both systemic and individual, student-level noncompliance. The OSES supports LEAs to develop procedures to self-identify noncompliance and also provides assistance with data pre-checks prior to submission. Data from all areas (dispute resolution, SPP, fiscal, compliance, and outcomes) are integrated into the LEA Determinations. LEAs are notified of findings of noncompliance in writing in a timely manner. When systemic noncompliance is identified, the OSES assists the LEA in conducting a root cause analysis to determine and correct underlying reasons for the noncompliance. The OSES also has a process in place to follow up on informal allegations received by the ombudsman that are not part of a State or Due Process Complaint. All findings of noncompliance must be corrected as soon as possible, but in no case later than one year. Written notification is provided once correction has been verified.

Dispute Resolution – The OSES’ system of dispute resolution includes both the formal processes required in the IDEA (State and Due Process Complaints, mediations, and resolution sessions) and informal processes including IEP facilitation and an ombudsperson who assists in resolving informal complaints, concerns, and questions by acting as an intermediary between parents and LEAs. There is a tracking system that is used to assist with the follow-up for any allegations and issues that are brought forth during the calls.

Sustaining Compliance – Supporting improvement and ensuring correction are critical components of the State’s system. This includes explicit authority to enforce regulations, policies, and procedures and to use technical assistance to ensure correction of noncompliance. This component focuses on improvement planning. There is a means for corrective action planning and follow-up tracking of correction and improvement which includes a range of formalized strategies and written timelines for correction of noncompliance. The status of LEAs is reviewed at least quarterly. The OSES has a system for recognizing and sustaining compliance as well as improving outcomes. The system includes data and root cause analysis, development and implementation of a Quality Improvement Plan (QuIP), methods to verify correction, and incentives to maintain and continue the improvement. All QuIPs contain a timeline for correction and a cohort manager assists with the tracking of correction by providing reminders and support to ensure correction happens in a timely manner. Sanctions for outstanding areas of noncompliance are used as needed.

Policies and Procedures – The State has policies, procedures and effective implementation of practices aligned with IDEA, state statutes, and State Board of Education regulations. These are implemented by LEAs and include descriptions of methods the State uses to detect non-compliance. Program improvement that will improve outcomes is the focus of the continuous improvement planning. Effective implementation of evidence-based practices designed to improve student outcomes is at the center of all policies and procedures.

The remaining 2 components - Technical Assistance and Professional Development are described below.

**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.**

TA is directly linked to the SPP indicators and to activities that will improve results and compliance. The State provides LEAs with a range of assistance to improve performance from minimal assistance to intensive intervention based on need. TA is critical to the continuous improvement process. TA and capacity building activities are implemented at varying levels and through multiple means such as websites; documents; coaching; mentoring; training of trainers; meetings/conferences; eModules in the Learning Management System (LMS); and direct training from state personnel and/or state or regional providers.

All LEAs are monitored every year using LEA Determination data, assurances, and self-assessments. The OSES uses 9 performance factors and the finance compliance factor from the LEA Determination data from the past 3 years to place LEAs in a System of Tiered Assistance (SoTA). The SoTA consists of 3 tiers of support. The level of the LEA in the SoTA determines if the LEA will receive more in-depth monitoring and support. The SoTA provides the theoretical and practical foundation for the OSES' continuous improvement efforts and includes a focus on the 4 specific outcomes areas: EC, ACA, SEL, PSO, and Finance. Each focus group analyzes data from the LEA determinations to identify possible areas of risk and where more information is needed to determine the level of technical assistance needed in each focus area. The SoTA is intentionally focused on outcomes. The SoTA pulls data from the LEA Determinations for both compliance and performance factors. LEAs are placed in 1 of 3 tiers based on their data/needs.

Tier 1 (Universal): LEAs here have earned at least 20.29 points out of 39 points that are included in the SoTA. Any LEA that has had Meets Requirements in the last 3 years is also in this tier. This ensures multiple points of data are used and that smaller LEAs will not be unfairly tiered based on one year of data. The OSES provides general information and universal technical assistance and support. Support includes high-quality training and PD, resources and preventative strategies, and training accessed through the LMS. Universal assistance is available to all LEAs.

Tier 2 (Targeted): All districts that have an overall SoTA score of 20.28 are placed in this tier. All LEAs here have also received Needs Assistance or lower in the past 3 consecutive years. LEAs here receive collaborative support to assist in analyzing data sources including a Root Cause Analysis (RCA), identifying gaps, and developing a QuIP with goals and actions steps to address the root cause(s). The technical assistance will come from the SCDE and OSES-funded TA providers in the identified areas of need. Each LEA is assigned an OSES cohort manager.

Tier 3 (Intensive): LEAs are placed in this tier based on their RCA results and QuIP needs and their compliance results from Indicators 4, 9, 10, 11, 12/significant disproportionality. LEAs in Tier 2 with non-compliance on 3 or more of the compliance Indicators are in Tier 3. LEAs here will receive intensive supports when it is determined the LEA’s issues are systemic. In these LEAs, the OSES’ TA providers will provide coordinated and collaborative TA in all 4 identified areas to support the LEA based on needs indicated in their data and RCA.

Each focus group examines core issues to identify the cause that has the highest possibility of impacting the focus area and identifies the performance factors to determine cause-and-effect reaction that has the potential to ultimately lead to LEAs problem(s) in the focus areas.

Tiers 2 and 3 begin by completing an RCA designed to include practices in all 4 of the focus areas (EC, ACA, SEL, and PSO). The cohort manager assists the LEA in conducting a data protocol meeting to dive deeper into the areas found to be potential root causes and assist in developing the QuIP. The QuIP is flexible enough for the LEA to consider the RCA, but also LEA initiatives and immediate needs. The cohort manager can also use the LMS to tailor training to fit the needs of the LEA. LEAs with data and RCAs that show the most need will also work with one of OSES’ contracted TA providers.

The TA providers are aligned with the 4 focus areas. They are assigned to work with the Tiers 2 and 3 LEAs based on the results of the RCAs, QuIPs, and compliance outcomes. The providers include the Transition Alliance of South Carolina (TASC) for PSO; the Behavior Alliance of South Carolina (BASC) for SEL; and the South Carolina Partnerships for Inclusion (SCPI) for EC. The BASC also provides technical assistance and support to LEAs identified as having significant disproportionality. OSES is currently developing the Academic Alliance of South Carolina (AASC) for ACA. All of the TA providers are housed at the University of South Carolina (UofSC).

SCPI aligns with the work of the EC group and is a preschool inclusion initiative through the UofSC’s Child Development Research Center. TA is provided to implement a comprehensive plan to increase inclusive opportunities and improve school readiness outcomes for preschool children with disabilities. LEAs participating in this initiative receive TA to develop cross-sector leadership teams and create and implement 5-year strategic plans outlining their goals and plans of action related to preschool inclusion.

BASC aligns with the work of the SEL group and is through the UofSC’s School of Psychology. TA is provided to support the LEAs’ capacity to decrease suspensions and expulsions and reduce significant discrepancy through the use of evidence-based practices and fidelity of implementation. TA is designed to build the LEAs’ infrastructure, capacity, and sustainability.

TASC aligns with the work of the PSO group and is through the UofSC’s Center for Disability Resources and School of Medicine. TA is focused on providing interagency teams the resources to increase their capacity to collaboratively and effectively serve young adults with disabilities who are transitioning from high school to adult life.

OSES also enlists the assistance of other statewide TA providers that include family and parent advocacy organizations, SC Assistive Technology Project, SC Department of Vocational Rehabilitation, SC Educational Interpreters Center, and the SC Deaf/Blind Project.

The SoTa provides the framework for the OSES to collaborate with LEA’s to be mutually responsible for student outcomes. This system is also designed to support LEAs in ensuring students with disabilities have equitable opportunities and access to meet the Profile of the SC Graduate.

The FGM Team provides resources and technical assistance to all LEAs in the areas of fiscal accountability, fiscal compliance, and fiscal data collection. FGM assistance is provided in a variety of ways including guidance documents, resources and tools, workshops, webinars and/or direct district consultation. FGM Technical Assistance Areas include maintenance of effort (MOE) calculation, excess cost calculation, allowable cost, IDEA fiscal responsibilities for new special education directors and finance directors, improved LEA fiscal policies and procedures, and improved LEA/SEA fiscal data collection and collaboration. Additional support is available to districts in need of more intensive assistance. OSES staff members and other TA providers review data to determine which districts are in need of targeted technical assistance. Districts are identified for this level of support based on factors such as missed deadlines across financial data submissions, difficulty in completing IDEA application, budget, and MOE compliance, and fiscal monitoring results. Identified districts are invited to participate in facilitated workshops designed to provide assistance with root causes analysis and improvement planning. Follow-up is provided to support the implementation and evaluation of district fiscal policies and procedures.

**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.**

PD is also directly linked to the SPP indicators and to activities that will improve results and compliance. The State provides LEAs with a range of tiered assistance to improve performance from minimal assistance to intensive intervention based on need. TA/PD are critical to the continuous improvement process. TA/PD and capacity building activities are implemented at varying levels and through multiple means such as websites; documents; coaching; mentoring; training of trainers; meetings/conferences; eModules in the LMS; and direct training from state personnel and/or state or regional TA/PD providers.

Universal professional development is created based on aggregated topics identified through stakeholder input, focus group data collections, and aggregated results from the RCAs. Based on SPP and LEA Determination data, the OSES is able to identify the focus area(s) with the greatest need for additional training. The partnerships with the UofSC TA providers to assist in building resources using adult learning theory ensures that all PD content is developed with adult learners in mind. Focus is on improving systems for personnel preparation, recruitment, retention, and professional development in evidence-based practices in EC, ACA, SEL, and PSO in order to improve results for children with disabilities.

The OSES’s professional development learning portal uses Moodle as the LMS. This virtual, online provision of professional development, training, and technical assistance is flexible, engaging, and accessible for all educators. OSES offers evidence-based curricula and training that supports the needs of the LEAs as identified through their data.

The courses are developed by content area specialists with specific areas of need in mind. All courses are asynchronous and self-paced with synchronous options for tiered LEAs in need of additional support. The courses target LEA leaders, special education directors, and both special and general educators. The courses can be selected voluntarily or may be prescribed to tiered LEAs based on the results of their RCAs and data dives. For tiered LEAs, the course becomes part of their QuIP to help alleviate gaps identified through the RCAs. Individuals within the LEA for whom the course is relevant, are invited or assigned to take courses.

All educators can access a list of courses on the LMS and self-enroll in the course(s) they need. Participants must pass an exit evaluation at the end of the course. After completion of each course, educators earn a certificate of completion that can be submitted for the recommended renewal credits. Additionally, there is a course evaluation at the end of each course for participants to give their feedback to assist with enhancements and improvements of courses going forward. This system provides much more immediate access to content as well as saves significant time and cost of face-to-face meetings. This format has also ensured that PD does not stop because of COVID. Teachers and staff are able to access the PD without having to plan for missed instructional time, the cost of travel, or the need for substitutes.

**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).**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

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

YES

**Number of Parent Members:**

23

**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.**

Membership on the State Advisory Panel (referred to as the ACESD) is dependent on the year and point in the cycle of elections/appointments. Currently, the ACESD has 46 members. Of the 46 members, 23 are parents of students with disabilities and 3 are individuals with disabilities.

Family Connection of South Carolina (FCSC) is the state’s Parent Training and Information Center (PTI) under the Individuals with Disabilities Education Act (IDEA). They provide peer support, information, outreach, education, and advocacy to meet the individualized needs of families that have children with disabilities. FCSC is also SC’s Parent-to-Parent USA Affiliate. FCSC assisted OSES in our efforts to obtain SPP/APR proposed target feedback in several ways. They reviewed the SPP/APR surveys housed on the OSES web page and provided input from a parental perspective to increase the likelihood of participation from diverse families. The FCSC worked with OSES to translate into Spanish SPP/APR materials aimed at gathering input from families and community members across the state. They also took part in the OSES SPP/APR Virtual Community Forum as a panelist speaking directly to the targets and goals proposed for Indicators 6 & 7 from the parental viewpoint.

-Note that the Chief Executive Officer of the SC parent center was a co-chair for the ACESD throughout much of this past year, creating a situation where working with ACESD was also working with parent center staff.

\*June 2020 Began the soliciting input and involvement of ACESD (recording & email) with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies.
\*August 2020 ACESD presentation/executive committee meeting for questions and feedback from videos.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient to SPP indicators and how LEA determinations and how all that will impact new monitoring process in this order: 7/15, 7/22, and 7/29. Virtual meeting in September to discuss.
\*February 2021 Met with the Parent Advocacy Stakeholder Group regarding targets and how to get information to and from parents
\*March 2021 Proposed targets set and videos to gather stakeholder feedback created, in email and meetings shared scripts with the parent advocacy stakeholder group, they provided feedback and are translating to Spanish.
\*April 2021 All SPP videos and feedback surveys created and posted to the website. Summary of current proposed baselines and targets sent again to all ACESD members, video links sent again to all ACESD members in case refresher is needed, meeting on 4/16 with flipped classroom style Q & A.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholder change presented to ACESD.
\*October 2021 All stakeholder feedback shared with ACESD and finalized targets.
\*January 2022 Included a re-cap and review of the new SPP and targets for both the executive committee and the full council.

**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.**

 Once the first round of survey results were collected and analyzed, the OSES looked at representativeness through the lens of race/ethnicity, disability, grade span, and location of respondents. Although the initial results mirrored the state’s race/ethnic breakdown, staff noted an under-representation in location and grade span. Targeted efforts were then made in the locations of the state with limited response rate. LEA directors in those areas were contacted and asked to again publicize this information and opportunities through various means such as posting on their website, sending flyers, and posting on social media. SCPI reached out to the under-represented parents and community members interested in early childhood outcomes. As mentioned above, FCSC assisted with the Spanish translation of all information and surveys and reaching out to the Hispanic community.

**Soliciting Public Input:**

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

\*June 2020 Began the soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf and Hard of Hearing Partnership (6/4), SCASA (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies.
\*July 2020 Directors meeting and “flipped classroom” opportunities to orient to SPP indicators and how LEA determinations and how all that will impact new monitoring process in this order: 7/15, 7/22, and 7/29. Virtual meeting in August to discuss. SCASA special ed round table (7/27) all of the above recordings ^ for orientation shared.
\*August 2020 Directors call to discuss priorities with changes to SPP to include discussion of priorities for SIMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations shared with NDLA 8/4. Shared with TA providers for feedback and guidance (NCSI) on 8/21. ACESD presentation/executive committee meeting for questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient to SPP indicators and how LEA determinations and how all that will impact new monitoring process in this order: 7/15, 7/22, and 7/29. Virtual meeting in September to discuss.
\*November 2020 Presentation to SCASA special education round table on Grad Rate and Dropout rate to solicit input on methodology, baselines, and targets
\*December to April leadership determined a pause in the push for stakeholder feedback was needed to do covid and the need for stakeholders to be able to process other changes/needs of the time and push turned to internal work.
\*January 2021 Initial meeting with all internal focus groups and data groups about baselines and targets
\*February 2021 Met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets set and videos to gather stakeholder feedback created. 3/16 discussion with the parent advocacy stakeholder group.
\*April 2021 All SPP videos and feedback surveys created and posted to the website. SPP/APR and proposed LEA determinations presented at SCASA special education round table, also provided links to videos. Videos sent again to all LEA Directors with videos and links. Summary of current baselines and targets sent again to all ACESD members, video links sent again to all ACESD members in case refresher is needed, meeting on 4/16 with flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum
\*July 2021 Internal leadership meeting to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how we survey) were adjusted.
\*August 2021 OSES SPP featured all month of the front page of the SCDE webpage with a description of process/need for stakeholder feedback with links to target videos
\*August 2021 Re-cap of all indicators and current set targets with some stakeholder change presented to ACESD
\*September 2021 – Last push from all TA providers and advocacy groups for additional feedback.
\*September 30, 2021 Videos to collect stakeholder feedback closed.
\*October 22, 2021 Final targets shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope - will focus on just literacy and not add math.
\*November 2, 2021 Meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 Meeting with National TA providers on SPP/APR.
\*December 2021 Internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 Finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

Social Media: The announcements went up on the SCDE Twitter page June 9, 2021 and again on June 16, 2021. The recorded video with captions went on SCDE Facebook page on June 23, 2021. All state-level TA providers and Family Connections sent the announcements and links on their social media.

The announcements with electronic flyers were emailed to community organizations, state agencies, universities/colleges, and LEAs 2-3 weeks prior to June 16th and followed by reminder emails 1 week prior.

April 2021 all SPP videos and feedback surveys were created and posted to the website.

June 16, 2021, the OSES conducted an SPP community forum, held in a panel discussion style. The first panel, the practitioner panel, included Rebeca Davis, OSES Director; Dr. Angie Slatton, an LEA special education director and the SCASA chair of the special education round table; Ferlondo Tullock, a board member of the Calhoun County Department of Disabilities and Special Needs and the Chairperson for the Political Action Committee of the Calhoun County Branch of the National Association for the Advancement of Colored People; and Susan Howard, Director of Special Education and ESOL at the South Carolina Public Charter School District. The second panel, the stakeholder panel, included Dr. Jessica Berry, an educator and the acting department chairperson and assistant professor of speech pathology and audiology at South Carolina State University and author of The Little Gullah Geechee Book: A Guide for the Come Ya; Grace Trumpower, a 21-year-old young adult with Autism and Cerebral Palsy and who is employed as an Equip Leader in Able SC’s Equip Youth Leadership Program; Amy Holbert, a licensed, clinical social worker and the Chief Executive Officer of Family Connection of SC and the chair of the ACESD; Alma Puente-/Ruiz, a School Social Worker, an advocate for the Hispanic community, minority populations, and families facing crises for over 30 years; and Patrina Dease, a teacher in a rural LEA and the lead special education teacher at her school who serves on the Student Intervention Team. The moderator was the Assistant Director of OSES. The panel discussed the importance of the SPP to children and youth with disabilities and their families, each from his/her own unique perspective. The forums were recorded.

August 2021 The SPP was featured all month on the landing page of the SCDE webpage with a description of process and need for stakeholder feedback with links to target videos.

**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 OSES will continue to report to the public using the various methods described above that include, but are not limited to stakeholder meetings (both virtual and face-to-face), facts sheets and other informational text, recorded and live presentations, and discussion at all LEA meetings (including cohort meetings). The upcoming quarterly meeting of the ACESD will include an update on the SPP targets and submission. The first quarterly meeting each year is devoted to a more extensive dive into the most recent SPP/APR and progress toward targets.

**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.**

The OSES reported to the public using all the methods described in the Stakeholder sections above. The links to the current and previous SPP/APRs are featured on the OSES webpage under Data and Technology - State Performance Plan and State Determinations. This page features a link to the State's previous SPP/APRs and Determinations Letters as well as information about the current FY20APR.

## Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

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

Consistent with the determination of Needs Assistance, South Carolina has accessed technical assistance from a variety of sources including OSEP- funded centers during FFY20. The various forms of support have included conference calls, use of materials and fact sheets, on-site and virtual consultation and training, webinars, E-newsletters, video conferencing, modules, and social media.

The NCSI, the National Center for Intensive Intervention (NCII), the IDEA Data Center (IDC), and the Center for IDEA Fiscal Reporting have been the TA centers providing the majority of support for the SPP/APR process, the review and revision of the state’s general supervision system, and the development, review, and revision of fiscal policies, procedures, and practices. NCII continues to assist the state to expand its SSIP and to develop Tier 3 interventions with an ultimate goal of improving reading proficiency and implementation of the SSIP work. South Carolina is participating actively in cohort 2 of the NCII Data-Based Individualization TA. The OSES staff has participated in face-to-face and virtual meetings with NCII staff to support the development of the infrastructure for data-based individualization in schools.

The Pyramid Model Consortium and Pyramid Innovation Center also continued to provide significant support to the OSES in implementing this evidence-based model of social-emotional supports for young children at a state level. This work includes building infrastructure in our state to support early childhood educators and parents in teaching children desired behaviors and reducing unwanted behavior so that preschool suspensions and expulsions can be reduced. The Pyramid Model Consortium has provided guidance in developing and implementing the Pyramid Model in South Carolina.

The majority of technical assistance during the FY20 year has come again from NCSI, IDC, and NASDSE. Both TA centers have been instrumental, not only in continuing support for the review and revision of the state’s system of general supervision, but also in the continued support of the state during the pandemic. Weekly national calls, as well as frequent state-specific calls, provided invaluable support during this year, not only in terms of guidance and practices, but also for moral support. This support enabled OSES staff to pass along the same supports to LEA staff, parents, and students. NASDSE was able to provide state directors a platform through which to share concerns, strategies, and guidance.

South Carolina has used TA from these providers to continue developing goals and strategies within four focus areas to improve outcomes for students with disabilities – EC, ACA, SEL, and PSO. These TA centers have also been instrumental in providing guidance, interpretation, and resources related to the new SPP/APR package.

South Carolina would like to express its heartfelt appreciation to the staff at these TA centers for their hard work and continued support and assistance during this time.

The USED, Office of Special Education and Rehabilitative Services, Office of Special Education Programs (OSEP) continues to provide ongoing guidance with respect to both programmatic and fiscal areas. Over the last year, OSEP staff have been critical in assisting the state. That support has included routine, monthly conference calls with the state liaison; periodic calls with respect to fiscal questions; email correspondence; technical assistance; national conference presentations with South Carolina staff; and presentations of OSEP staff at State events.

## Intro - OSEP Response

The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2021 determination letter informed the State that it must report with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

## Intro - Required Actions

The State's IDEA Part B determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

# 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** |
| --- | --- |
| 2020 | 60.13% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 44.30% | 46.30% | 48.30% | 50.30% | 54.40% |
| Data | 49.02% | 52.06% | 53.54% | 52.10% | 54.4%[[2]](#footnote-3) |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 60.13% | 60.39% | 63.38% | 66.38% | 69.38% | 72.37% |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**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) | 3,249 |
| 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) | 520 |
| 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) | 283 |
| 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) | 1,351 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,249 | 5,403 | 54.4%[[3]](#footnote-4) | 60.13% | 60.13% | N/A | N/A |

**Graduation Conditions**

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

South Carolina uses guidelines for graduation with a diploma, offering only one recognized academic diploma for all students. Graduation with a state–issued regular diploma in South Carolina requires the successful completion of 24 units of study as prescribed by South Carolina Board of Education Regulation and state law.

Below are the South Carolina high school graduation requirements listed by number of credits and the courses:
4.0 English/language arts
4.0 mathematics
3.0 science
1.0 U.S. History and Constitution
0.5 economics
0.5 U.S. Government
1.0 other social studies course(s)
1.0 physical education or Junior ROTC
1.0 computer science
1.0 foreign language or career and technology education
7.0 electives
24.0 TOTAL 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)**

The SCDE issued guidance surrounding both grading and attendance during the last quarter of the 2019-20 school year that significantly impacted Indicators 1, 2, and 4. No students were to be marked absent for that quarter and no student who entered that quarter with a passing grade could be failed for the year. As a result, the graduation rate for all students, including students with disabilities, increased higher than the trend line predicted and the drop-out rate decreased lower than the trend line predicted. As the more traditional routines for grading and attendance have been re-instituted and as revisions are made based on the LEAs’ format for instruction (hybrid and/or all virtual), expectations are that the data may align more closely to the original trend line. The OSES has determined targets will be based on the trend line excluding the 2020 data in order to most appropriately reflect what targets will be reasonable.

The new data source required the resetting of baselines and targets for this Indicator.

## 1 - Prior FFY Required Actions

None

## 1 - 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.

## 1 - Required Actions

# 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[[4]](#footnote-5)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 25.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 4.20% | 4.00% | 3.80% | 3.60% | 3.40% |
| Data | 3.30% | 3.52% | 4.20% | 4.03% | 6.02% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 25.00% | 23.73% | 22.46% | 21.19% | 19.92% | 18.65% |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**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) | 3,249 |
| 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) | 520 |
| 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) | 283 |
| 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) | 1,351 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,351 | 5,403 | 6.02% | 25.00% | 25.00% | N/A | N/A |

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

The State Board of Education defines a dropout as a student who leaves school for any reason, other than death, prior to graduation or completion of a course of studies and without transferring to another school or institution.

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

YES

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

The unduplicated number of students with disabilities, ages 14 through 21, who were in special education at the start of the reporting period and were not in special education at the end of the reporting period.

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

The SCDE issued guidance surrounding both grading and attendance during the last quarter of the 2019-20 school year that significantly impacted Indicators 1, 2, and 4. No students were to be marked absent for that quarter and no student who entered that quarter with a passing grade could be failed for the year. As a result, the graduation rate for all students, including students with disabilities, increased higher than the trend line predicted and the drop-out rate decreased lower than the trend line predicted. As the more traditional routines for grading and attendance have been re-instituted and as revisions are made based on the LEAs’ format for instruction (hybrid and/or all virtual), expectations are that the data may align more closely to the original trend line. The OSES has determined targets will be based on the trend line excluding the 2020 data in order to most appropriately reflect what targets will be reasonable.

The new data source will require the resetting of baseline and targets.

## 2 - Prior FFY Required Actions

None

## 2 - 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.

## 2 - Required Actions

# 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 | 2020 | 89.79% |
| Reading | B | Grade 8 | 2020 | 79.73% |
| Reading | C | Grade HS | 2020 | 82.09% |
| Math | A | Grade 4 | 2020 | 90.12% |
| Math | B | Grade 8 | 2020 | 80.36% |
| Math | C | Grade HS | 2020 | 75.16% |

**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**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
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\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**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\* | 9,680 | 8,652 | 7,029 |
| b. Children with IEPs in regular assessment with no accommodations | 3,752 | 3,031 | 3,957 |
| c. Children with IEPs in regular assessment with accommodations | 4,478 | 3,343 | 1,266 |
| d. Children with IEPs in alternate assessment against alternate standards | 462 | 524 | 547 |

**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\* | 9,677 | 8,656 | 8,504 |
| b. Children with IEPs in regular assessment with no accommodations | 2,919 | 2,631 | 4,431 |
| c. Children with IEPs in regular assessment with accommodations | 5,344 | 3,795 | 1,395 |
| d. Children with IEPs in alternate assessment against alternate standards | 458 | 530 | 566 |

\*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 | 8,692 | 9,680 |  | 95.00% | 89.79% | N/A | N/A |
| **B** | Grade 8 | 6,898 | 8,652 |  | 95.00% | 79.73% | N/A | N/A |
| **C** | Grade HS | 5,770 | 7,029 |  | 95.00% | 82.09% | N/A | 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 | 8,721 | 9,677 |  | 95.00% | 90.12% | N/A | N/A |
| **B** | Grade 8 | 6,956 | 8,656 |  | 95.00% | 80.36% | N/A | N/A |
| **C** | Grade HS | 6,392 | 8,504 |  | 95.00% | 75.16% | N/A | 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.**

https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/#sppAndDet

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

On March 26th, the United States Department of Education (USED) denied the South Carolina Department of Education’s (SCDE) waiver request for suspension of accountability testing in English language arts and mathematics, but granted the SCDE’s request for a waiver for accountability, school identification, and related reporting requirements including the adjustment of the Academic Achievement indicator based on a participation rate below 95 percent. Because of the waiver, many LEAs did not reach 95% for participation.

## 3A - Prior FFY Required Actions

None

## 3A - 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.

## 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 | 2020 | 16.51% |
| Reading | B | Grade 8 | 2020 | 7.14% |
| Reading | C | Grade HS | 2020 | 43.81% |
| Math | A | Grade 4 | 2020 | 16.69% |
| Math | B | Grade 8 | 2020 | 4.98% |
| Math | C | Grade HS | 2020 | 22.57% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 16.51% | 18.71% | 20.91% | 23.11% | 25.31% | 27.51% |
| Reading | B >= | Grade 8 | 7.14% | 9.34% | 11.54% | 13.74% | 15.94% | 18.14% |
| Reading | C >= | Grade HS | 43.81% | 44.81% | 45.81% | 46.81% | 47.81% | 48.81% |
| Math | A >= | Grade 4 | 16.69% | 18.39% | 19.78% | 21.18% | 22.57% | 23.97% |
| Math | B >= | Grade 8 | 4.98% | 6.38% | 7.78% | 9.18% | 10.58% | 11.98% |
| Math | C >= | Grade HS | 22.57% | 24.57% | 26.57% | 28.57% | 30.57% | 32.57% |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
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\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**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 | 8,230 | 6,374 | 5,223 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,069 | 318 | 1,711 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 290 | 137 | 577 |

**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 | 8,263 | 6,426 | 5,826 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 997 | 218 | 976 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 382 | 102 | 339 |

**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 | 1,359 | 8,230 |  | 16.51% | 16.51% | N/A | N/A |
| **B** | Grade 8 | 455 | 6,374 |  | 7.14% | 7.14% | N/A | N/A |
| **C** | Grade HS | 2,288 | 5,223 |  | 43.81% | 43.81% | N/A | 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 | 1,379 | 8,263 |  | 16.69% | 16.69% | N/A | N/A |
| **B** | Grade 8 | 320 | 6,426 |  | 4.98% | 4.98% | N/A | N/A |
| **C** | Grade HS | 1,315 | 5,826 |  | 22.57% | 22.57% | N/A | 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.**

https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/#sppAndDet

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

Due to the approved participation waiver for the state, the data collected in FY20 are not comparable to the most recent data collected in FY18. No statewide assessments were given during FY19 due to the approved waiver for all assessments. Slippage can not be determined as the participation waiver made the FY20 data not comparable to the FY18 data. Additionally for this group of students, the State Board of Education Regulation 43-262 requires statewide EOCEP assessments in Algebra 1, English 1 and 2 to count 20 percent of students’ final grade. The SCDE utilized the authority given under Act 135 to waive the 20 percent requirement for EOCEP assessments taken in the 2020–21 school year (fall 2020, spring 2021, and summer 2021). In the memorandum, Grading for End Of-Course Examination. Districts were provided the authority to determine the percentage, if any, the EOCEP would count toward a student’s grade. In making such decisions, districts were to ensure uniformity within each district such that no subgroups of students protected by state and federal law are treated differently. In addition, the EOCEP test scores within a district should count the same for students regardless of whether the students were tested in the fall, spring, or summer. Each district was able to determine the percentage of the students' grades and this had the potential to impact the students' effort if the LEA chose to make this a small or no percentage.

The state will annually reexamine targets as several consecutive years' of comparable data become available.

## 3B - Prior FFY Required Actions

None

## 3B - 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.

## 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 | 2020 | 53.46% |
| Reading | B | Grade 8 | 2020 | 36.26% |
| Reading | C | Grade HS | 2020 | 47.53% |
| Math | A | Grade 4 | 2020 | 41.70% |
| Math | B | Grade 8 | 2020 | 36.98% |
| Math | C | Grade HS | 2020 | 38.16% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 53.46% | 54.46% | 55.46% | 56.46% | 57.46% | 58.46% |
| Reading | B >= | Grade 8 | 36.26% | 37.26% | 38.26% | 39.26% | 40.26% | 41.26% |
| Reading | C >= | Grade HS | 47.53% | 37.98% | 49.53% | 50.53% | 51.53% | 52.53% |
| Math | A >= | Grade 4 | 41.70% | 42.70% | 43.70% | 44.70% | 45.70% | 46.70% |
| Math | B >= | Grade 8 | 36.98% | 37.98% | 38.98% | 39.98% | 40.98% | 41.98% |
| Math | C >= | Grade HS | 38.16% | 39.16% | 40.16% | 41.16% | 42.16% | 43.16% |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
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\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
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\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
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\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
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\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**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 | 462 | 524 | 547 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 247 | 190 | 260 |

**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 | 458 | 530 | 566 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 191 | 196 | 216 |

**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 | 247 | 462 |  | 53.46% | 53.46% | N/A | N/A |
| **B** | Grade 8 | 190 | 524 |  | 36.26% | 36.26% | N/A | N/A |
| **C** | Grade HS | 260 | 547 |  | 47.53% | 47.53% | N/A | 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 | 191 | 458 |  | 41.70% | 41.70% | N/A | N/A |
| **B** | Grade 8 | 196 | 530 |  | 36.98% | 36.98% | N/A | N/A |
| **C** | Grade HS | 216 | 566 |  | 38.16% | 38.16% | N/A | 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.**

https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/#sppAndDet

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

Due to the approved participation waiver for the state, the data collected in FY20 are not comparable to the most recent data collected in FY18. No statewide assessments were given during FY19 due to the approved waiver for all assessments. The OSES will determine if a reevaluation of targets and baseline is necessary once participation rates return to pre-covid levels. Performance on this sub-indicator was higher than data and trendlines using historical data predicted.

## 3C - Prior FFY Required Actions

None

## 3C - 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.

## 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 | 2020 | 29.53 |
| Reading | B | Grade 8 | 2020 | 34.81 |
| Reading | C | Grade HS | 2020 | 39.68 |
| Math | A | Grade 4 | 2020 | 25.26 |
| Math | B | Grade 8 | 2020 | 25.77 |
| Math | C | Grade HS | 2020 | 26.68 |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 29.53 | 28.53  | 27.53 | 26.53 | 25.53 | 24.53 |
| Reading | B <= | Grade 8 | 34.81 | 33.81 | 32.81 | 31.81 | 30.81 | 29.81 |
| Reading | C <= | Grade HS | 39.68 | 37.68 | 35.68 | 33.68 | 31.68 | 29.68 |
| Math | A <= | Grade 4 | 25.26 | 24.26 | 23.26 | 22.26 | 21.26 | 20.26 |
| Math | B <= | Grade 8 | 25.77 | 24.77 | 23.77 | 22.77 | 21.77 | 20.77 |
| Math | C <= | Grade HS | 26.68 | 25.68 | 24.68 | 23.68 | 22.68 | 21.68 |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
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**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 | 51,065 | 50,360 | 49,183 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,230 | 6,374 | 5,223 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 22,942 | 20,831 | 40,244 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 572 | 293 | 818 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,069 | 318 | 1,711 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 290 | 137 | 577 |

**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 | 51,123 | 50,479 | 36,035 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,263 | 6,426 | 5,826 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 20,694 | 15,289 | 17,248 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 751 | 232 | 501 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 997 | 218 | 976 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 382 | 102 | 339 |

**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 | 16.51% | 46.05% |  | 29.53 | 29.53 | N/A | N/A |
| **B** | Grade 8 | 7.14% | 41.95% |  | 34.81 | 34.81 | N/A | N/A |
| **C** | Grade HS | 43.81% | 83.49% |  | 39.68 | 39.68 | N/A | 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 | 16.69% | 41.95% |  | 25.26 | 25.26 | N/A | N/A |
| **B** | Grade 8 | 4.98% | 30.75% |  | 25.77 | 25.77 | N/A | N/A |
| **C** | Grade HS | 22.57% | 49.25% |  | 26.68 | 26.68 | N/A | N/A |

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

Due to the approved participation waiver for the state, the data collected in FY20 are not comparable to the most recent data collected in FY18. No statewide assessments were given during FY19 due to the approved waiver for all assessments. Slippage cannot be determined as the participation waiver made the FY20 data not comparable to the FY18 data. The state will annually reexamine targets as several consecutive years' of comparable data become available.

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

The State established baseline for this indicator, using data from FFY 2020, and OSEP accepts the baseline.

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

## 3D - Required Actions

# 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** |
| --- | --- |
| 2009 | 5.86% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 4.54% | 4.54% | 4.54% | 3.40% | 3.40% |
| Data | 9.09% | 9.09% | 0.00% | NVR | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 3.57% | 3.47% | 3.37% | 3.27% | 3.17% | 3.07% |

**Targets: Description of Stakeholder Input**

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**FFY 2020 SPP/APR Data**

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

NO

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs in the State** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 8 | 86 | 0.00% | 3.57% | 9.30% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

As described below, the OSES instituted a much more rigorous review/monitoring process for the review of LEA-level policies, procedures, and practices. The two-part review now includes a review of LEA-level policies and practices to ensure all required elements are addressed with a greater focus on practices than in previous monitoring. The first part includes a review of policies and procedures through a self assessment. The second part includes a review of records to ensure practices are appropriate. Once this two-part self-assessment has been completed and submitted to the OSES, staff at the agency use the same rubrics for review to provide a reliability check. This more rigorous process led to closer scrutiny of policies, procedures, and practices in the area of discipline. This scrutiny aligns with the OSES’ focus on improving SEL outcomes for students with disabilities and led to the issuance of written findings of noncompliance. The OSES has also noted the variation in data from year to year for this Indicator and will assist LEAs in looking more closely at the root causes for the inconsistent trend so as to develop improvement plans designed to ensure that 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.

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

Compare the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State

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

There is no minimum n–size or cell–size requirement.

Methodology: The Office of Special Education Services (OSES), identifies districts with significant discrepancies in the rates of long-term suspensions and expulsions through the following steps: Using data collected from Table 5 –Report of Children with Disabilities subject to Disciplinary Removals and Table 1 – Child Count (both from previous year), the OSES employs a rate ratio comparing the rate of students with IEPs in district x for receiving out-of-school suspensions totaling more than ten days to the rate of all students with IEPS in all districts.

Formula Summary: {(Total students with IEPs in LEA with OSS days greater than 10) / (Total students with IEPs in LEA’s Child Count)} /{ (Total students with IEPs in State with OSS greater than 10 days) / (Total students with IEPs in State’s child count)}

For the purposes of Indicator 4A, South Carolina defines significant discrepancy as any LEA that meets the following criteria: rate ratio exceeding 2.50, without respect to subgroup or group size, in the out-of-school suspension/expulsions of students with IEPs (comparing one LEA to all other LEAs in the state).

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

As mentioned in the introduction, the initial impact of the onset of COVID affected this Indicator since lag data are used and alternative attendance criteria were used the last quarter of the reporting year.

**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.**

The OSES developed a new, more rigorous review process for significant discrepancy. The monitoring process is a two-part focused review and includes a self-assessment conducted by LEA personnel and includes an examination of practices in impacted student files, conducted in conjunction with an OSES representative. The LEAs meeting the trigger (rate ratio greater than 2.50) completed this self-assessment to determine if the trigger was met as a result of noncompliance in the development and implementation of IEPs and/or the use of positive behavioral supports and procedural safeguards. If noncompliance was found, corrective actions were imposed on the LEA.

For Fall 2021, Parts 1A and 1B (Procedures and Records Reviews) were mandatory for all districts found to have significant discrepancy in Indicator 4. Part 1 of the self-assessment is designed to determine if the LEA is in compliance with the following regulatory provisions of the IDEA:
1. Evaluation procedures (34 C.F.R. § 300.304)
2. Development, review, and revision of IEP (34 C.F.R § 300.324)
3. Responsibility of SEA and other public agencies (34 C.F.R § on 300.500)
4. Opportunity to examine records, parent participation in meetings (34 C.F.R § 300.501)
5. Authority of school personnel (34 C.F.R § 300.530)
6. Determination of setting (34 C.F.R § 300.531)

When reviewing policies, procedures, and practices, the LEA convened a team of stakeholders to complete the review. Appropriate stakeholders included general and special education teachers, building principals, curriculum and instruction representative, school psychologist, student support services representative, and school improvement representative.

Part 1A: Compliance Review: The Compliance Review process (Part 1A and 1B) includes two parts: Part 1A is the review of written policies and procedures related to Evaluation procedures; Development, review, and revision of IEP; Responsibility of SEA and other public agencies; Opportunity to examine records, parent participation in meetings; Authority of school personnel; and Determination of setting regulations under the IDEA. The LEA reviewed its existing policies and indicated whether its written policies and procedures address each specific regulatory requirement. The LEA had to explain any requirement that is not reflected in its policies.

Part 1B included the records review for a sample of appropriate student files during the impacted school year (July 1, 2019 – June 30, 2020). Student files were selected based on data analysis factors including the identified school(s) with the highest percentage of discipline removals, placements in interim alternative education settings, failing grades in core subjects, and categories of Emotional Disability and Other Health Impairment.

Potential sources of documentation for review included, but were not limited to, Meeting Notices, Prior Written Notices, discipline records, Manifestation Determination Reviews, Functional Behavior Assessments, Behavior Intervention Plans, progress reports, services logs, and teacher observations and interviews, attendance records, and IEPs.

Upon completion of both reviews, the LEAs submitted their written policies and procedures, the applicable student records, the completed Self-Assessment, and all Results to the OSES for an interrater reliability check. OSES staff knowledgeable in these areas reviewed the LEA’s results. Any inconsistencies were discussed and resolved in a meeting with LEA staff, SEL focus group members, and the cohort manager.

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

**If YES, select one of the following:**

The State did NOT ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**The State must report on the correction of noncompliance in next year's SPP/APR consistent with requirements in the Measurement Table and OSEP Memorandum 09-02, dated October 17, 2008. Please explain why the State did not ensure that policies, procedures, and practices were revised to comply with applicable requirements*.***

Upon completion of both the compliance and records reviews, the LEAs submitted their written policies and procedures, the applicable student records, the completed Self-Assessment, and all results to the OSES for an interrater reliability check. OSES staff knowledgeable in these areas reviewed the LEA’s results. Any inconsistencies were discussed and resolved in a meeting with LEA staff, SEL focus group members, and the cohort manager. Two of the LEAs' reviews of policies, procedures, and practices revealed no noncompliance. Six of the LEAs were issued findings of noncompliance related to policies, procedures, and/or practices. The LEAs have been notified in writing of the findings of noncompliance and are still within their one year of correction. The corrections will be verified and reported on in the FY21 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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

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

## 4A - Required Actions

The State must report, in the FFY 2021 SPP/APR, on the correction of noncompliance that the State identified in FFY 2020 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (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 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.

# 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** |
| --- | --- |
| 2009 | 2.30% |

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

2

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 23 | 12 | 84 | 0.00% | 0% | 14.29% | Did not meet target | Slippage |

**Provide reasons for slippage, if not applicable**

As described below, the OSES instituted a much more rigorous review/monitoring process for the review of LEA-level policies, procedures, and practices. The two-part review now includes a review of LEA-level policies and practices to ensure all required elements are addressed. The second part includes a review of records to ensure practices are appropriate. Once this two-part self-assessment has been completed and submitted to the OSES, staff at the agency use the same rubrics for review to provide a reliability check. This more rigorous process led to closer scrutiny of policies, procedures, and practices in the area of discipline. This scrutiny aligns with the OSES’ focus on improving SEL outcomes for students with disabilities and led to the issuance of written findings of noncompliance. The OSES has also noted the variation in data from year to year for this Indicator and will assist LEAs in looking more closely at the root causes for the inconsistent trend so as to develop improvement plans designed to ensure that 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.

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

YES

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

A rate ratio exceeding 2.50 in the out-of-school suspensions/expulsions (OSS) greater than 10 days of students with IEPs, by each race/ethnicity. Rate ratios provide a comparison of districts’ rates of suspensions/expulsions for students with IEPs to the state’s rate of suspensions/expulsions for students with IEPs. Rate ratios are only calculated when the number of children with IEPs within a racial/ethnic group is greater than or equal to 10 (i.e., minimum n–size = 10). Methodology: The Office of Special Education Services (OSES) identifies districts with significant discrepancies in the rates of Out of School Suspensions and expulsions (OSS) through the following steps: Using data collected from Table 5 –Report of Children with Disabilities subject to Disciplinary Removals and Table 1 – Child Count (both from previous year), the OSES employs a rate ratio comparing the rate of students of racial/ethnic group y in district x for receiving out-of-school totaling more than ten days to the rate of all students with IEPs in all districts within the state. This is done for each of the seven required racial/ethnic groups.

{(Total students with IEPs in racial/ethnic group in LEA with OSS days greater than 10) / (Total students with IEPs in racial/ethnic group in LEA’s Child Count)} /{ (Total students with IEPs in State with OSS greater than 10 days) / (Total students with IEPs in State’s child count)} For each LEA, rate ratios are calculated for each of the seven required reporting race ethnicities including: • American Indian or Alaska Native • Asian • Black or African American • Hispanic/Latino • Native Hawaiian or Other Pacific Islander • Two or more races • White

Significant discrepancy exists when any of the seven race/ethnicity rate ratios exceeds 2.50. Rate ratios are only calculated when the number of students with IEPs in a racial/ethnic group in an LEA is greater than or equal to 10.

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

As mentioned in the introduction, the initial impact of the onset of COVID affected this Indicator since lag data are used. Alternative attendance standards were used for the fourth quarter of that year.

**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.**

The OSES developed a new, more rigorous review process for significant discrepancy. The monitoring process is a two-part focused review and includes a self-assessment conducted by LEA personnel and may include an examination of practices conducted in conjunction with an OSES representative. The LEAs meeting the trigger completed this self-assessment to determine if the trigger was met as a result of noncompliance in the development and implementation of IEPs and/or the use of positive behavioral supports and procedural safeguards. If noncompliance was found, corrective actions were imposed on the LEA.

For Fall 2021, Parts 1A and 1B (Procedures and Records Reviews) were mandatory for all districts found to have significant discrepancy in Indicator 4. Part 1 of the self-assessment is designed to determine if the LEA is in compliance with the following regulatory provisions of the IDEA:
1. Evaluation procedures (34 C.F.R. § 300.304)
2. Development, review, and revision of IEP (34 C.F.R § 300.324)
3. Responsibility of SEA and other public agencies (34 C.F.R § on 300.500)
4. Opportunity to examine records, parent participation in meetings (34 C.F.R § 300.501)
5. Authority of school personnel (34 C.F.R § 300.530)
6. Determination of setting (34 C.F.R § 300.531)
When reviewing policies, procedures, and practices, the LEA convened a team of stakeholders to complete the review. Appropriate stakeholders included general and special education teachers, building principals, curriculum and instruction representative, school psychologist, student support services representative, and school improvement representative.

Part 1A: Compliance Review: The Compliance Review process (Part 1A and 1B) includes two parts: Part 1A is the review of written policies and procedures related to Evaluation procedures; Development, review, and revision of IEP; Responsibility of SEA and other public agencies; Opportunity to examine records, parent participation in meetings; Authority of school personnel; and Determination of setting regulations under the IDEA. The LEA reviewed its existing policies and indicated whether its written policies and procedures address each specific regulatory requirement. The LEA had to explain any requirement that is not reflected in its policies.

Part 1B included the records review for a sample of appropriate student files during the impacted school year (July 1, 2019 – June 30, 2020). Student files were selected based on data analysis factors including the identified school(s) with the highest percentage of discipline removals, placements in interim alternative education settings, failing grades in core subjects, and the impacted disability categories.

Potential sources of documentation for review included, but were not limited to, Meeting Notices, Prior Written Notices, discipline records, Manifestation Determination Reviews, Functional Behavior Assessments, Behavior Intervention Plans, progress reports, services logs, and teacher observations and interviews, attendance records, and IEPs.

Upon completion of both reviews, the LEAs submitted their written policies and procedures, the applicable student records, the completed Self-Assessment, and all Results to the OSES for an interrater reliability check. OSES staff knowledgeable in these areas reviewed the LEA’s results. Any inconsistencies were discussed and resolved in a meeting with LEA staff, SEL focus group members, and the cohort manager.

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

**If YES, select one of the following:**

The State did NOT ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**The State must report on the correction of noncompliance in next year's SPP/APR consistent with requirements in the Measurement Table and OSEP Memorandum 09-02, dated October 17, 2008. Please explain why the State did not ensure that policies, procedures, and practices were revised to comply with applicable requirements*.***

Upon completion of both the compliance and records reviews, the LEAs submitted their written policies and procedures, the applicable student records, the completed Self-Assessment, and all results to the OSES for an interrater reliability check. OSES staff knowledgeable in these areas reviewed the LEA’s results. Any inconsistencies were discussed and resolved in a meeting with LEA staff, SEL focus group members, and the cohort manager. The LEAs were issued findings of noncompliance related to policies, procedures, and/or practices. The LEAs have been notified in writing of the findings of noncompliance and are still within their one year of correction. The corrections will be verified and reported on in the FY21 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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

## 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 >= | 57.00% | 57.00% | 58.00% | 59.00% | 63.00% |
| A | 63.96% | Data | 60.71% | 61.61% | 62.17% | 62.16% | 62.46% |
| B | 2020 | Target <= | 18.18% | 18.18% | 17.88% | 17.88% | 15.50% |
| B | 15.34% | Data | 16.31% | 15.84% | 15.39% | 15.15% | 15.05% |
| C | 2020 | Target <= | 2.00% | 2.00% | 1.70% | 1.70% | 1.70% |
| C | 1.19% | Data | 1.71% | 1.56% | 1.46% | 1.49% | 1.49% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 63.96% | 63.61% | 64.18% | 64.75% | 65.33% | 65.90% |
| Target B <= | 15.34% | 14.39% | 14.06% | 13.73% | 13.39% | 13.06% |
| Target C <= | 1.19% | 1.18% | 1.17% | 1.16% | 1.15% | 1.14% |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**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 | 101,365 |
| 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 | 64,837 |
| 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 | 15,545 |
| 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 | 455 |
| 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 | 193 |
| 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 | 559 |

**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 | 64,837 | 101,365 | 62.46% | 63.96% | 63.96% | 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 | 15,545 | 101,365 | 15.05% | 15.34% | 15.34% | 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] | 1,207 | 101,365 | 1.49% | 1.19% | 1.19% | N/A | N/A |

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

This is the first year that states were required to report 5-year-olds in Kindergarten with the school-age population; therefore, baselines and targets were reset using stakeholder input.

## 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 >= | 48.88% | 48.90% | 48.90% | 49.00% | 48.90% |
| **A** | Data | 50.73% | 49.71% | 48.88% | 50.00% | 50.69% |
| **B** | Target <= | 24.50% | 24.00% | 23.50% | 23.00% | 22.50% |
| **B** | Data | 25.72% | 25.29% | 23.67% | 22.73% | 22.79% |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
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\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**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.**

Individual Targets

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

Target Range not used

**Baselines for Individual Targets option (A, B, C)**

| **Part** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- |
| **A1, age 3** | 2020 | 17.28% |
| **A2, age 4** | 2020 | 40.90% |
| **A3, age 5** | 2020 | 47.15% |
| **B1, age 3** | 2020 | 41.68% |
| **B2, age 4** | 2020 | 27.64% |
| **B3, age 5** | 2020 | 20.30% |
| **C1, age 3** | 2020 | 4.54% |
| **C2, age 4** | 2020 | 2.96% |
| **C3, age 5** | 2020 | 3.02% |

**Individual Targets – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1, age 3 >= | 17.28% | 17.68% | 18.08% | 18.48% | 18.88% | 19.28% |
| Target B1, age 3 <= | 41.68% | 41.48% | 41.28% | 41.08% | 40.88% | 40.68% |
| Target A2, age 4 >=  | 40.90% | 41.30% | 41.70% | 42.10% | 42.50% | 42.90% |
| Target B2, age 4 <= | 27.64% | 27.44% | 27.24% | 27.04% | 26.84% | 26.64% |
| Target A3, age 5 >=  | 47.15% | 52.00% | 54.00% | 56.00% | 58.00% | 60.00% |
| Target B3, age 5 <=  | 20.30% | 20.10% | 19.90% | 19.70% | 19.50% | 19.30% |

**Individual Targets – 6C**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C1, age 3 <= | 4.54% | 4.53% | 4.52% | 4.51% | 4.50% | 4.49% |
| Target C2, age 4 <= | 2.96% | 2.95% | 2.94% | 2.93% | 2.92% | 2.91% |
| Target C3, age 5 <= | 3.02% | 3.01% | 3.00% | 2.99% | 2.98% | 2.97% |

**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 | 1,586 | 2,768 | 596 | 4,950 |
| 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 | 274 | 1,132 | 281 | 1,687 |
| b1. Number of children attending separate special education class | 625 | 725 | 111 | 1,461 |
| b2. Number of children attending separate school | 36 | 40 | 10 | 86 |
| b3. Number of children attending residential facility | 0 | 0 | 0 | 0 |
| c1**.** Numberof children receiving special education and related services in the home | 72 | 82 | 18 | 172 |

**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 for Age 3**

| **Preschool Environments** | **Number of children with IEPs aged 3 served** | **Total number of children with IEPs aged 3** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 274 | 1,586 |  | 17.28% | 17.28% | N/A | N/A |
| B1. Separate special education class, separate school or residential facility | 661 | 1,586 |  | 41.68% | 41.68% | N/A | N/A |
| C1. Home | 72 | 1,586 |  | 4.54% | 4.54% | N/A | N/A |

**FFY 2020 SPP/APR Data for Age 4**

| **Preschool Environments** | **Number of children with IEPs aged 4 served** | **Total number of children with IEPs aged 4** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A2. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 1,132 | 2,768 |  | 40.90% | 40.90% | N/A | N/A |
| B2. Separate special education class, separate school or residential facility | 765 | 2,768 |  | 27.64% | 27.64% | N/A | N/A |
| C2. Home | 82 | 2,768 |  | 2.96% | 2.96% | N/A | N/A |

**FFY 2020 SPP/APR Data for Age 5**

| **Preschool Environments** | **Number of children with IEPs aged 5 served** | **Total number of children with IEPs aged 5** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A3. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 281 | 596 |  | 47.15% | 47.15% | N/A | N/A |
| B3. Separate special education class, separate school or residential facility | 121 | 596 |  | 20.30% | 20.30% | N/A | N/A |
| C3. Home | 18 | 596 |  | 3.02% | 3.02% | N/A | N/A |

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

This is the first year that states were required to remove 5-year-olds in Kindergarten from the early childhood population. Additionally, stakeholders wanted to begin reporting by age instead of in the aggregate. This year's data can not be compared to previous years for these reasons. New baselines and targets were set for all ages based on stakeholder feedback.

As mentioned in Indicator 7, COVID continued to affect LEAs during the 2020-21 school year. Intermittent whole school closures, individual classroom closures, student quarantine, and staffing difficulties due to quarantine were still very prevalent during the school year. Additionally, many parents were still hesitant to allow others into their homes or to send their young children to school. LEAs continued to work to establish alternative means of communication with families other than the traditional “at school” and “face-to-face". Staff made contact with families by telephone, email, and virtually.

## 6 - Prior FFY Required Actions

None

## 6 - 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.

## 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 | 2020 | Target >= | 88.45% | 88.46% | 88.46% | 88.47% | 88.47% |
| A1 | 84.21% | Data | 89.09% | 89.44% | 88.37% | 86.60% | 85.40% |
| A2 | 2020 | Target >= | 66.16% | 66.17% | 66.17% | 66.18% | 66.18% |
| A2 | 56.00% | Data | 64.44% | 64.16% | 62.57% | 60.74% | 58.33% |
| B1 | 2020 | Target >= | 86.13% | 86.14% | 86.14% | 86.15% | 86.15% |
| B1 | 82.21% | Data | 87.84% | 87.56% | 86.67% | 84.21% | 84.14% |
| B2 | 2020 | Target >= | 63.25% | 63.26% | 63.26% | 63.27% | 63.27% |
| B2 | 54.08% | Data | 63.44% | 61.42% | 58.85% | 58.45% | 55.79% |
| C1 | 2020 | Target >= | 89.25% | 89.26% | 89.26% | 89.27% | 89.27% |
| C1 | 83.90% | Data | 90.43% | 91.20% | 88.90% | 87.54% | 87.05% |
| C2 | 2020 | Target >= | 77.21% | 77.22% | 77.22% | 77.23% | 77.23% |
| C2 | 68.43% | Data | 77.76% | 77.56% | 75.67% | 74.25% | 73.05% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 84.21% | 86.45% | 86.98% | 87.50% | 88.03% | 88.55% |
| Target A2 >= | 56.00% | 59.48% | 60.05% | 60.62% | 61.20% | 61.77% |
| Target B1 >= | 82.21% | 85.35% | 85.95% | 86.56% | 87.16% | 87.77% |
| Target B2 >= | 54.08% | 57.40% | 58.20% | 59.00% | 59.81% | 60.61% |
| Target C1 >= | 83.90% | 88.44% | 89.14% | 89.84% | 90.53% | 91.23% |
| Target C2 >= | 68.43% | 74.08% | 74.60% | 75.12% | 75.64% | 76.15% |

**Targets: Description of Stakeholder Input**

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\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**FFY 2020 SPP/APR Data**

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

6,059

**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 | 49 | 0.81% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 760 | 12.54% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,857 | 30.65% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,459 | 40.58% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 934 | 15.42% |

| **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)* | 4,316 | 5,125 | 85.40% | 84.21% | 84.21% | N/A | N/A |
| 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)* | 3,393 | 6,059 | 58.33% | 56.00% | 56.00% | N/A | N/A |

**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 | 1.01% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 813 | 13.42% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,908 | 31.49% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,130 | 35.15% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,147 | 18.93% |

| **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)* | 4,038 | 4,912 | 84.14% | 82.21% | 82.21% | N/A | N/A |
| 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)* | 3,277 | 6,059 | 55.79% | 54.08% | 54.08% | N/A | N/A |

**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 | 46 | 0.76% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 631 | 10.41% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,236 | 20.40% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,291 | 37.81% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,855 | 30.62% |

| **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)*  | 3,527 | 4,204 | 87.05% | 83.90% | 83.90% | N/A | N/A |
| 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)* | 4,146 | 6,059 | 73.05% | 68.43% | 68.43% | N/A | N/A |

**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.**

South Carolina uses a statewide, special education case management and reporting system, called Frontline Enrich Central. In this online platform, the Child Outcomes Summary form is completed for applicable preschoolers, and data are collected at the district and state levels. The data are then analyzed by the Early Childhood Outcomes focus group in the OSES to determine areas in which LEAs may need additional guidance and support. The Early Childhood Outcomes team then gathers or creates the necessary supports and provides guidance and training to those LEAs in need. Current supports that have been created based on data analysis include COS guidance documents, COS training, and individualized LEA support provided by the Early Childhood Outcome team and the Data team.

The OSES has robust procedures for collecting, verifying, and analyzing the Indicator 7 data. The instruments used to collect COS information for the Child Outcomes Summary Form include professional expertise on developmental and age-appropriate milestones, family expertise, and results from South Carolina State Board of Education-approved assessments which include Phonological Awareness Literacy Screening (PALS Pre-K™), Individual Growth and Development Indicators (myIGDIs™), and Teaching Strategies® GOLD™.

An entry COS is submitted for all applicable preschoolers for data entry within 15 business days of the eligibility determination. If a preschooler transfers in from out of state, the entry COS data provided by the previous district is inputted into Frontline Enrich Central. If COS data is not provided by the previous district, the receiving district completes an entry COS and enters it into the system. An exit COS is required and inputted into the Frontline Enrich Central system if the preschooler exits Part B services because he/she is no longer eligible, moves out of district or moves out of state, is deceased, reaches the maximum age for Part B (6th Birthday), before the preschooler enters Kindergarten, and if the preschooler has been provided services for 6 consecutive months prior to entering kindergarten.

This is required of all LEAs. Data are submitted into Enrich from July 1 to mid-June with optional Pre-Checks occurring the third Friday in November, February, and April. All final entry and exit scores are entered into Enrich by the third Friday each June.

A description of the reporting processes and procedures, training materials, and other resources are available online at https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/data-collection-and-reporting/data-collection-instructions/indicator-7-child-outcomes-summary-form-cosf/.

It must be noted that the data collection and verification for this Indicator have continued to be affected by the COVID pandemic. The continued closure of the physical school buildings and student and staff quarantines impacted not only the delivery of instructional services and supports, but also LEAs’ ability to collect valid and reliable data comparing children with and without disabilities. The lack of data regarding the pandemic’s impact on all children in this age range makes the data reported questionable. It will, therefore, be difficult to draw any accurate conclusions from these data.

Per stakeholder feedback on this Indicator, OSES reviewed all data and reset baselines and targets using historic data points to set more rigorous, yet reasonable targets.

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

COVID continued to affect LEAs during the 2020-21 school year. Intermittent whole school closures, individual classroom closures, student quarantine, and staffing difficulties due to quarantine were still very prevalent during the school year. Additionally, many parents were still hesitant to allow others into their homes or to send their young children to school. LEAs continued to work to establish alternative means of communication with families other than the traditional “at school” and “face-to-face". Staff made contact with families by telephone, email, and virtually.

Based on stakeholder feedback on this indicator, the OSES reviewed all data and reset baselines and targets using historic data points to set more rigorous, yet reasonable, targets.

## 7 - Prior FFY Required Actions

None

## 7 - 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.

## 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**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
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**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 84.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 84.50% | 84.50% | 85.00% | 85.00% | 85.50% |
| Data | 86.67% | 84.92% | 93.49% | 97.46% | 89.62% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 85.50% | 86.00% | 86.00% | 86.50% | 86.50% | 87.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,235 | 1,353 | 89.62% | 85.50% | 91.28% | Met target | No Slippage |

**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 OSES annually surveys parents of students with IEPs, based upon an approved sampling plan. Surveys are sent to all parents within the specified, sampled school districts, which include parents of students with disabilities ages three through five years of age. To accomplish this, the OSES extracts a base file that contains names and addresses of parents for all children during the reporting year. As such, parents of preschool students with disabilities were included in the same method as were children ages six to twenty-one.

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

20,888

**Percentage of respondent parents**

6.48%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 11.58% | 6.48% |

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

For the FY21 APR, the OSES is going to survey all parents of students with disabilities. A sampling plan will no longer be used. The survey will become part of each student's annual review, thus ensuring that parents of all students, ages 3-21, have an opportunity to provide input into whether or not schools facilitated their involvement as a means of improving services and results for their child(ren). The survey itself will be modified as well to focus on a smaller number of questions that are directly relevant to obtaining this information. Parents will be offered the opportunity to complete the survey following the completion of the annual review meeting using a QR code on their smartphone, accessing the survey through a school computer or laptop, or taking the notification letter containing the QR code home to complete at a later date. OSES staff will follow up with an email reminder with any parent who has not completed the survey within 2 weeks of the meeting.

**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.**

Assessing potential nonresponse bias included comparing estimates from the survey respondents (using nonresponse-adjusted weights) with estimates from http://www.raosoft.com/samplesize.html with a +/-9% discrepancy.
No nonresponse bias was identified. Additional information about the analysis may be found at https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/#sppAndDet

**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.**

As shown in the data, there was an overrepresentation of respondents who identified as African American and underrepresentation of respondents who identified as White. To determine whether or not the data represent the demographics of the parents responding are representative of the demographics of children receiving special education services State, the OSES calculated the response rates along four demographic variables:
1. Age of students (based on the child's age as of the state's Child Count);
2. Gender of students;
3. Race or ethnicity (using the federal reporting categories); and
4. Primary disability category.

Next, the State compared the response rates, by demographics, to the State's Child Count for the reporting year (i.e., FY20). The state then compared these rates to one another. The state then reviewed the difference between the percentages of the demographic variables of the respondents. The threshold used by the state to determine representativeness was a 10 percent difference. All race/ethnicities were within representative limits other than African-American (over-represented) and white (under-represented). The link to the analysis may be found at https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/#sppAndDet

**The demographics of the parents responding are representative of the demographics of children receiving special education services. (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).**

+/- 9% discrepancy in the proportion of responders compared to target group

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

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

As per the State's approved sampling methodology (see FY13 APR for a copy of the plan), the LEAs surveyed for the FY20 Indicator 8 were representative of the state. Of the 20,888 surveys distributed, 3246 were returned, fully completed. In order to determine what response rate would be sufficient to yield valid, reliable results, the state determined what sample size would be needed. Generally accepted statistical practices, using a standard 5 percent margin of error, a 95 percent confidence level, and a 0.50 response distribution (the highest possible), 379 returned, completed surveys would allow valid inferences to be drawn from a sample of respondents. With 3246 returned, completed surveys, the state is able to make valid inferences.

For the sampling plan OSES used:
\*a two-stage sampling plan, focusing on a representative mix of LEAs each year and then a representative mix of students within the LEA mix;
\*based on classifying each LEA into a cell based on size and region of the state. The specific combination of LEAs selected each year reflects a random mix of LEAs from each of these cells. These parameters ensure that all regions of the state and all sizes of LEA are represented each year; and
\*Includes all LEAs in the sample mix at least once over the six-year measurement period.

| **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)**

South Carolina is establishing a new baseline due to the inclusion of all parents of students aged 3-21 in the survey rather than continuing the use of a sampling plan. The state hopes that by surveying all parents in a survey tied to a student's annual review, more parents will have an opportunity for annual input, thereby increasing the response rate.

## 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**

## 8 - 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.

## 8 - Required Actions

# 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** |
| --- | --- |
| 2005 | 0.00% |

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

2

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 4 | 0 | 84 | 0.00% | 0% | 0.00% | Met target | No Slippage |

**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).**

The OSES uses data collected on Table 1 (Child Count) of Information Collection 1820-0043 (Report of Children with Disabilities Receiving Special Education under Part B of the IDEA, as amended) and EDFacts FS002 for all children with disabilities, ages 5 in kindergarten through 21, served under IDEA for calculations on this indicator. These data are collected annually as part of the October (fourth Tuesday) Child Count reporting.
Disproportionate Representation Methodology
South Carolina used a multitier process to determine the presence of disproportionate representation in special education and related services due to inappropriate identification. The first step was calculation of risk ratios using data submitted by LEAs in the OSEP 618 data tables. Using the electronic spreadsheet developed by Westat, South Carolina calculated the risk ratios for each LEA with regards to its composition of students in special education along the seven federally reported race/ethnic categories. This risk ratio directly compares the relative size of two risks by dividing the risk for a specific racial/ethnic group by the risk for a comparison group. This determined the specific race/ethnic group’s risk of being identified as having a disability as compared to the risk for all other students. A risk ratio above the state established criteria initiated the following process to determine whether the disproportionate representation was due to inappropriate identification. LEAs are determined to have disproportionate representation if they exceed the risk ratio trigger.
Based upon feedback from a stakeholder, the OSES redefined the trigger to use a risk ratio of greater than 2.50 for overrepresentation. The data used by the state are only data from one reporting year (FY20).
South Carolina collected data for all LEAs for the 2020-21 reporting year. South Carolina determined that a disability subgroup size (n-size) of less than 30 and a cell size of less than 10 would not yield valid disproportionate ratios. As such, two LEAs were excluded from consideration for disproportionate representation.
Disproportionate Representation Definition: South Carolina defines disproportionate representation as occurring when an LEA has the following: a risk ratio greater than 2.50 for overrepresentation, with an n-size greater than 30 and a cell size greater than 10.

**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.**

Any LEAs that are determined to have disproportionate representation followed the following process to determine whether the disproportionate presentation is due to inappropriate identification: using and completing an established rubric to examine LEA policies, procedures, and practices involved in the referral, evaluation, and identification of students with disabilities; completing individual folder reviews for a subset of student records from identified students with disabilities to examine the practices involved in the evaluation and identification of students with disabilities as required by 34 CFR §300.111, §300.201 and 300.301 through §300.311; and submitting a summary of findings and evidence to the OSES for verification.

LEAs determined to have disproportionate representation had to undergo a guided self-assessment process with assistance from a team in the OSES. The self-assessment monitoring process is a focused review of an LEA’s policies, procedures, and practices. The process guided the LEA in its examination of the procedures used to identify children as students with disabilities. The LEA’s decision-making process and practices were examined to determine to what extent, if any, they contributed to the disproportionate representation of students in disability categories. The LEA’s evaluation practices were reviewed to determine if students of the identified racial and ethnic groups had received appropriate evaluations. The evaluations must have included a variety of assessment tools and strategies to gather relevant functional, developmental and academic information about the student that may assist in determining the student’s specific classification and the content of the student’s individualized education program (IEP), including information related to enabling the student to access and progress in the general education curriculum. This protocol was developed to guide the LEAs through the process of examining policies, procedures, and practices related to the identification of students with disabilities, collecting data and evidence to support determinations, and evaluating the effectiveness of these practices. The same folders reviewed for the use of eligibility criteria were also reviewed for the use of the evaluation process. The LEAs gathered available evidence that pertained to each regulatory requirement, evaluated the evidence, and determined whether the evidence supported compliance or noncompliance.

For FY20, no LEAs were found to have exceeded the permissible risk for disproportionate over-representation; therefore, no further actions were required by LEAs in this area.

**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** |
| --- | --- | --- | --- |
| 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 2005, but OSEP cannot accept that revision because of revisions to the Measurement Table. Specifically, with the FFY 2020 APR submission, 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.

## 9 - Required Actions

In the State's FFY 2021 SPP/APR, the State must revise its baseline to include all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA.

# 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** |
| --- | --- |
| 2005 | 7.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 1.16% | 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.**

3

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 38 | 4 | 83 | 0.00% | 0% | 4.82% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

The OSES instituted a much more rigorous review/monitoring process for the review of LEA-level policies, procedures, and practices. The two-part review now includes a review of LEA-level policies and practices to ensure all required elements are addressed. The second part includes a review of records to ensure practices are appropriate. Once this two-part self-assessment has been completed and submitted to the OSES, staff at the agency use the same rubrics for review to provide a reliability check. This more rigorous process led to closer scrutiny of policies, procedures, and practices in the areas of evaluation and identification. This led to the issuance of written findings of noncompliance in following the LEA's policies and procedures.

**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).**

Disproportionate Representation Definition: South Carolina defines disproportionate representation as occurring when an LEA has the following: a risk ratio greater than 2.50 for overrepresentation, with an n-size greater than 30 and cell size greater than 10.
The OSES uses data collected on Table 1 (Child Count) of Information Collection 1820-0043 (Report of Children with Disabilities Receiving Special Education under Part B of the IDEA, as amended) and EDFacts FS002 for all children with disabilities, ages 5 in kindergarten through 21, served under IDEA for calculations on this indicator. These data are collected annually as part of the October (fourth Tuesday) Child Count reporting.

Disproportionate Representation Methodology
South Carolina used a multitier process to determine the presence of disproportionate representation in special education and related services due to inappropriate identification. The first step was calculation of risk ratios using data submitted by LEAs in the OSEP 618 data tables. Using the electronic spreadsheet developed by Westat, South Carolina calculated the risk ratios for each LEA with regards to its composition of students in special education along the seven federally reported race/ethnic categories. This risk ratio directly compares the relative size of two risks by dividing the risk for a specific racial/ethnic group by the risk for a comparison group. This determined the specific race/ethnic group’s risk of being identified as having a disability as compared to the risk for all other students. A risk ratio above the state established criteria initiated the following process to determine whether the disproportionate representation was due to inappropriate identification. LEAs are determined to have disproportionate representation if they exceed the risk ratio trigger.
Based upon feedback from stakeholders, the OSES redefined the trigger to use a risk ratio of above 2.50 for overrepresentation. The data used by the state are only data from one reporting year (FY20).

South Carolina collected data for all LEAs for the 2020-21 reporting year. South Carolina determined that a disability subgroup size of less than 30 and a cell size less than 10 would not yield valid disproportionate ratios. As the data show, three LEAs were excluded from consideration for disproportionate representation based on these criteria.

**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.**

Any LEAs that are determined to have disproportionate representation (meeting the trigger): used and completed an established rubric to examine LEA policies, procedures, and practices involved in the referral, evaluation, and identification of students with disabilities; complete individual folder reviews for a subset of student records from identified students with disabilities to examine the practices involved in the evaluation and identification of students with disabilities as required by 34 CFR §300.111, §300.201 and 300.301 through §300.311; and submit a summary of findings and evidence to the OSES for verification.

LEAs determined to have disproportionate representation used a guided self-assessment process with assistance from a team in the OSES. The self-assessment is a focused review of an LEA’s policies, procedures, and practices. The process guided the LEA in its examination of the procedures used to identify children as students with disabilities. The LEA’s decision-making process and practices are examined to determine to what extent, if any, they contributed to the disproportionate representation of students in disability categories. The LEA’s evaluation practices were reviewed to determine if students of the identified racial and ethnic groups had received appropriate evaluations. The evaluations must have included a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the student that may assist in determining the student’s specific classification and the content of the student’s individualized education program (IEP), including information related to enabling the student to access and progress in the general education curriculum. This protocol was developed to guide the LEAs through the process of examining policies, procedures, and practices related to the identification of students with disabilities, collecting data and evidence to support determinations, and evaluating the effectiveness of these practices. The same folders reviewed for eligibility criteria were also reviewed for the evaluation process. The LEAs gathered available evidence that pertained to each regulatory requirement, evaluated the evidence, and determined whether the evidence supported compliance or noncompliance.

The OSES then reviewed and verified the LEA's information. For FY20, there were 4 LEAs that were found to have practices that contributed to disproportionate representation. All policies and procedures were appropriate.

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

The OSES issued written findings of noncompliance to the 4 LEAs and will report on correction of the noncompliance in the FY20 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 2005, but OSEP cannot accept that revision because of revisions to the Measurement Table. Specifically, with the FFY 2020 APR submission, 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.

## 10 - Required Actions

In the State's FFY 2021 SPP/APR, the State must revise its baseline to include all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA.

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 ide

# 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 | 83.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 99.52% | 99.65% | 99.94% | 99.74% | 98.01% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 20,108 | 17,706 | 98.01% | 100% | 88.05% | Did not meet target | Slippage |

**Provide reasons for slippage**

On the whole, LEAs saw a rise in the number of students for whom consent to evaluate was sought and received. LEAs struggled to determine how many of the referrals for evaluation were the result of the impact of COVID. Because very little research is available to quantify the impact of COVID on academics and functional behavior, LEAs attempted to proceed with the evaluation process in the majority of cases, deeming this to be in the best interest of students.

As noted in the Introduction, the COVID pandemic continues to affect every aspect of the educational system due to the significant health and safety concerns resulting from the virus. Schools and LEAs moved back and forth between virtual and face-to-face instruction based on current community conditions. Quarantine and mask ordinances continued to be in place. Although LEAs and school personnel were able to adapt and continue with some aspects of the education process, there were others that could not be adapted. The processes and routines dependent upon face-to-face interaction were affected the most. This included some aspects of the evaluation process. Although LEAs were able to continue with and complete some aspects of the initial evaluation process using alternative means (virtual meetings, telephone calls, video calls, emails), there were other aspects that could not be completed due to the face-to-face interaction required. So while LEAs were able, in some situations, to gather parent input, complete rating scales, assess current levels of performance, and observe instructional response, LEAs were unable to gather other information required by the evaluation planning team. There were components requested by the team that could only be gathered via close contact, face-to-face interaction. These included standardized cognitive, language, communication, and achievement assessments as well as other measures. Because the health and safety issues did not allow for this type of interaction and because these assessment measures could not be adapted or changed to accommodate for administration using another format without invalidating the results, the completion of the initial evaluation process was delayed for a small percentage of students. Absenteeism (both student and staff) due to the pandemic also contributed significantly to the delay in completion of some evaluations.

Of the students for whom the initial evaluation was not completed within the timeline, 2307 of these students’ evaluations were delayed unavoidably due to the COVID pandemic. LEAs made good faith efforts to complete all aspects of the evaluation process possible. The aspects that were not able to be completed within the timeline due to the pandemic have been completed as soon as it was safe for both the students and staff. During this time, LEA and school staff communicated frequently with parents and families to keep them abreast of their efforts and to discuss alternatives. Once face-to-face interactions with all safety precautions in place could begin, LEAs began scheduling the remaining assessment components as quickly as possible. In some instances, parents were uncomfortable due to continued health and safety concerns with any face-to-face interactions and asked that the completion of the components be delayed. LEAs have documented all good faith efforts and communications with parents during this time. Although OSEP did not grant any waivers for this, or any other timelines related to IDEA, the OSES wanted to look at the impact of COVID on this Indicator. When the 2307 students with COVID-related delays were removed from the calculations (for analysis purposes only), there were 95 students who were not assessed within the timelines. It appears that slightly over 96% of the delays, despite all good faith efforts by LEAs and families to complete the evaluations within the timeline, were directly and unavoidably COVID-related.

South Carolina saw a rise in the number of delays due to difficulty engaging parents primarily because there was a sharp rise in students receiving instruction in a virtual setting due to COVID. In the brick-and-mortar setting, the evaluation team has access to the student consistently throughout the evaluation process (unless the student is absent). In the virtual setting, the evaluation team is dependent upon the ability to engage the parents and must work to find a time and, many times, a location to conduct face-to-face assessments and interview the parents. Parents reported that the complications of supporting virtual instruction at home and dealing with the myriad of COVID-related stressors often made it difficult to make arrangements for the face-to-face components and other parts of the evaluation process that were dependent upon their time and schedule.

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

2,402

**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.**

For the FY20 APR, the range of days beyond the 60-day timeline was from 1 to 504 days. The reasons for the delays (and subsequent noncompliance) include staff turnover; the inability to engage parents after multiple varied attempts; and difficulty scheduling hearing and vision screenings. South Carolina saw a rise in the number of delays due to difficulty engaging the parent primarily because there was a sharp rise in students receiving instruction in a virtual setting due to COVID. In the brick-and-mortar setting, the evaluation team has access to the student consistently throughout the evaluation process (unless the student is absent). In the virtual setting, the evaluation team is dependent upon the ability to engage the parents and must work to find a time and many times a location to conduct face-to-face assessments and interview the parents. The vast majority (more than 96%) of the LEAs' inability to compete the evaluation process due to health and safety concerns were directly and unavoidably related to the COVID pandemic. These reasons included staff, student, and/or family illness or quarantine related to COVID,

**Indicate the evaluation timeline used:**

The State used the 60 day timeframe within which the evaluation must be conducted

**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 OSES collects data from the statewide special education database, SC Enrich IEP, for use in the measurement of IDEA Part B Indicator 11. The data are pushed up from the LEA to the state level. The date range for this collection was July 1, 2020 – June 30, 2021. These data were reflective of all students for whom parental consent was received and who received an evaluation consistent with the requirements of IDEA Part B Indicator 11. A team of OSES staff with expertise in data collection, analyses, and reporting reviewed both quantitative and qualitative data from the SC Enrich IEP spreadsheet reports to determine the categorical analysis of each individual student for whom consent to evaluate was received. These staff also conducted follow-up communication with any LEA that exceeded the timeline for one or more children to determine whether or not there was any noncompliance by LEA. The OSES collected additional data and explanatory documentation to ensure the data and information were valid and reliable.

**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** |
| --- | --- | --- | --- |
| 289 | 289 | 0 | 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***

Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to evaluation for initial eligibility for special education in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system’s level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

The LEAs in question submitted evidence, verified by the OSES, that these children had been evaluated, although late, and that each of the affected LEAs had held IEP meetings to determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district; in reviews of additional documentation submitted as part of the data validity verification procedures; and in reviews of the online SC Enrich IEP system. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator.

**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 LEAs in question submitted evidence, verified by the OSES, that these children had been evaluated, although late, and that each of the affected LEAs had held IEP meetings to determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district; in reviews of additional documentation submitted as part of the data validity verification procedures; and in reviews of the online SC Enrich IEP system. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator.

## 11 - OSEP Response

## 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. 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 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 | 78.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.73% | 100.00% | 100.00% | 99.56% | 90.22% |

**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.  | 3,951 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.  | 611 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.  | 1,095 |
| 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.  | 1,154 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays.  | 108 |
| 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. | 1,095 | 2,078 | 90.22% | 100% | 52.69% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

As noted in the Introduction, the COVID pandemic has affected every aspect of the educational system due to the significant health and safety concerns resulting from the virus. Physical school, district, and government buildings remained close through the summer of 2020. Quarantine and mask ordinances were put into place. Although LEAs and school personnel were able to adapt and continue with some aspects of the education process, there were others that could not be adapted, particularly to this age group. The processes and routines dependent upon face-to-face interaction were affected the most. This included some aspects of the initial evaluation and transition processes. Although LEAs were able to continue with and complete some aspects of the initial evaluation process using alternative means (virtual meetings, telephone calls, video calls, emails), there were other aspects that could not be completed due to the face-to-face interaction required. These types of interactions with children this age are critical to relationship-building and obtaining valid and reliable data. Therefore, while LEAs were able, in some situations, to gather parent input, complete rating scales, assess current levels of performance, and observe instructional response, LEAs were unable to gather other information required by the evaluation planning and transition team. There were components requested by the team that could only be gathered via close contact, face-to-face interaction. These included standardized cognitive, language, communication, developmental, and pre-academic assessments as well as other measures. Because the health and safety issues did not allow for this type of interaction and because these assessment measures could not be adapted or changed to accommodate for administration in through another format without invalidating the results, the completion of the initial evaluation process and subsequently, the transition from C to B services, was delayed for a small percentage of students. In some instances, the child was able to continue to receive Part C services until the transition could be safely completed; however, as will be reflected in Part C’s APR, the pandemic impacted service delivery for Part C as well. Absenteeism (both student and staff) due to the pandemic also contributed significantly to the delay in completion of some evaluations and therefore in the development of an IEP by a child's 3rd birthday.

Of the 983 students for whom the initial evaluation and transition were not completed within the timeline, 877 of these students’ evaluations/transitions were delayed unavoidably due to the COVID pandemic. LEAs made good faith efforts to complete all aspects of the evaluation and transition process possible. The aspects that were not able to be completed within the timeline due to the pandemic have been completed as soon as it was safe for both the students and staff. During this time, LEA and school staff communicated frequently with parents and families to keep them abreast of their efforts and to discuss alternatives. Once face-to-face interactions with all safety precautions in place could begin, LEAs began scheduling the remaining assessment components and transition meetings as quickly as possible. In some instances, parents were uncomfortable due to continued health and safety concerns with any face-to-face interactions and asked that the completion of the components be delayed. LEAs have documented all good faith efforts and communications with parents during this time. Although OSEP did not grant any waivers for this, or any other timelines related to IDEA, the OSES wanted to look at the impact of COVID on this Indicator. When the 877 students with COVID-related delays were removed from the calculations (for analysis purposes only), there were 106 students who were not assessed/transitioned within the timelines. It appears that slightly over 89% of the delays, despite all good faith efforts by LEAs and families to complete the evaluations/transitions within the timeline, were COVID-related.

LEAs made good faith efforts to complete all aspects of the evaluation process or the IEP development as soon as possible. The aspects that were not able to be completed within the timeline due to the pandemic have been completed as soon as it was safe for both the students and staff. During this time, LEA and school staff communicated frequently with parents and families to keep them abreast of their efforts and to discuss alternatives. Once face-to-face interactions with all safety precautions in place could begin, LEAs began scheduling the remaining assessment components as quickly as possible. In some instances, parents were uncomfortable due to continued health and safety concerns with any face-to-face interactions and asked that the completion of the components be delayed. LEAs have documented all good faith efforts and communications with parents during this time. Although OSEP did not grant any waivers for this, or any other timelines related to IDEA, the OSES wanted to look at the impact of COVID on this Indicator.

Once face-to-face interactions with all safety precautions in place could begin, LEAs began scheduling the remaining assessment components and transition meetings as quickly as possible. In some instances, parents were uncomfortable due to continued health and safety concerns with any face-to-face interactions and asked that the completion of the components be delayed. LEAs have documented all good faith efforts and communications with parents during this time. Although OSEP did not grant any waivers for this, or any other timelines related to IDEA, the OSES wanted to look at the impact of COVID on this Indicator.

South Carolina saw a rise in the number of delays due to difficulty engaging parents primarily because there was a sharp rise in students receiving instruction in a virtual setting due to COVID. In the brick-and-mortar setting, the evaluation team has access to the student consistently throughout the evaluation process (unless the student is absent). In the virtual setting, the evaluation team is dependent upon the ability to engage the parents and must work to find a time and, many times, a location to conduct face-to-face assessments and interview the parents. Parents reported that the complications of supporting virtual instruction at home and dealing with the myriad of COVID-related stressors often made it difficult to make arrangements for the face-to-face components and other parts of the evaluation process that were dependent upon their time and schedule.

**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**

983

**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.**

For FY20, the range of days beyond the third birthday was from 1 to 408 days. The reasons for the delays (and subsequent noncompliance) include staff turnover; failure to move expeditiously to ensure that an evaluation occurred within sixty calendar days; the inability to engage parents after multiple varied attempts; difficulty arranging for related service providers’ input for assessments; inconsistent oversight of the evaluation process by the LEA; and inability to complete the evaluation process due to health and safety concerns related to the COVID pandemic. Data analysis showed that more than 89% of the delays were directly related to the pandemic.

**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 OSES collects data from the statewide special education database, SC Enrich IEP, for use in the measurement of IDEA Part B Indicator 12. The data are pushed up from the LEA to the state level. The date range for this collection was July 1, 2020 – June 30, 2021. These data were reflective of all students for whom this applies in SC. A team of OSES staff with expertise in data collection, analyses, and reporting reviewed both quantitative and qualitative data from the SC Enrich IEP spreadsheet reports to determine the categorical analysis of each individual student for whom consent to evaluate was received. These staff also conducted follow-up communication with any LEA that exceeded the timeline for one or more children to determine whether or not there was any noncompliance by LEA. The OSES collected additional data and explanatory documentation to ensure the data and information were valid and reliable.

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

The OSES provided guidance and support to LEAs in searching for alternative means to complete evaluations during the pandemic. This included sharing information from test developers as to whether a particular assessment could be administered via alternative means such as virtually. This also included assisting LEAs with the identification, where available, of alternatives to frequently used assessments. In many situations, alternative administration methods or alternative assessments were simply not available, particularly for this age range. The health and safety concerns for all involved were a priority that prohibited the face-to-face interaction required by much of the evaluation and transition process.

On the whole, LEAs saw a rise in the number of children transitioning from Part C to B during the 2020-21 school year. Communication with the state's Part C partners will be useful to determine what caused this increase.

**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** |
| --- | --- | --- | --- |
| 153 | 153 |  | 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***

Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to evaluation and transition from C to B in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation/transition team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system’s level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

The LEAs in question submitted evidence, verified by the OSES, that these children had been evaluated and now have an IEP in place, although after their third birthday, and that each of the affected LEAs had held IEP meetings to determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district; in reviews of additional documentation submitted as part of the data validity verification procedures; and in reviews of the online SC Enrich IEP system. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is, therefore, demonstrating 100% compliance at the student level for this Indicator.

**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**

## 12 - OSEP Response

## 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. 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 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 | 98.92% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 88.82% | 91.90% | 90.48% | 96.88% | 98.25% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 355 | 436 | 98.25% | 100% | 81.42% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Based on additional guidance provided to states from OSEP with regards to the 09-02 Timely Correction Memo, South Carolina revised its monitoring, identification, and correction of noncompliance process related to this Indicator. Previously, the OSES has allowed LEAs to submit IEPs for a precheck, provided feedback, and allowed LEAs to resubmit for the actual Indicator 13 review. Based on the recent guidance from OSEP, the OSES directed LEAs to perform a self-check using the NTTAC checklist, then submit their IEPs. The drop in compliance appears to be due, in part, to the LEAs' overreliance on the use of a precheck before submitting IEPs. LEAs reported that COVID also impacted their reviews due to a lack of appropriately credentialed staff in many situations - inability to find and higher staff or staff absences due to quarantine or illness during the critical review period.

The OSES will expand the current checklist into a more in-depth self-assessment and provide training and assistance to LEAs in the effective use of the process to improve compliance with this Indicator and to thus, improve outcomes for transition-aged students.

**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.**

The OSES system for review of IEPs for this Indicator operates on a three-year data collection and review cycle. One-third of all LEAs have IEPs reviewed annually. Each third contains a similar range of small, medium, and large LEAs in terms of the number of students with disabilities. The number of IEPs per LEA depends on the size of the LEA, but typically ranges from 10 to 20. The IEPs are uploaded into the state-wide database and then reviewed by OSES staff. Upon completion of the review, each LEA receives feedback, and is required to correct all findings of noncompliance as soon as possible, but in no case later than one year. OSES staff reviews IEPs using a tool based on information and guidance from the National Training and Technical Assistance Center (NTTAC). The tool used for Indicator 13 data collection may be found at: https://ed.sc.gov/districts-schools/special-education-services/post-secondary-outcomes/. A webinar reviewing required information, providing TA specific to this Indicator, and listing links to the national TA center was recorded and posted on the OSES website. LEAs are referred to it. This was the third year in the current cycle. The monitoring process will change for the FY21 APR to align with the new SoTA system.

| **Question** | **Yes / No** |
| --- | --- |
| Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16?  | YES |
| If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age? | NO |

**If no, please explain**

Federal regulations require post-secondary planning beginning at age 16 but allow states to set a younger age. South Carolina lowered the age to 13 to align with general education graduation requirements and the development of Individual Graduation Plans for all students.

For Indicator 13, OSEP has allowed states to use either the federal age (16) or the state requirement (13) if it is different. The state opted to use the federal age for our data collection to ensure comparability for data reporting purposes.

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

To assist LEAs in developing compliant and meaningful transition IEPs and in correcting the areas of noncompliance, OSES developed and posted an online module relating to Indicator 13 and post-secondary transition planning and services. OSES also developed activities, a post-module assessment, and other resources that were included with the module on the OSES website. The webinar reviewing required information, providing TA specific to this Indicator, and listing links to national TA center has been recorded and posted on the OSES website. LEAs are referred to this universal TA.

OSES also provided in-person professional learning opportunities for the LEAs with findings of noncompliance. OSES has collaborated with the Transition Alliance of South Carolina (TASC) to provide guidance to district transition teams and with ABLE-SC (an in-state disability advocacy organization) in order to strengthen knowledge of transition needs and services for students with disabilities.

**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** |
| --- | --- | --- | --- |
| 7 | 7 |  | 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***

Based on the percentage of noncompliant IEPs, LEAs were required to complete various activities. For those in the 80 to 99 % group, corrections for any area of noncompliance had to be completed and resubmitted for OSES review. For those in the 30 to 79% group, LEAs were required to submit evidence that all staff who prepare Indicator 13 documents participated in OSES’ Indicator 13 virtual professional learning opportunity (on-line module) and submit evidence of correction of all individual findings of noncompliance. Corrections were verified by OSES staff. For LEAs in the 0 to 29% group, requirements included evidence that all staff who prepare Indicator 13 documents participated in OSES’ Indicator 13 virtual professional learning opportunity, that designated staff participated in an OSES-approved targeted post-secondary transition professional learning opportunity designed to meet the technical assistance needs of the LEA, and submit evidence that all individual findings of noncompliance were corrected.
Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to transition IEPs in each LEA and found that the policies and procedures for all LEAs were aligned with all federal and state requirements. The findings noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all IEP team members were adhering to the regulatory requirements. They were also required to complete the review of the module described above and attendance was tracked. All LEAs received on-site TA from one or both of the state-level TA providers. The TA was specific to the particular needs of each LEA. The OSES reviewed updated data in the on-line system as well as any corrective practices the LEAs were implementing and determined that each LEA is now correctly implementing the regulatory requirements at the system’s level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

Based on the percentage of noncompliant IEPs, LEAs were required to complete various activities. For those in the 80 to 99 % group, corrections for any area of noncompliance had to be completed and resubmitted for OSES review. For those in the 30 to 79% group, LEAs were required to submit evidence that all staff who prepare Indicator 13 documents participated in OSES’ Indicator 13 virtual professional learning opportunity (on-line module) and submit evidence of correction of all individual findings of noncompliance. Corrections were verified by OSES staff. For LEAs in the 0 to 29% group, requirements included evidence that all staff who prepare Indicator 13 documents participated in OSES’ Indicator 13 virtual professional learning opportunity, that designated staff participated in an OSES-approved targeted post-secondary transition professional learning opportunity designed to meet the technical assistance needs of the LEA, and submit evidence that all individual findings of noncompliance were corrected.

The OSES staff, as well as TASC staff, provided individualized TA for the LEAs based on the individual findings of noncompliance. In some instances, this included having teachers bring the noncompliant IEPs and work through the issues with the TA providers. The LEAs then held IEP meetings for all students for whom there was a transition-related finding of noncompliance to correct the noncompliance and determine whether the student had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district; in reviews of additional documentation submitted as part of the data validity verification procedures; and in reviews of the online SC Enrich IEP system. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is, therefore, demonstrating 100% compliance at the student level for this Indicator.

**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**

The LEAs in question submitted evidence, verified by the OSES, that these LEAs had held IEP meetings to make corrections in the IEPs and to determine whether the student had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district; in reviews of additional documentation submitted as part of the data validity verification procedures; and in reviews of the online SC Enrich IEP system. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator.

## 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 | 2020 | Target >= | 15.61% | 16.00% | 17.00% | 18.00% | 25.00% |
| A | 11.16% | Data | 22.82% | 26.21% | 30.87% | 24.44% | 10.65% |
| B | 2020 | Target >= | 44.00% | 45.00% | 46.00% | 47.00% | 50.00% |
| B | 39.39% | Data | 56.85% | 57.36% | 61.04% | 54.63% | 24.90% |
| C | 2020 | Target >= | 57.00% | 60.00% | 62.00% | 64.00% | 75.00% |
| C | 83.46% | Data | 69.54% | 84.39% | 76.44% | 69.87% | 75.83% |

**FFY 2020 Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 11.16% | 11.36% | 11.56% | 11.76% | 11.96% | 12.16% |
| Target B >= | 39.39% | 40.89% | 42.39% | 43.89% | 45.39% | 46.89% |
| Target C >= | 83.46% | 84.46% | 85.46% | 86.46% | 87.46% | 88.46% |

**Targets: Description of Stakeholder Input**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 5,714 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 3,029 |
| Response Rate | 53.01% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school  | 338 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school  | 855 |
| 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) | 1,252 |
| 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). | 83 |

| **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) | 338 | 3,029 | 10.65% | 11.16% | 11.16% | N/A | N/A |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 1,193 | 3,029 | 24.90% | 39.39% | 39.39% | N/A | N/A |
| 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) | 2,528 | 3,029 | 75.83% | 83.46% | 83.46% | N/A | N/A |

**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  | 32.13% | 53.01% |

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

There was no underrepresentation among groups. In the event bias is determined, the state will work to reduce the bias by increasing the response rate to ensure everyone is represented; reviewing questions to ensure they are neutrally worded in clear, simple language and answers are not leading; and reviewing the order of the questions to reduce order bias.

**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.**

There was less than a 1.5% difference in proportions among gender, disability category, and race.

**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 analysis may be found at https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/.

**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).**

To determine whether the data represent the demographics of the State, the OSES calculated the response rates along three demographics variables: gender of the students; race or ethnicity (using the federal reporting categories); and primary disability category.

Next, the State compared the response rates, by demographics, to those who left school the previous year. The state then compared these rates to one another. The state then reviewed the difference between the percentages of the demographics variables of the respondents to the state. The threshold used by the state to determine representativeness was 10 percent. In other words, if the difference between the respondents and the population was -10 percent or less, the OSES finds the values representative. There were no differences that exceeded plus or minus 10.00 percent (Note: a negative value indicates under-representation; a positive value indicates over-representation). As a result, the state finds these data to be representative of the demographics of the State.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |
| **Survey Question** | **Yes / No** |
| Was a survey used?  | YES |
| If yes, is it a new or revised survey? | YES |
| If yes, attach a copy of the survey | FY20 Indicator 14 Survey Questions Script (1) |

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

The state contracted with a contact management center software-based company. This company conducts a census of school exiters each year to follow-up on post-secondary experiences. Four options were employed by this group to obtain survey information: email, outbound calls, mailers/letters, and Facebook Messaging. Exiters include students who have aged-out, graduated with a regular high school diploma, and are non-returners who received a state certificate or are dropouts at or above age 17. The company conducts surveys one year after students exit school with a survey on postsecondary experiences.
Exiters are identified through the state’s online special education student information system, SC Enrich IEP. These students have been verified as having exited with the 618 Table 4 submissions. In order to ensure valid data are provided for exiting students, the Office of Special Education Services follows-up with each LEA to ensure up-to-date contact information for students when they graduate, receive a state certificate, drop out of school, or die. For the post-secondary survey, the state provides the company with the population of exiters from the previous school year. A number of techniques are deployed by the company to collect student data. These included:
 1. Emails with web links to complete the survey and the ability to respond to the email itself.
2. Outbound calls using live agents and call automation leaving personalized voicemail with callback numbers.
3. Mailers (letters) sent to residential addresses with callback numbers and website information.
4. Facebook Messaging when a Facebook profile match is found.
 The techniques above are listed by the order in which attempts were made to reach each leaver. Emails were attempted first (up to 4 attempts), followed by phone calls (up to 8 attempts), then letters/mailer and finally, searching Facebook profiles.
 In order to appropriately identify students for the particular categories of this indicator, OSES staff conducts additional analyses to ensure that students are correctly counted once in one of four conditions:
1. enrolled in higher education,
2. competitively employed,
3. enrolled in some other postsecondary education or training program, and
4. employed in some other employment.

Exiters are defined as the population of students who have exited school during the previous school year to the reporting year of the Annual Performance Report (APR) for reasons that include: graduating with a South Carolina high school diploma; receiving a South Carolina state certificate; reaching maximum age; dropping out of school at age 17 and above; and not returning to school the subsequent year.
 South Carolina notes that while students with disabilities who have died are counted in state reporting of exiters, South Carolina does not include them in the definition of “exiters” for Part B SPP Indicator 14. Subsequently, their families are not provided surveys nor interviewed, and these students are not included in the survey process.

## 14 - Prior FFY Required Actions

None

## 14 - 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.

## 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 | 28 |
| 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 | 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**

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 37.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 60.00% | 37.50% | 40.00% | 42.50% | 42.50% |
| Data | 77.78% | 37.50% | 60.00% | 63.16% | 43.48% |

**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 >= | 45.00% | 60.00% | 45.00% | 60.00% | 45.00% | 60.00% | 45.00% | 60.00% | 45.00% | 60.00% | 45.00% | 60.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 11 | 28 | 43.48% | 45.00% | 60.00% | 39.29% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Slippage occurred because 9 of the total 32 due process complaints were filed by the same two individuals in the same school district. Of the 28 resolution sessions, 6 were the result of their filings, resulting in 0 resolution agreements. Of the remaining 22 resolution sessions, 11 (50%) were resolved through resolution agreements.

**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 | 2 |
| 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 | 0 |
| 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 | 1 |

**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**

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\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 75.00% | 75.00% |  | 64.00% - 100.00% | 64.00%-100.00% |
| Data | 50.00% | 50.00% | 0.00% | 100.00% | 80.00% |

**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% | 80.00% | 75.00% | 80.00% | 75.00% | 80.00% | 75.00% | 80.00% | 75.00% | 80.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 80.00% |  |  | 50.00% | N/A | N/A |

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

No baseline was reported, no targets or improvement activities were developed or reported on due to having less than 10 mediations held.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State provided targets for this indicator, and OSEP accepts those targets.

The State reported fewer than ten mediations held in FFY 2020. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

## 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)?**

Academic proficiency in English-Language Arts (ELA) for students with disabilities grades 4 - 8, as measured by SC Ready, will show a higher rate of growth for students with disabilities whose teachers have completed SCDE coursework in evidence-based practices (EBPs) in the area of reading than those students whose teachers have not taken the course(s).

**Has the SiMR changed since the last SSIP submission? (yes/no)**

YES

**Provide a description of the system analysis activities conducted to support changing the SiMR.**

The previous SiMR focused on a small number of schools (ten) and only students with disabilities in the third grade at those schools. This resulted in a very small group to monitor progress for and impact. According to data from fidelity surveys from implementation facilitators, the schools struggled to implement a school-wide system without additional support from both school- and district-level administration. This was seen clearly in the bi-annual results of the Self-Assessment for MTSS (SAM) that was administered. The previous SiMR did not allow a single teacher to make an impact and was based on school-wide participation in the Data-based Decision Making strand of the SSIP. Progress monitoring data from the small sample was difficult to analyze because six different progress monitoring measures were used across the ten schools. The State also looked at the SC READY (the statewide accountability measure) for the three years it was available. At the system’s level, the previous SiMR did not track progress across students, but rather looked at a different group of students each year (third graders in the ten schools). When data were looked at in this manner, it became apparent that there needed to be a focus on building the skills of the teachers responsible for instruction.
Anecdotal, progress monitoring, interview, and focus group data from participants in the ten schools (teachers, administrators, and implementation facilitators) clearly showed the need to expand the student impact and provide teachers with a framework that can be applied immediately to the school's chosen curriculum and provide training directly to the teacher. This will widen and expand the impact to a larger group of students.

The discussion about modifying the SiMR began early in the second year of implementation of the SSIP. At that time, data limitations, particularly the small size of the group, the inability to follow each group from grade to grade, and the use of several different progress monitoring measures, rose to the surface (see previous SSIP reports for more information). The stakeholders at the school and district levels in the ten SSIP schools began to talk about how to overcome the barriers identified and to broaden the reach of the work. The new SiMR attempts to mitigate these factors by providing training, not dependent upon a curriculum or a decision-making team, directly to the teachers. This approach will also not be influenced by competing district initiatives. This would expand the impact by using a more widely-accessible training format - a Learning Management System (LMS).

**Please list the data source(s) used to support the change of the SiMR**.

The data sources that were analyzed included interviews, surveys, and focus group data from teachers, administrators, and implementation facilitators at the ten SSIP schools. These data were collected annually across four years and have been reported in the State’s annual SiMR. The results from the SAM that was administered every fall and spring for the four years of implementation were used to gauge infrastructure changes. Progress monitoring data, primarily fall and spring data, collected over the four years was also used to make changes to the SiMR. Stakeholders involved in the previous SiMR provided the foundation for the changes to the new SiMR through results from surveys, interviews, and focus groups. Results were categorized by topic/theme when quantitative ratings (Likert scale) were not used. Additional stakeholder input in the form of comments was gathered from the state Advisory Council for Education of Students with Disabilities (ACESD). The annual outcome measure, the SC READY was used each year if available.

**Provide a description of how the State analyzed data to reach the decision to change the SiMR.**

As stated above, the State looked at systems-level, school-level, and individual student-level data. SAM results from fall to spring annually and also from year to year were compared to identify areas of improvement and need. The 39-item/6 domains of the SAM are each scored 0 to 3 (0 = Not Started; 1 = Emerging/Developing; 2 = Operationalizing; 3 = Optimizing). Scores were aggregated by domain for annual comparison. It was apparent when these results were put into perspective by reviewing the results from the previous APRs, that the previous SiMR was having minimal impact on student outcomes. Interview, survey, and focus group data from the ten SSIP participating schools’ staff were reviewed to identify themes and barriers. Results were organized around themes and topics related to what worked, what did not work, and barriers identified. These results showed that obstacles included school leadership turnover, lack of buy-in from the entire data team, and competing initiatives or priorities at the district level.

The State also attempted to analyze progress of third-grade students on each school’s progress monitoring measure by comparing fall and spring scores when available.

**Please describe the role of stakeholders in the decision to change the SiMR.**

Stakeholder feedback was the driving factor in changing the SiMR. Large spectrum stakeholder feedback was gathered for this Indicator using the same process as all other SPP Indicators (see Stakeholder section below). Specific feedback regarding the previous SiMR from stakeholders at the school and district levels included surveys, focus groups, and interviews. These feedback methods were conducted twice yearly (fall and spring) over the four years of implementation. Teachers in the ten SSIP schools included the third-grade teachers of students with disabilities, the reading coaches, the implementation facilitator, and in some instances, the Speech-Language Pathologist and School Psychologist from the SSIP school. Administrators included curriculum specialists, principals, assistant principals, and special education coordinators and directors. That feedback was shared with larger stakeholder groups during presentations, panel discussions, and meetings focused on the SPP. These meetings included statewide meetings (both virtual and face-to-face) of LEA special education directors, instructional leaders, superintendents, and parent advocates.

The feedback from all stakeholders led the Office of Special Education Services (OSES) to expand the SiMR to grades 4-8 and deliver the training directly to the teachers. Stakeholders, specifically the Advisory Council for the Education of Students with Disabilities (ACESD), reported very clearly that the SiMR needed to remain focused on literacy and needed to include elements of the Science of Reading. Stakeholders also stated that the training needed to include a framework that could be incorporated with any curriculum. Stakeholders encouraged the OSES to find a way to incorporate student-level growth from year to year rather than a simple “meets expectations” (the previously used assessment result category) and to allow for the reporting of all progress and not just changes in the level.

**Is the State using a subset of the population from the indicator (*e.g.*, a sample, cohort model)? (yes/no)**

YES

**Provide a description of the subset of the population from the indicator.**

There will be two groups of students and two targets.
Group 1 (part A): will be students whose teachers have had the prescribed intervention of the SCDE coursework on EBPs in reading. Teachers will be assigned to the LMS course using both a targeted\* and a random\*\*approach.
\*Targeted: The OSES provides support to LEAs through a tiered system. LEAs who are in tiers 2 and 3 and have a root cause analysis that shows literacy/academics as part of the root cause of their "unhealthy" data on LEA Determinations, will have teachers assigned to the LMS courses. This will include approximately 24 LEAs.
\*\*Random: LEAs can also choose to assign specific teachers to the LMS courses and teachers can choose to enroll in the course because the course counts for continuing education hours.
Group 2 (part B): will be students whose teachers have not had the prescribed intervention of the SCDE coursework on EBPs in reading.
Students from Group 1 will be matched to students from Group 2 on five levels:
1. Disability category
2. Grade
3. Gender
4. Least Restrictive Environment (LRE)
5. Free and Reduced Lunch (FRL)
The student impact will be measured by using the average growth on the SC Ready ELA (statewide assessment). The SC Ready is on a vertical scale and will demonstrate the amount of growth year to year. Additionally, student scores in Group 1 and Group 2 will be compared to evaluate the effectiveness of the intervention. The same students will be followed from grades 4 through 8; scores will be compared on an individual level and then aggregated for an average growth score across the group.

**Is the State’s theory of action new or revised since the previous submission? (yes/no)**

YES

**Please provide a description of the changes and updates to the theory of action.**

The previous Theory of Action (ToA) described three separate strands - Data-based Decision Making (DbDM), Quality Instruction (EBPs), and Family and Community Engagement (FaCE). These multiple strands have been collapsed into one strand - EBPs with DbDM and FaCE woven throughout. These (DbDM and FaCE) are critical to the success of any EBP. The professional development (PD) coursework in EBPs using the Science of Reading will build teachers’ content and instruction knowledge, which directly connects to classroom practices and increases student learning and outcomes.

The practice of Data-Based Individualization (DBI) from the National Center for Intensive Intervention (NCII), ties professional development to student learning by enabling teachers to make decisions about what works and what doesn’t in their own contexts, with their specific students. It also ensures that teachers discover exactly which additional knowledge area needs further study, or which pedagogical skill needs continued practice.

The content knowledge in the Science of Reading course ensures relevance and authenticity, which are critical for both students and teachers. The LMS course incorporates knowledge building, experimentation with new pedagogical practices in the classroom, and the collection of student work as evidence. The coursework emphasizes the importance of using data to drive instructional decisions and the inclusion of the family and community in improving outcomes for students.

**Please provide a link to the current theory of action.**

https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/

**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.**

Based on stakeholder feedback, the previous evidence-based practice (EBP) was more narrowly focused on providing direct instruction to teachers in Data-Based Individualization (DBI) rather than the new broad focus. This new focus will include EBPs from the Science of Reading administered through DBI and the writing of more rigorous IEP goals related to literacy. The new EBPs will still be provided directly to teachers but will now be delivered through an LMS, making it more accessible and available to a much larger pool of teachers. The measurement tool will remain the SC Ready in ELA, but be expanded from third grade only to grades four through eight. The measurement tool is on a vertical scale and the OSES will be able to compare student pre-intervention (prior year) scores to post-intervention scores (year the teacher received the PD) for students whose teachers received the intervention. The measurement will now include matched students whose teachers did not receive the intervention for comparison.

Year 1 (2021-2022): Creation of and piloting/validating courses; changes to courses based on evaluation feedback; examination and analysis of SC Ready results (post-COVID) state-wide test results for grades three through eight; and completion of courses by teachers to ensure validity and reliability of instruction within the courses.
Year 2 (2022-2023): Completion of coursework by first cohort of teachers; calculation of student results; and continued validation and reliability check of courses and changes to courses per results.
Year 3 (2023-2024): Completion of coursework by second cohort of teachers; calculation of student results; check of first cohort of teachers and students to see if there are long(er) term changes; fidelity checks for Year 2 (first cohort) teachers.
Year 4 (2024-2025): Completion of coursework by third cohort of teachers; calculation of student results. Check Years 2 and 3 teachers and students to see if there are long(er) term changes; fidelity checks for Years 2 and 3 teachers.
Year 5 (2025-2026): Completion of coursework by fourth cohort of teachers; calculation of student results. Check Years 2, 3, and 4 teachers and students to see if there are long(er) term changes; fidelity checks for Years 2, 3, and 4 teachers.
Year 6 (2026-2027): Completion of coursework by fifth cohort of teachers; calculation of student results. Check Years 2, 3, 4, and 5 teachers and students to see if there are long(er) term changes; fidelity checks for Years 2, 3, 4, and 5 teachers.

**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)**

YES

**Historical Data**

| **Part** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- |
| A | 2020 | 30.60% |
| B | 2020 | 30.60% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 30.60% | 31.60% | 36.60% | 37.60% | 38.60% | 39.60% |
| Target B >= | 30.60% | 31.60% | 32.60% | 33.60% | 34.60% | 35.60% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** |  |  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| A |  |  |  | 30.60% |  | N/A | N/A |
| B |  |  |  | 30.60% |  | N/A | N/A |

**Provide the data source for the FFY 2020 data.**

\*Because of the COVID waiver for statewide assessment for the 2019 assessment for the SC READY assessment, no data were available. Due to the approved participation waiver for the state, the data collected in FY20 are not comparable to the most recent data collected in FY18. No statewide assessments were given during FY19 due to the approved waiver for all assessments. The state will annually reexamine targets as several consecutive years' of comparable data become available.”. Because two consecutive years of assessment data is needed, and calculated at the individual student level, historical data from that assessment for years prior to 2019 were used to find the average growth difference and to set the new baseline above. The baseline may need to be re-examined once the OSES has two years of consecutive statewide assessment that is current to be able to determine year-to-year growth.

**Please describe how data are collected and analyzed for the SiMR**.

Data are collected from the statewide ELA assessment, SC READY. The assessment is on a vertical scale and shows growth year to year. The data are analyzed at the individual student level using the difference between the students’ current year scores and the previous year scores. Only students with a previous year’s score can be used, which is why grades 4-8 are used. Once the score difference is found at the individual student scale score, the average of the aggregate difference is used.

**Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* that demonstrates progress toward the SiMR? (yes/no)**

NO

**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 State received an assessment waiver for the 2020 assessment; therefore, no data were collected/available. The State received a participation waiver for the 2021 assessment; therefore, limited data were collected/available. Due to the decreased participation and not having two consecutive years of individual level student data, the limited data are not valid or reliable and so could not be used to set baseline or targets. The State attempted to minimize the impact by providing the assessment as scheduled, although participation was limited under the participation waiver. Because schools and entire districts opened the FY20 school year in a virtual format or moved in and out of a virtual format during the spring and fall, progress monitoring data could not be gathered because the tools used for progress monitoring were not able to be adapted to a virtual format and retain their reliability and validity.

**Section B: Implementation, Analysis and Evaluation**

**Please provide a link to the State’s current evaluation plan.**

https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/

**Is the State’s evaluation plan new or revised since the previous submission? (yes/no)**

YES

**If yes, provide a description of the changes and updates to the evaluation plan.**

Evaluation for the previous SSIP was provided through a contract with the University of South Carolina’s Research, Evaluation, and Measurement Center (REM). The end of the contract with the REM coincided with the change in the SiMR. An external evaluator was no longer needed due to the hiring of new staff with experience with statistical analysis and use of a growth model in the SCDE. Evaluation will be completed yearly with summative assessment results from SC Ready. Using the methods described in the sections above to find the aggregate difference between the two groups of students, the evaluation of the EBPs/LMS courses will be conducted.

Formative evaluations will be completed using teacher pre-test results, teacher post-test results, and teacher fidelity checks to evaluate where and how courses (EBPs) can be adjusted to improve student outcomes. Additional fidelity of implementation measures will include the DBI Implementation Rubric and Interview tool to be used along with the provision of additional information regarding fidelity of implementation of EBPs, progress monitoring, and interventions.

**If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.**

The new SiMR and new methodology based on stakeholder feedback required a new evaluation plan. The need to evaluate the progress of and impact on a larger group of students led to the changes described above in the methodology for the SSIP work as well as the SiMR. The use of a growth model will allow for the measurement of growth across grade levels and with a larger group of students as well as the ability to compare progress to a “control group” (students whose teachers have not taken the LMS courses). These changes will lead to a more robust measurement of growth directly related to teachers’ work with students.

**Provide a summary of each infrastructure improvement strategy implemented in the reporting period:**

All activities implemented during the reporting period were in support of the new ToA and SiMR and reflected the revised focus of the work. Infrastructure improvement during this reporting period included adding a Learning Management System (LMS) and course development. A new team (Virtual Support) was created with a team lead knowledgeable in adult learning principles. Additional staff with knowledge in LMSs and the creation of LMS courses were hired. This team is responsible for the technical aspects of creating coursework and operation of the LMS as well as use of the Moodle platform for courses. Moodle is the platform used by the SC Department of Education for virtual instruction and professional development. OSES instructional staff have undergone training in Language Essentials for Teachers in Reading and Spelling (LETRS) and Early LETRS at both the teacher and facilitator/trainer levels. The OSES continues to collaborate across offices within the SCDE. The LETRS training has been done in collaboration with staff from the Office of Early Learning and Literacy. Members of both offices have also collaborated on the provision of professional development activities to districts and schools. Staff has participated in numerous professional development activities provided by TA Centers such as NCII, NCSI, and the Reading League related to the Science of Reading.

The OSES has created its System of Tiered Assistance (SoTA) that provides for more effective communication with districts, including monthly and quarterly calls with stakeholders including district special education directors, specific services providers such as speech-language pathologists, and weekly newsletters. The SoTA relies on data to assist in determining where and how much support is needed in the broad areas of Academics, Early Childhood, Social-Emotional, and Post-Secondary Outcomes. For additional information about the SoTA, see the SPP Introduction.

**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.**

The following outcomes have been achieved based on activities conducted under the new ToA and SIMR. All activities have supported the review and revision of the State’s system of general supervision.

Governance: The OSES continues to be guided by the vision of ensuring that all students with disabilities have equitable access and opportunity to meet the Profile of the South Carolina Graduate. The more frequent and effective communication practices established during the initial COVID shut-down in Spring 2019 have continued to strengthen the relationship between the SEA and the districts. The OSES’ preparation for the OSEP DMS 2.0 monitoring (participation in all webinars and state calls as well as monthly calls with TA providers) has led to the review and in some cases, the revision of policies and procedures to ensure a more focused approach to improving outcomes. The collaboration among offices and between divisions at the SCDE has led to the use of a platform for TA/PD provision (Moodle) that is already familiar to districts.

Data: The OSES continues to utilize data to individualize and tailor support, technical assistance, and professional development to districts based on their unique needs. Staff worked with IDC staff using the Data Collection Protocols to ensure data are collected, verified, and analyzed in a timely manner. The OSES continues to use data from the statewide student information system (PowerSchool) and IEP system (Frontline-Enrich) to collect and report data. Twice-monthly meetings with Frontline staff provided better communication and more rapid resolution of issues as they arose.

Fiscal: The OSES Fiscal-Grants Management team continued frequent communication through the monthly calls, newsletters, and webinars to provide support to districts on general aspects of the IDEA grant as well as on the administration of the recently released ARP/IDEA funds. The OSES also participated in the first part of the OSEP’s DMS 2.0 which centered around fiscal monitoring. The staff used the Part B Subrecipient Monitoring Protocol to provide information requested by the OSEP. As mentioned previously, funds were allocated to create the new Virtual Support Team and to train instructional staff in the Science of Reading principles.

Monitoring/Accountability: The development of the SoTa was the result of the State’s review and revision of its general supervision system to ensure more equitable access and opportunities for students with disabilities. The SoTA has enabled the OSEP to monitor every district every year in the major outcomes areas of Academics, Early Childhood, Social-Emotional, and Post-Secondary Outcomes. The use of these data in the LEA Determinations has led to an increased focus on these outcomes. The resulting completion of a root cause analysis and a Quality Improvement Plan (QuIP), if necessary, has provided increased accountability for improving outcomes.
Technical Assistance/Professional Development: The SoTA framework has provided a mechanism to ensure TA and PD are tailored specifically to the needs of each district. The creation and use of the LMS has provided a mechanism to make this individualized TA and PD much more readily accessible and available down to the teacher level.

**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*.***

During the 2020-21 school year, development of the LMS system began. Several short courses were created initially to “test” the system. Feedback as to ease of use was used to develop the more intensive courses, including the Science of Reading course.

Joint training in LETRS was begun in winter of 2021 with OSES and Office of Early Learning and Literacy (OELL) staff. As of February 1, 2022, staff had completed Volume 1 of training and was mid-way through Volume 2. Staff from the two offices met weekly to discuss lessons and implementation practice.

Joint training in Early Childhood LETRS began in fall 2021 with OSES and Office of Assessment and Standards (OAS).
The SoTA was piloted in several LEAs to gather feedback through the cohort groups on the process so that adjustments could be made with the LEA Determinations and QuIP.

**Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.**

Additional courses will be developed to expand content into the areas of early language and literacy.
Data and feedback from the SoTA will continue to drive any needed adjustments in the process.
LETRS and Early Childhood LETRS training began and will continue through summer of 2022.
Joint presentations with OSES, OELL, and OAS staff will be provided to various groups including principal leaders, LEA instructional staff, and teachers throughout the next year.
As training in LETRS is rolled out to target schools, staff from both offices will be on-site to facilitate and follow-up with teachers and LEA staff.

**List the selected evidence-based practices implement in the reporting period:**

LETRS instructional and facilitators training;
Early Childhood LETRS instruction and facilitators training;
DBI

**Provide a summary of each evidence-based practices.**

Staff from the OSES and OELL began the LETRS training in winter of 2021 and will continue through spring of 2022. Participants have completed all required lessons, quizzes, tests, and implementation activities to this point.
Staff from the OSES and OAS began the Early Childhood LETRS training in fall 2021 and will continue through the summer of 2022. Participants have completed all required lessons, quizzes, tests, and implementation activities.
OSES staff continue to learn about DBI in virtual sessions with NCII. DBI practices have been embedded in the Science of Reading coursework.

**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.**

Information from LETRS and Early LETRS are being used to develop the LMS coursework utilizing the Science of Reading principles that will be provided to teachers of students in grades 4-8. The ready access to this information, along with the fidelity measures built into the course similar to those in the LETRS training, will ensure that teachers have the knowledge necessary to identify and address issues related to literacy and thereby, accelerate growth in and improve the reading skills of students with disabilities. When this foundation knowledge is paired with the DBI process, teachers will be able to make sound data-driven instructional decisions in real-time for their students. This will lead to improved growth in ELA for students with disabilities. The coordination among offices (OSES, OELL, and OAS) will ensure all teachers (general education and special education), support staff, and LEA staff are hearing the same research-based information, using the same language, across SCDE offices.

**Describe the data collected to monitor fidelity of implementation and to assess practice change.**

Fidelity data are collected through participation in all online instruction, completion of all assignments, participation in all weekly learning collaboratives, and a passing score on each assessment. The LETRS training has built-in quizzes and unit tests to assess progress. Implementation activities for participants are built-in as well. All OSES, OELL, and OAS staff has maintained passing grades in the training.
The DBI Implementation Rubric and Interview tool will be used along with the provision of additional information regarding fidelity of implementation of EBPs, progress monitoring, and interventions.

**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.**

NA

**Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.**

Additional more in-depth coursework in the area of the Science of Reading and DBI will be developed or identified and provided to teachers. Joint training and professional development with the OELL and OAS will continue as the support for EBPs in literacy instruction is scaled up. LETRS training will be rolled out to targets schools across the next two years. Progress in the first cohort of SSIP teachers and the first cohort of training for LETRS should be available for the FY21 APR.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

The OSES made a concerted effort to reach and solicit broad stakeholder input regarding the new SPP using the Leading by Convening model developed by NCSI to ensure authentic broad stakeholder engagement. This began with ensuring relevant stakeholders coalesced around the common issue of improving outcomes for students with disabilities. All levels of communication were utilized – informing (sharing and disseminating information), networking (exchanging information), collaboration (engaging over this issue over time), and transforming (engaging and coming to consensus on targets and activities together). Static presentations informed stakeholders as to previous progress and slippage, if any, during the previous SPP period. These presentations were often made at face-to-face and virtual meetings, recorded, and posted on the OSES website. The networking activities included face-to-face and virtual meetings guided by prompts and discussion questions; many of these sessions were recorded/posted. Synchronous and asynchronous virtual media were used as well and took the form of community forums. The OSES worked to ensure that information was available in a variety of communication modes including auditory, visual, closed captions, language other than English, asynchronous recording, interactive and face-to-face meetings, and interactive and virtual meetings.

The OSES grouped many SPP Indicators according to focus areas (EC, ACA, SEL, and PSO) and compliance. EC included Indicators 6, 7 and 12. ACA included Indicators 3 and 5. SEL included Indicator 4. PSO included Indicators 1, 2, 3, 13, and 14. For these indicators, presentations were designed around the 4 focus areas and for 3 different audiences – LEA staff; teachers; and parents/community members. The Advisory Council for Students with Disabilities (ACESD) and other advocacy groups provided feedback as to the appropriateness of the content for each audience. Content was designed using adult learning principles so that presentations were no more than 20 minutes each. Attached to each presentation was a short survey for participants to provide feedback on targets and activities using a simple format – too high, too low, or just right with a space for comments and explanations. Presentations/surveys were posted on the OSES website and then publicized by OSES staff, TA providers, parent and disability advocacy groups, the ACESD, and LEA directors using a variety of methods including flyers, announcements, postings on social media (Twitter and Facebook), and emails.
Presentations for all 4 areas, and all other indicators, and each of the 3 audiences were available from April through October of 2021. Repeated reminders and requests for input were sent regularly throughout this period.

\*June 2020 began soliciting input and involvement of LEA directors (6/1), ACESD (recording & email), Deaf/Hard of Hearing Partnership (6/4), SC Association of School Administrators (SCASA) (6/8), with the introduction of what the SPP indicators are and discussion of how to set and develop targets and improvement strategies. Mode of presentation was PowerPoint and virtual interactive discussions.
\*July 2020 Directors’ meeting and “flipped classroom” opportunities to orient LEA directors and staff to SPP indicators and how LEA determinations will impact new monitoring process (7/15, 7/22, and 7/29). OSES presented to SCASA's special education round table (7/27). All meetings were recorded and posted on the OSES website.
\*August 2020 Directors’ call to discuss priorities with changes to SPP to include discussion of priorities for SiMR and SSIP. Discussion of methodology and prioritization of being able to measure change vs. change over time; simplicity vs. comprehensiveness; implementation timelines of right vs. right now, and minimizing burden vs. gathering new information. Introduction to SPP and orientations were shared with the New Directors’ Leadership Academy (8/4). Informational presentations were shared with TA providers for feedback and guidance (NCSI) on 8/21. The August ACESD executive committee meeting was dedicated to the SPP and designed to solicit questions and feedback from videos on 8/28.
\*September 2020 ACESD full meeting and “flipped classroom” opportunities to orient members to SPP indicators and how LEA determinations are made and would impact outcomes under the new monitoring process (SoTA) on 7/15, 7/22, and 7/29. The full council virtual meeting in September was devoted to this as well.
\*November 2020 presentation to SCSAS special education round table was devoted to a discussion of Indicators 1 and 2 to talk about the new data source and its impact as well as to solicit input on methodology, baselines, and targets.
\*January 2021 The initial meeting with all internal OSES focus groups and data groups was held to discuss baselines and targets.
\*February 2021 The OSES met with all internal focus groups to solicit input on baselines and targets prior to stakeholder presentation creation. Discussion with the Parent Advocacy Stakeholder Group (2/16)
\*February and March 2021 Targets were set and videos developed to gather stakeholder feedback created. On 3/16 a discussion with the parent advocacy stakeholder group surrounding targets was held.
\*April 2021 All SPP videos and feedback surveys were created and posted to the website. SPP/APR and proposed LEA determinations information was presented at SCASA special education round table; links to the videos were also provided. Videos were sent again to all LEA Directors with live links. A summary of current baselines and targets sent again to all ACESD members; video links were sent again to all ACESD members in case a refresher was needed. The meeting on 4/16 used the flipped classroom style Q & A.
\*June 2021 SPP/APR target in-depth discussion with Directors Advisory Council, including opportunity for anonymous feedback.
\*June 2021 Community Forum/Town Hall Discussion
\*July 2021 An internal leadership meeting was held to review all current stakeholder feedback and determine adjustments as needed. Particular feedback in 3B (targets HS Math changed to incremental change vs. the trend line + standard deviation), 3D, 6A & 6B (moved to age level vs aggregate), 6C (determined need to solicit specific advocacy and TA groups for feedback), and 8 (determined more feedback was needed, made changes to the survey and how administred) were adjusted. The group also looked at stakeholder representativeness and discussed activities to solicit input from under-represented areas.
\*August 2021 The SPP was featured all month on the landing page of the SCDE webpage and included a description of the process and need for stakeholder feedback with links to target videos.
\*August 2021 Re-cap of all indicators and current set targets with some stakeholders’ suggestions for change was presented to ACESD.
\*September 2021 – Last push from all TA providers and advocacy groups to under-represented populations/areas for additional feedback was made.
\*October 22, 2021 final proposed targets were shared with ACESD and approved. SiMR and SSIP final feedback reviewed, with minor adjustments to scope based on feedback- will focus on just literacy and not add math.
\*November 2, 2021 meeting with Family Connections to begin planning for stakeholder training on family engagement and how to integrate their work with OSES work based on feedback received on indicators.
\*November 24, 2021 meeting with National TA providers on SPP/APR to review progress, finalized targets, and gain assistance on writing the SPP.
\*December 2021 internal meetings with Focus Groups regarding finalized feedback on indicators, targets, and any additional needs for writing the APR.
\*January 2022 finalized SSIP to ensure incorporation of all stakeholder feedback is correctly reflected in the SPP.

 **Describe the specific strategies implemented to engage stakeholders in key improvement efforts.**

Please refer to section above. In addition, the stakeholders (school-level teachers and staff as well as LEA staff) in the ten SSIP schools who had participated in the SSIP activities over the last 7 years provided annual and semi-annual input and feedback as to changes seen as a result of the previous SSIP activities.

**Were there any concerns expressed by stakeholders during engagement activities? (yes/no)**

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

Stakeholders expressed concerns about the lack of accelerated progress for students with disabilities and as a result, the SiMR was changed and activities have been developed that will have a direct impact on teachers (general and special education), thereby improving ELA skills for a much larger group of students with disabilities.

**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.**

NA

**Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.**

Science of Reading/DBI coursework through the LMS:
Year 1 (2021-2022): Creation of and piloting/validating courses; changes to courses based on evaluation feedback; examination and analysis of SC Ready results (post-COVID) state-wide test results for grades three through eight; and completion of courses by teachers to ensure validity and reliability of instruction within the courses.
Year 2 (2022-2023): Completion of coursework by first cohort of teachers; calculation of student results; and continued validation and reliability check of courses and changes to courses per results.
Year 3 (2023-2024): Completion of coursework by second cohort of teachers; calculation of student results; check of first cohort of teachers and students to see if there are long(er) term changes; fidelity checks for Year 2 (first cohort) teachers.
Year 4 (2024-2025): Completion of coursework by third cohort of teachers; calculation of student results. Check Years 2 and 3 teachers and students to see if there are long(er) term changes; fidelity checks for Years 2 and 3 teachers.
Year 5 (2025-2026): Completion of coursework by fourth cohort of teachers; calculation of student results. Check Years 2, 3, and 4 teachers and students to see if there are long(er) term changes; fidelity checks for Years 2, 3, and 4 teachers.
Year 6 (2026-2027): Completion of coursework by fifth cohort of teachers; calculation of student results. Check Years 2, 3, 4, and 5 teachers and students to see if there are long(er) term changes; fidelity checks for Years 2, 3, 4, and 5 teachers.
LETRS roll-out for target schools over the next two years as organized by the OELL.

**Describe any newly identified barriers and include steps to address these barriers.**

The use of a virtual learning platform (the LMS) should provide more ready and more direct access to instruction and supports by teachers. This will answer many of the challenges presented by face-to-face TA and PD such as time out of class, travel expenses, need for substitutes, and COVID restrictions and complications.

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

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, but OSEP cannot accept that revision because the State reported in the narrative that, "Due to the decreased participation and not having two consecutive years of individual level student data, the limited data are not valid or reliable and so could not be used to set baseline or targets."

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 revised baseline cannot be accepted, as noted above. The State must ensure its FFY 2025 targets reflect improvement.

The State did not provide the description of the numerator and denominator used to calculate its FFY 2020 data.

The State did not provide any data, aligned with the State-identified Measurable Result (SiMR), for this indicator. Therefore, OSEP could not determine whether the State met its target.

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

The State did not provide data for FFY 2020. The State must provide the required data for FFY 2021 in the FFY 2021 SPP/APR.

The State did not provide baseline data. The State must provide the required baseline data in the FFY 2021 SPP/APR.

The State did not provide FFY 2020-FFY 2025 targets. The State must provide the required FFY 2020- FFY 2025 targets in the FFY 2021 SPP/APR.

The State did not provide numerator and denominator descriptions in the FFY 2020 data table. The State must provide the required numerator and denominator descriptions for FFY 2021 in the FFY 2021 SPP/APR.

# 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:**

Rebecca C. Davis

**Title:**

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**Phone:**

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**Submitted on:**

04/28/22 11:12:40 AM

# 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. Percentage blurred due to privacy protection [↑](#footnote-ref-3)
3. Percentage blurred due to privacy protection [↑](#footnote-ref-4)
4. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-5)